

# Advanced Course on Health Information and Evidence for Policy-making



Analysis and report of participant response to the course held  
on 27 June–1 July 2017 in Sarajevo, Bosnia and Herzegovina





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## ABSTRACT

The Advanced Course is a significant capacity-building activity of the WHO European Health Information Initiative (EHII), and is organized by the Division of Information, Evidence, Research and Innovation at WHO Regional Office for Europe. Although anecdotal evidence had indicated that past Advanced Courses were successful, the Division of Information, Evidence, Research and Innovation wanted a deeper understanding of how the course content and modes of delivery affected participant satisfaction and the Advanced Course's capacity-building impact. Consequently, a set of quantitative and qualitative tools were used to survey and interview participants on the 2017 Advanced Course. Two qualitative methods were used on three sources of data. This combination of methods enabled the analyst to differentiate positive and negative comments, assess the relative importance of themes identified in the data, and investigate which content, lecturers, and modes of delivery were most successful and how the course might be improved.

Six major themes and 23 sub-themes were identified in the participants' comments and interview responses. Eighty percent of the comments and 87% of the interview responses were positive. The remaining comments and interview responses were almost equally divided between neutrally expressed recommendations for the course and negative comments. The results describe a course that is well balanced between theoretical knowledge and practical application of that knowledge, with modules that build upon one another.

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## Background

The Advanced Course on Health Information and Evidence for Policy-making is a regular follow-up to the Autumn School, WHO Regional Office for Europe's flagship training course on health information and evidence for policy-making (1). Each year, Member States that have attended the Autumn School select topics that will strengthen their technical capacity to use health information to implement Health 2020 (2). Courses emphasize assessment of data quality, use of WHO tools and standards to collect, organize and analyse data, and development of strategies to transform health information into health policy. The Advanced Course is delivered as a five-day series of lectures and workshops that provide an in-depth exploration of the topics taught in the Autumn School. Topics covered in the 2017 Advanced Course workshops were: eHealth and eHealth strategy development, data sources in health information systems, well-being and qualitative methods, knowledge translation and development of issue briefs, and effective communication of health information (3).

The Advanced Course is a significant capacity-building activity of the WHO European Health Information Initiative (EHII) (4). Each year, it is hosted by a different Member State and organized by the Division of Information, Evidence, Research and Innovation (DIR) at WHO Regional Office for Europe. In 2017, DIR developed and used a set of quantitative and qualitative tools to better understand the capacity-building impact and participant satisfaction of the 2017 Advanced Course. Analysis of the results of the surveys, interviews and observations collected will be used to determine the degree to which the course achieved its objectives and to identify improvements for future DIR courses. This report summarizes the results of a systematic analysis of the components of those surveys, interviews and observations.

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## Objectives

The purpose of this analysis and report is to better understand the effectiveness of the 2017 Advanced Course in achieving the desired learning goals. The survey and interview instruments established the primary scope of the enquiry, which centred on the appropriateness of the course content, the effectiveness of the course as measured by the acquisition of new skills or knowledge, and the participants' level of satisfaction with the modes and styles of content delivery. The qualitative components of the course surveys, interviews and participant observation were included to extend the scope and depth of the boundaries of enquiry established by the quantitative components of the survey. Accordingly, this analysis and report can be used to gauge more completely the success of the course at meeting participants' expectations and to identify ways in which the Advanced Course and other DIR courses might be improved.

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## Setting

The 2017 Advanced Course was held in Sarajevo from 27 June to 1 July 2017 and hosted by Bosnia and Herzegovina. Like the Autumn School, the course is aimed at technical experts who work in the area of health information and statistics, or public health experts who are engaged in data analysis and reporting of health information to the Ministry of Health. Twenty-four people from 11 Member States participated in the course. They were nominated to participate by their Ministries of Health. Seventeen of the 24 participants had also attended the preceding Autumn School in 2016.

Each day of the course focused on a single topic that consisted of a module broken down into four to eight sessions, which were led by subject matter professionals with both theoretical and technical expertise. Modules were designed to be interactive and typically alternated between lectures and group work, followed by a plenary discussion or presentation. The training day was eight hours long, with two short breaks in the morning and afternoon and a longer break for lunch.

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## Approaches

Rigorous and systematic analysis requires the use of multiple sources of information and several methods of investigation and analysis. This process is often described as triangulation (5). In some forms of qualitative analysis, data collection is unstructured, and knowledge emerges from observation and unstructured interviews of informants. In others, specific questions or problems are the focus of the analysis. In this case, comments gathered during survey responses and post-course interview responses were the primary method of data gathering. Both the surveys and the interviews were tightly structured and comments and responses were strongly linked to the structures of the data collection instruments. Consequently, identified themes were, if not predetermined, most often reflections of the survey and interview questions. The advantage of using structured instruments to collect data for analysis is that they can be tailored to address the specific needs of the DIR to understand the successes of the 2017 course and identify ways to improve future Advanced Courses. Data sources are described in the collection and data management section of this report. Methodologies are described in the analytical methods section of the report.

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### Collection and data management

Four sources of information were used in this analysis: the comment sections of survey forms administered during the course, the feedback from the observation of a groupwork session, the transcripts of structured interviews conducted after completion of the course, and the ranked responses to the survey questions.

#### Daily and course survey forms

At the end of each day, participants were asked to complete a set of evaluation forms covering the day's activities. At the end of the course, a comprehensive survey was distributed. Both the daily and course surveys were available in English and Russian and contained quantitative and qualitative components. The comment sections of the survey forms were structured to shed light on the quantitative responses and also to create an opportunity for respondents to provide other

feedback about the course. Because the qualitative sections were related to the quantitative section, the subject matter and structure of the quantitative section shaped, but did not constrain, the scope of the survey comments. For that reason, even though this report primarily concerns the qualitative elements of the course evaluation, it is worthwhile briefly describing the complete survey contents and explaining how survey questions helped to shape the thematic structure of survey comments. An example survey form is shown in Annex 1 to this report.

At the end of each module, course participants rated the day's sessions by completing a written form prepared for each individual session. Each session evaluation form consisted of six statements about a session's content and its effectiveness, as well as three questions about the perceived quality of instruction and instructional materials. The statement and questions were identical for each session. The nine survey elements were ranked, on a scale of 1 to 5, according to the degree of agreement with the statement or the perceived quality of the instructional element. Higher numbers reflected more agreement with a statement or the assessment of the quality of the session. A comments section, the qualitative component of each survey, was included at the end of each session survey. Directions for the comment section included a request to elaborate on survey responses, to add other relevant comments or suggestions, and to offer any thoughts about how to improve the session for future Advanced Courses. Consequently, the structure and purpose of the questions (or quantitative portion of the surveys) can be used to anticipate or form an initial thematic structure for analysis of the comments themselves.

At the end of the course, a survey similar to the daily surveys was conducted. This survey consisted of 13 questions about the course and a five-point rating scale where 1 was the least favourable and 5 the most favourable response. A comment section was included after the final question. Directions for this comment section included an opportunity to elaborate on responses and a request to provide any thoughts on how to improve the course for the future.

A total of 567 session and course surveys were collected from participants during the course. Although comments within a single day could be identified as belonging to a specific, unidentified individual, individuals were not linked from one day to the next. Although it was possible to determine the number of participants who returned comments on any one day, therefore, it was not possible to determine the total number of individuals who chose to comment across the whole of the survey.

Returned surveys were organized by day and scanned into PDF documents. Comments in Russian were translated by a Russian-speaking member of DIR and added as notes to the associated PDFs. The PDFs were given to the analyst of this report, and the analyst recorded each of the written comments in an Excel spreadsheet to aid analysis.

### Participant observation

Participant observation was also used as a qualitative evaluation method. It was conducted by a member of the WHO Secretariat present at the course, whose task was to monitor and record the behaviours, interactions and engagement of participants during groupwork sessions. The observer recorded the observations on a short feedback form that contained six questions about group interactions and sought to identify structural, design or execution issues. The observations were recorded in a Word document which was provided to the analyst. A copy of the blank observation form and directions is included in Annex 2.

### Participant interviews

The third source of data for the qualitative analysis of the course took place shortly after the course's completion. It took the form of structured interviews with five volunteer participants, asking for their thoughts on particular aspects of the course that they liked and disliked, and ways in which the course could be improved. Each interview lasted for approximately 20 minutes. The interview script asked about course topics, lecturers, organization and logistics. The interviews also offered an opportunity to discuss any topics which the volunteers would not have felt comfortable disclosing openly or in writing. Each interview was recorded and then transcribed. The confidentiality of the interviewees was maintained throughout the interview process and each interview transcript was anonymous. The interviewees

could request to view a copy of their transcript and revise the recorded statements within five working days of receipt of the transcript. The analyst saw no record or other evidence of any such request. A copy of the interview questions and instructions is included in Annex 3.

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## Analytical methods

Several qualitative methods were used to analyse the text from the three data sources. The unit of analysis for the session surveys and the course survey was the text within a single comment. The unit of analysis for the structured interviews was the transcribed text response to a single interview question.

Sentiment analysis or natural language processing was used to assign positive, negative or neutral tones or feelings to the unstructured comments of participants. Two untrained automated tools were used (6,7), which provided cross-validation for the assignment of sentiment. Disagreement between the two tools was investigated by the analyst and a final sentiment schema was used to define the sentiment of participant comments.

Thematic analysis was used to identify and encode categorical themes that emerged from the responses to both comments and interview transcripts.

Word and phrase frequency was also used to identify the relative importance of recurring themes and validate the thematic scheme.

The participant observation was used as a cross-validation tool to gain further insight into conclusions reached by the analyst.

The ranked responses to each survey question were analysed separately, and the numerical average of the responses was calculated for each question. The quantitative survey results were used to validate the results of the sentiment analysis and to check the conclusions reached in this report.

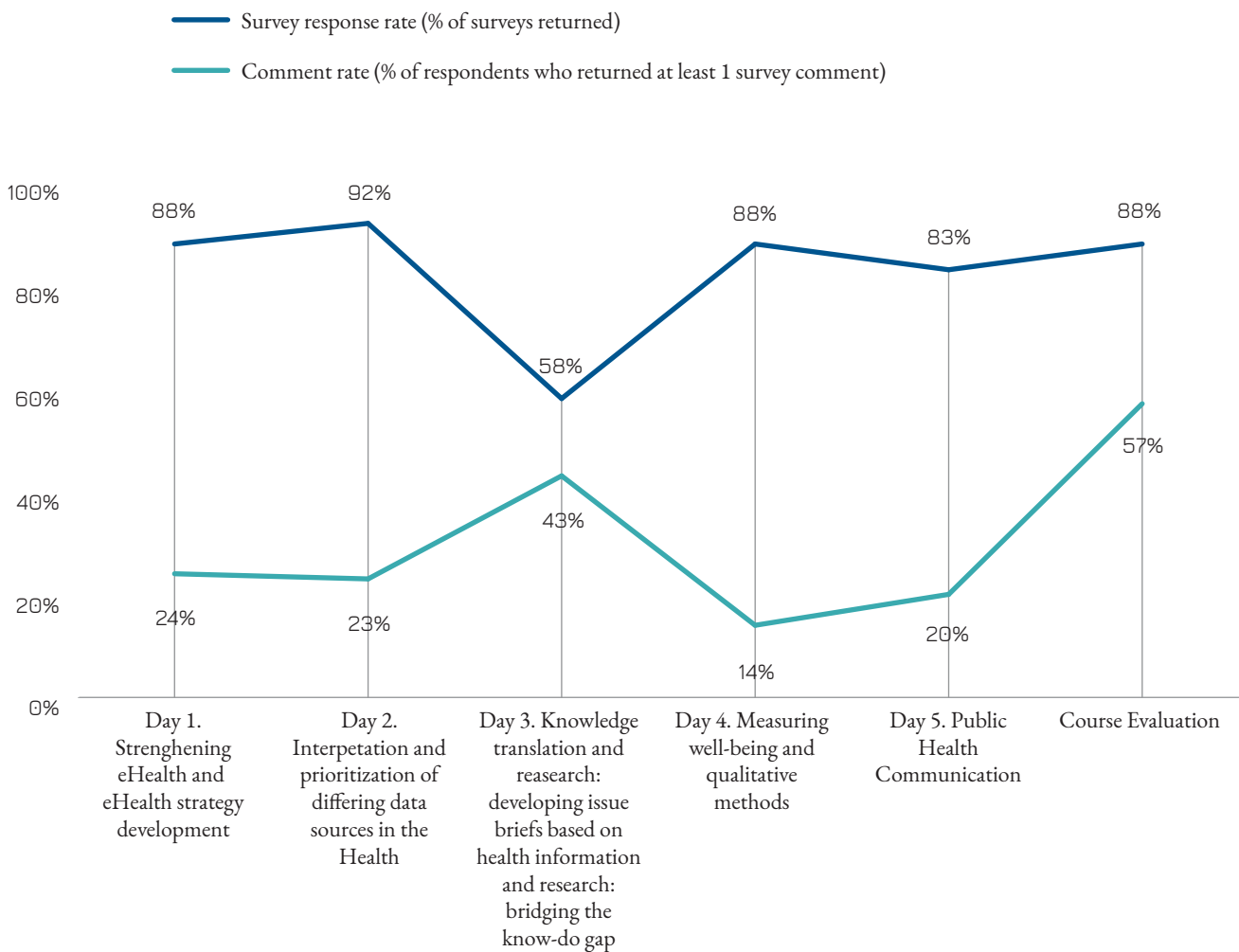


## Results

### Survey response rates

The Advanced Course 2017 was held over five days. Each day focused on a single overarching topic and the day’s sessions all related to that topic. The number of sessions varied by day/topic and 28 different sessions were held in total. At the end of each day, surveys were distributed covering each session. Another survey was distributed at the end of the course. The overall survey response rate was 81% and 72 individual comments were recorded. The distribution of the survey and comment rates is shown in Fig. 1.

Fig. 1. Survey and comment response rates, by day and topic





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## Survey sentiment analysis

### Purpose and use of sentiment analysis

The purpose of sentiment analysis is twofold. Firstly, it provides a proportional understanding of the positive and negative feelings expressed by respondents about the course. Secondly, categorization of comments by subjective emotional content makes it easier to group and examine successful and less successful aspects of the course, both across the course and within a topic.

When this sentiment is cross-referenced with data themes and other data sources it provides a powerful tool to pinpoint what is right about the course and what needs improvement. Sentiment analysis can also help to uncover aspects of the course not explicitly or effectively targeted in the data collection process. For instance, although the interview script specifically asks if there were any lectures that were “not engaging”, only one participant answered this question in the affirmative. This illustrates the difficulty of gaining insight when the overwhelming number of responses to the course are positive. Because only one participant expressed an opinion on a lecturer’s lack of engagement, the ways in which course participants did or did not experience engagement were not fully revealed by this question. However, the sentiment analysis of positive survey comments confirmed the importance of engagement (eight comments) and helped to define some of the attributes of what it means to be engaged:

- “... it was a pleasant training with ... new information”
- “Excellent! Fun, engaging, to the point.”
- “... easy to understand. The audience very active.”
- ” ... the use of graphs and narrative made it very clear and interesting.”

These comments strongly suggest that being engaged is an experience that is fun and pleasant, and offers new and interesting information that is presented in a clear and concise way. This description of engagement can then be compared to the analysis of the survey question, where the absence of engagement was attributed to challenging content, inadequate preparation for the new content and insufficient time allowed to understand, assimilate and act upon the new knowledge. Seeing both the positive and negative sides of engagement enhances understanding of the importance and attributes of an engaging experience, and the barriers to achieving that experience.

### Results of survey sentiment analysis

Of the 72 comments collected from the daily and course surveys, 60 were collected from session evaluations and 12 from the course evaluation. Some comments were repeated for multiple sessions within a day/topic, for example, “Everything was the best”. As the respondent intended the same comment to apply to more than one session, these identical comments remained in the analysis pool and the relevant sentiment was assigned to the appropriate sessions. Two of the session-level comments were removed from the sentiment analysis pool because they had no relevance to the content or effectiveness of the session. For instance, one of the removed comments simply conveyed that the respondent had missed a session.

The remaining 70 comments were individually analysed and categorized along a continuum of positive to negative. Final classification required four steps: classification by two commercially available text analysis tools, comparison and reconciliation of the results of the automated classification, adjustment of the categories to fit the actual data sample, and final classification of the comments by the analyst.

The majority of comments were classified by both automated tools as positive. Although all of the comments were individually reviewed by the analyst, particular attention was paid to comments where the two automated tools did not agree on the classification. During this process, it was discovered that all of the comments classified by one tool as having no classification (NONE) were classified by the other tool as NEUTRAL. Those classifications led the analyst to conclude that the lexical analysis for the two tools used similar criteria for their NONE and NEUTRAL coding and she therefore

reclassified NONE as NEUTRAL. A summary of the first step of sentiment classification of the 70 comments is shown in Tables 1 and 2.

Table 1. Comment sentiment analysis by text classification tools

Result	Tool 1 [5] <sup>1</sup>	Tool 2 [6]	Matches
Negative	8	14	4
Neutral	7	11	4
Positive	57	47	43

Table 2. Distribution of mismatched comments

Tool 1	Tool 2		
	Negative	Neutral	Positive
Negative		1	1
Neutral	0		3
Positive	7 <sup>2</sup>	7	

Analysis of the comments that were classified differently by the two automated tools revealed that some of the comments contained multiple statements with differing sentiments. For example, the comment “As I am not responsible for eHealth it was not useful to my everyday work. But it was a good session” clearly communicates two sentiments, one negative and the other positive. That the session content was not personally useful to the respondent is a negative response. However, the respondent also thought that the session itself was good. The way in which it was good was not elaborated on, but this is clearly a positive sentiment. Many of the mismatched comments contained multiple sentiments.

Comments classified as neutral by the tools were also closely examined. In some instances, it appeared that the assignment of neutral to a comment was a failure of the automated tools. For example, “Too much information for so little time” is not a neutral comment: it clearly expresses dissatisfaction with one or more aspects of the session. In other cases, neutral comments are better understood as suggestions or recommendations for adjustment of future sessions. For example, the comment “I would recommend conducting the course from 9:00 to 16:30, reducing the time for coffee breaks and lunch” contains important feedback. Classifying it according to its intent, as a recommendation, is more useful.

Even though using the two tools did not result in a completely successful sentiment analysis, it provided a very useful framework from which the final assignment of analysis could be made. That framework provided an analytical head-start for the next step, the construction of new sentiment categories and operational definitions that better reflected the data and the purpose of the qualitative examination. The final sentiment classification was validated by comparing the categorization of comments to the quantitative scores of the associated surveys (available in Annex 4).

The sentiment categories that emerged from the first three steps of the analysis process are defined below.

- **Negative.** The comment presents a complete or overwhelmingly negative opinion of some aspect or aspects of a session or of the course: for example, “Too short” and “Too little time spent on the topic before group work.”

1 Tool 1 used two levels of positive sentiment: positive and positive plus. For this analysis both positive plus categorizations were aggregated and categorized as positive.

2 In each of the instances where Tool 2 classified a comment as negative and Tool 1 classified the same comment as positive, the word “very” was present within the text. There appears to be a systematic error in Tool 2 and the final classification of each of these comments was positive.

- **Mixed negative.** The comment offers both negative and positive opinions of some aspect or aspects of a session or of the course, and the negative view is more strongly stated or related to more subjects than the positive view. Only one comment was assigned to this category.
- **Recommendation.** The comment is primarily neutral in tone and contains a specific suggestion to improve some aspect or aspects of a session or of the course: for example, “More examples would be useful” and “It is interesting to hear about other countries’ strategies, but it would also be interesting to hear about the implementation of the strategy – was it successful?”
- **Mixed positive.** The comment offers both negative and positive opinions of some aspect or aspects of a session or of the course, and the positive view is more strongly stated or related to more subjects than the negative view: for example, “Lecturer was very professional and easy to follow. Some slides had fonts too small to read. I would prefer a bit more participant involvement, but the lecture style of delivery was also more effective than usual.”
- **Positive.** The comment presents a completely or overwhelmingly positive opinion of some aspect or aspects of a session or of the course: for example, “An excellent lecture, lecturer very informative!”, and “Super good work! Very interesting lecturer and topic. The use of graphs and narratives made it very clear and interesting. I learned a lot! Thank you!”

The new categories and operation definitions were used by the analyst to code all comments by their sentiment. The most comments were returned after Days 1 and 3 sessions. The smallest number of comments were returned after the Day 4 sessions. Only positive comments were returned for the sessions held on Days 1, 2 and 5. The results, aggregated by day and topic, are shown in Table 3.

Table 3. Sentiment analysis by day and topic

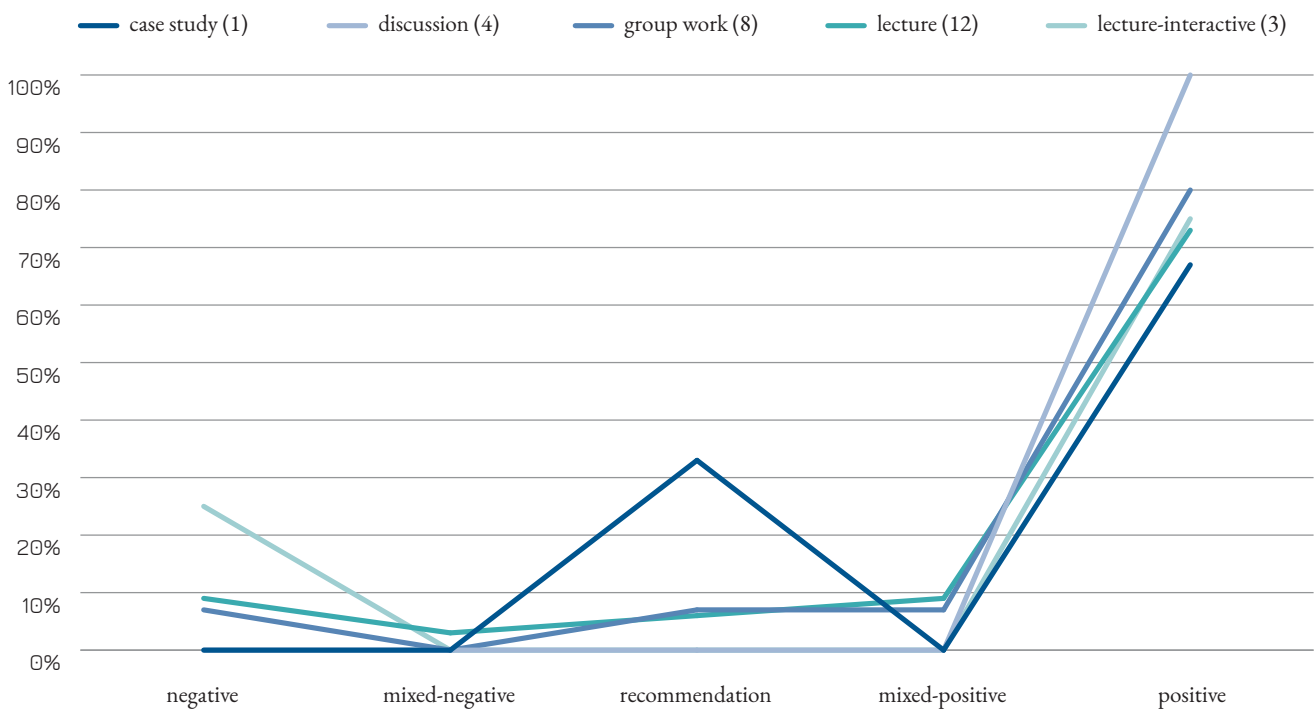
Day/topic	Negative	Mixed negative	Recommendation	Mixed positive	Positive	Total	Response rate <sup>3</sup>
Day 1. Strengthening eHealth and eHealth strategy development	4	1	4	4	4	17	(5) 24%
Day 2. Interpretation and prioritization of differing data sources in the health information system					8	8	(5) 23%
Day 3. Knowledge translation and research: developing issue briefs based on health information and research: bridging the know-do-gap					21	21	(6) 43%
Day 4. Measuring well-being and qualitative methods	1				3	4	(3) 14%
Day 5. Public Health Communication					8	8	(4) 20%
Day 5. Course evaluation			3	3	6	12	(12) 57%
<b>Total</b>	<b>5</b>	<b>1</b>	<b>7</b>	<b>7</b>	<b>50</b>	<b>70</b>	

3 The response rate is given as both the number of participants who added comments to their survey form and the percentage of participants who added comments relative to the number of participants who returned surveys.

Because of the number of negative comments about Day 1 and the low response rate for Day 4, comments from Day 1 – Strengthening eHealth and eHealth strategy development and Day 4 – Measuring well-being and qualitative methods can be examined to identify parts of the course that did not work well. Ways to improve the course were suggested in the Day 1 surveys and the course evaluation. Positive aspects of the course were noted for all days. In order to understand trends and issues within and across sessions more completely, these results will be reported by thematic alignment in the next section, Thematic identification.

An implicit hypothesis of the course evaluation tools is that the course should present both the theoretical foundations and practical applications of a topic. The structure of the modules balanced the theoretical and practical by offering sessions that often alternated between lectures, group work and discussion. Consequently, an analysis of sentiment by session mode was performed. Session modes were determined by the survey form titles. With the exception of case studies, the distribution of sentiments within modes of delivery showed almost identical patterns. The distribution of sentiment by mode of delivery is shown in Fig. 2.

Fig. 2. Distribution of sentiment by mode



The results of this analysis suggest that case study sessions were the least successful mode of delivery and discussion sessions the most successful. However, there was only one case study session and three comments on that session. Consequently, no conclusions should be drawn about the appropriateness of case study sessions for the course. However, the content of the case study recommendation is likely to improve the next version of the course. In this case, the comment offers very specific advice about the case study: “It is interesting to hear about other countries’ strategies, but it would also be interesting to hear about the implementation of the strategy – was it successful?” Similarly, positive comments about the discussion mode of delivery offer insights into the attributes of a good discussion session: “It is good to get feedback to improve future issues briefs. Extremely important. And also, to see the different approaches.” (that is, feedback and hearing different approaches to the same issue or problem).

## Thematic identification

Thematic identification is one of the most common methods of qualitative analysis (8). Careful reading and re-reading of the raw text allows the analyst to identify themes found within the text. The classification or coding systems often go through several iterations as the classification schema is tested to make certain that the codes are clearly defined and fit all of the data. For this report, an additional data source was used to recognize and validate themes, and make certain that the thematic structure corresponded to the purpose of the analysis, that is, to identify the ways in which the course was successful and how the Advanced Course and other courses might be improved. That other source was the text of the survey and interview questions. The thematic schema used is shown in Table 4.

Table 4. Thematic schema of participant comments and interviews

Major thematic categories	Code	Description
<b>A</b> General remark	A1	course or module
<b>B</b> Module/course content	B1	relevant/useful/practical
	B2	organized
<b>C</b> Knowledge or skills gained	C1	learning goals were met
	C2	learned new information or skills
	C3	balance of theoretical and practical
	C4	depth of learning
	C4.1	basic
	C4.2	challenging
	C5	adequately prepared for learning
<b>D</b> Learning experience	C6	allocation of time
	D1	high-quality lecturer/facilitator
	D2	fun/pleasant
	D3	interesting/engaging/exciting
<b>E</b> Mode of delivery	D4	peers
	E1	lecture
	E2	slides
	E3	examples
	E4	discussion
	E5	exercises and practice
<b>F</b> Administration	E6	group work
	F1	conference facilities
	F2	conference administrative arrangements
	F3	conference location

Multiple themes were identified in many of the participants' comments. This was particularly true of comments contained within course surveys and session comments that contained multiple sentiments, for example, a positive comment and a recommendation. There were 138 themes, assigned to the 70 coded survey comments. Multiple major thematic categories were found in all module comments, ranging from four themes in the public health communication module to all six major themes (A–F) in the course evaluation comments. Comments about the learning experience and knowledge/skills gained were prominent in the knowledge translation and research module. The learning experience was the most



commented on in three of the other four modules. The content of the eHealth module was the major theme found in that module's comments. Fig. 3 shows the differences in both number of comments and distribution by theme between the modules.

Fig. 3. Distribution of themes by module

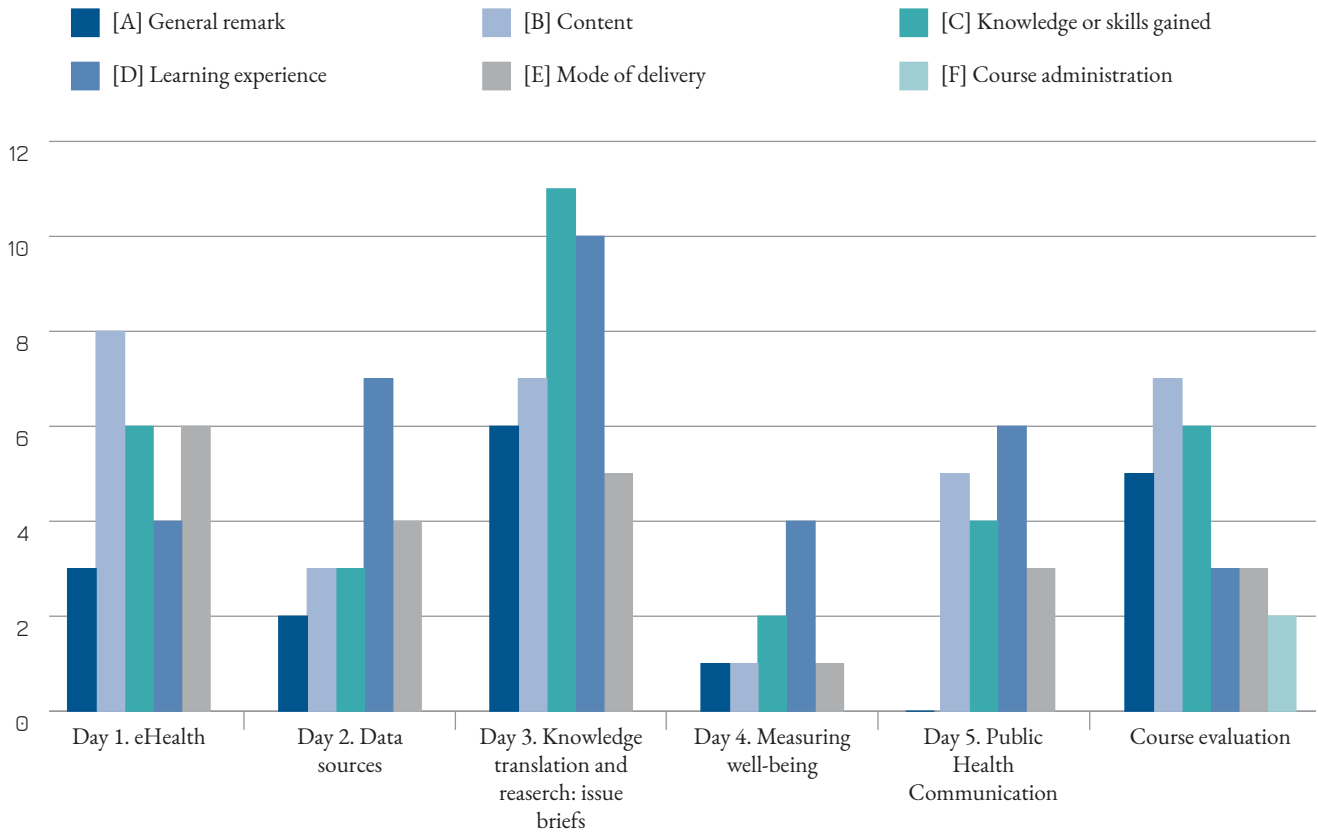


Fig. 4 shows that the content and the knowledge/skills gained received the most negative remarks across all five modules. This suggests that although comments about the 2017 Advanced Course were predominately positive, the course might be improved by adjusting some of the course content and fine-tuning that content so that learning expectations are met. Fig. 5 shows how the negative comments in those two themes are concentrated in the first day of the course, the module on eHealth.

Fig. 4. Distribution of sentiment by theme

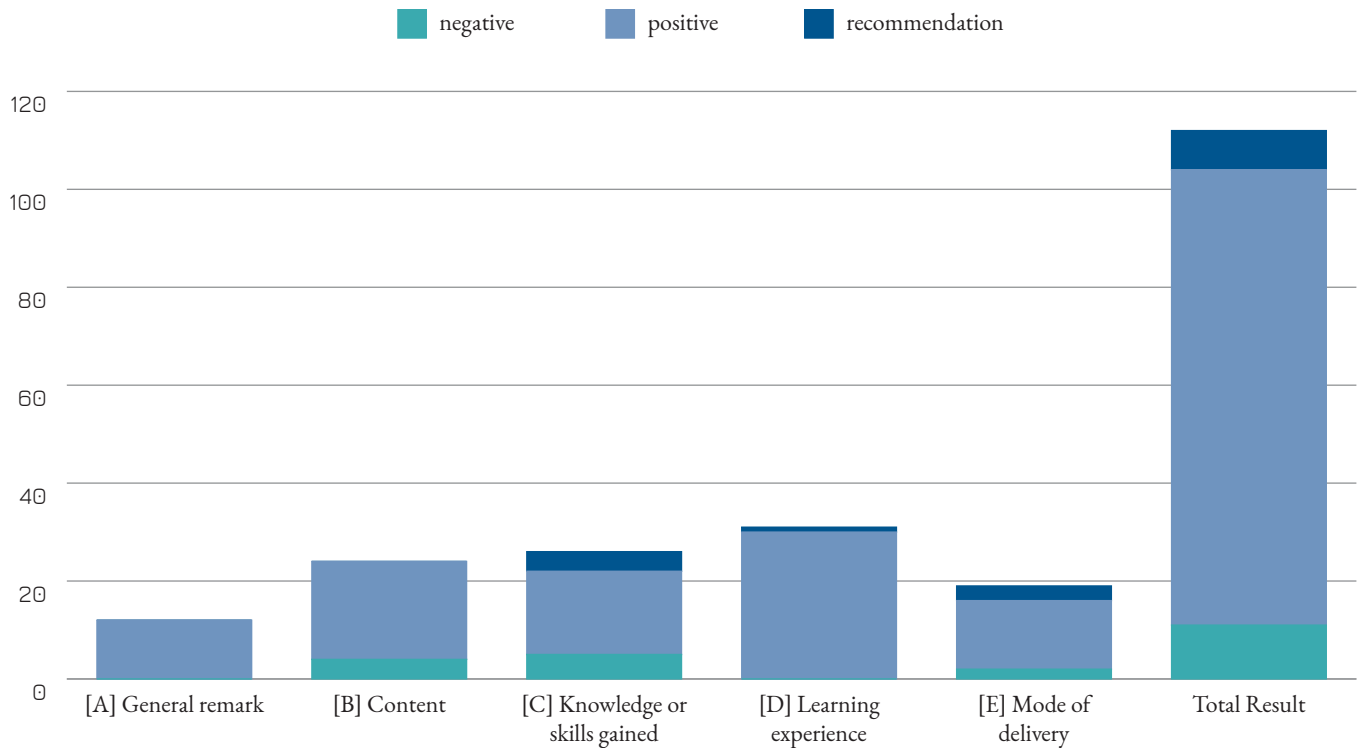


Fig. 5. Distribution of negative sentiments with Content and Knowledge or skills gained themes

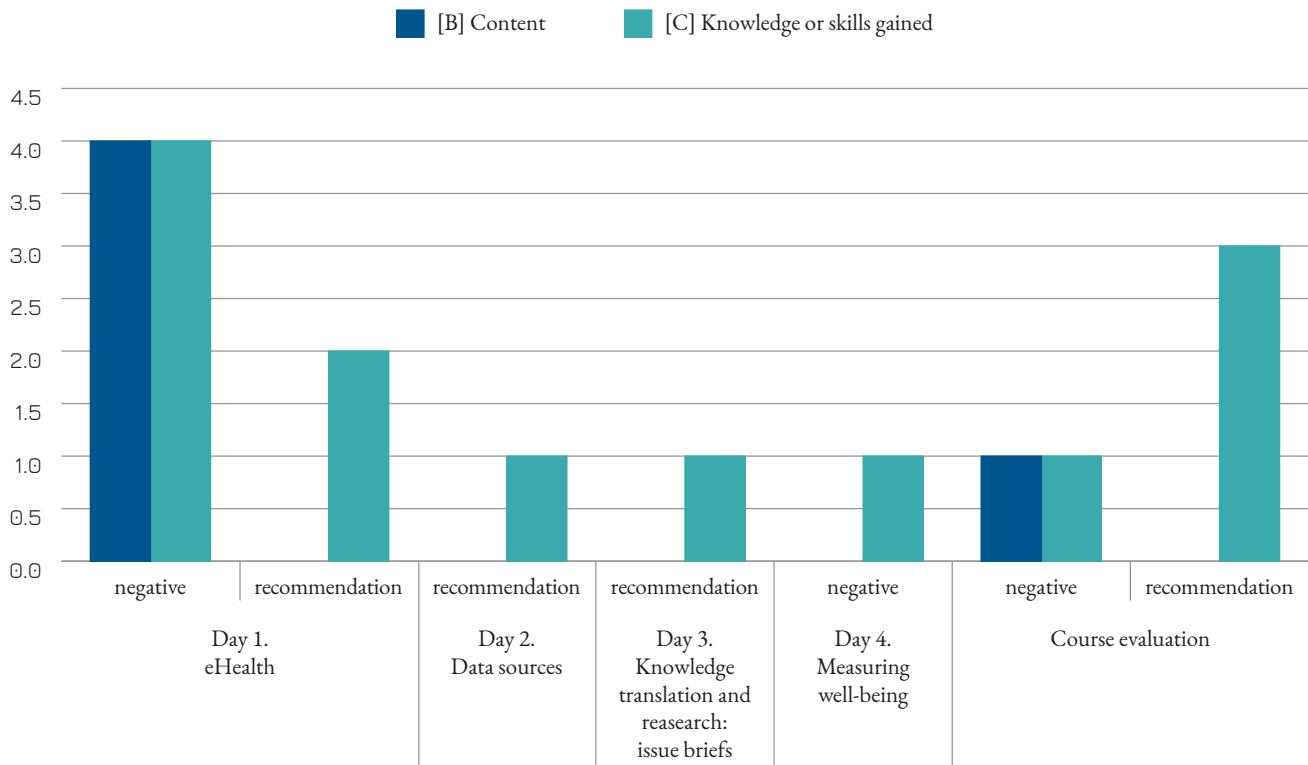
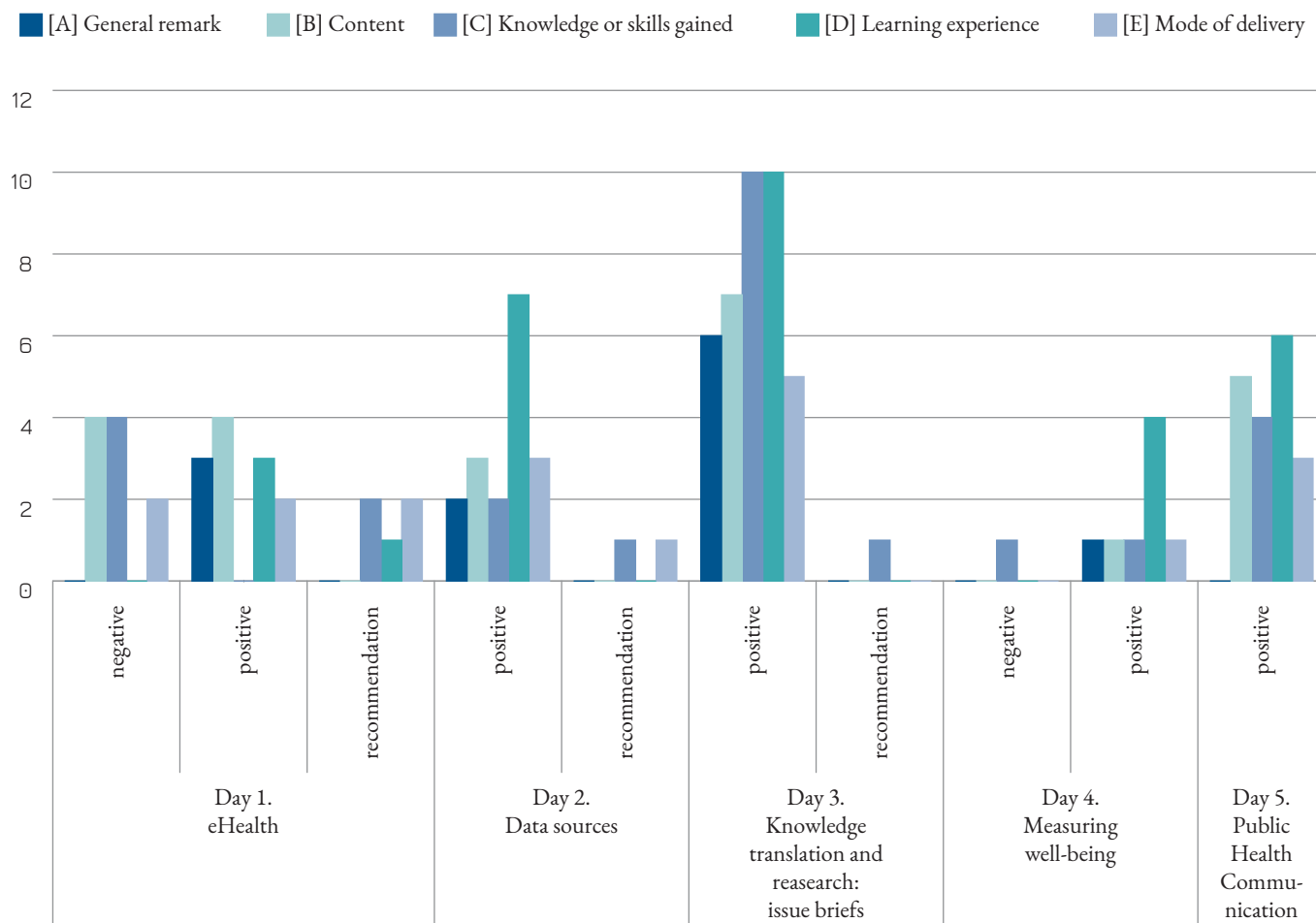


Fig. 6. gives a breakdown of all of the comments by sentiment (negative, positive and recommendation) within the five modules of the 2017 Advanced Course, organized by major theme. The knowledge translation and research module, which focused on issue briefs, stands out for both the number and thematic spread of the comments. The module on public health communication did not receive as many comments; however, they were all positive. The module-level analysis section identifies what went right with those two modules.



Fig. 6. Thematic and sentiment assignment of comments, by module



## Module-level analysis

### Day 1. Strengthening eHealth and eHealth strategy development

The first course module had eight sessions, more than any other module. Not surprisingly, the comments about this module also had the broadest cross-section of themes and sentiment. The most common theme in these comments concerned the relevance, usefulness and practicality of the module’s content (B1). Themes found in the comments about participants’ experiences on the first day of the course are summarized in Table 5. The relevance and usefulness of the module’s content and time allocation received most comments.

In order to understand those aspects of the eHealth module that were successful and those that could be improved, a closer examination was performed of the themes and sentiment by session. Tables 6, 7 and 8 show the data associated with the commentary that illustrate the positives and negatives of this module.

Table 5. Thematic representation of Day 1 comments

Topic	General remark	Content	Knowledge or skills gained			Learning experience			Mode of delivery				Total
	course or module	relevant, useful, practical	learning goals met	learned new information or skills	allocation of time	high-quality lecturer or facilitator	interesting, engaging, exciting	peers	lecture	slides	examples	discussion	
Setting the scene		1				1	1	1	1	1			6
Introduction to eHealth and WHO-ITU eHealth Strategy Toolkit	1	1		1									3
Developing an eHealth vision and action plan	1	2			2					1			6
Developing an eHealth monitoring and evaluation framework					2							1	3
eHealth strategies in practice – case studies	1	1	1				1				1		5
Group: Developing an eHealth vision and action plan		2											2
Group: Developing an eHealth monitoring and evaluation framework		1											1
Group: Establishing national governance for eHealth											1		1
<b>Total</b>	<b>3</b>	<b>8</b>	<b>1</b>	<b>1</b>	<b>4</b>	<b>1</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>2</b>	<b>2</b>	<b>1</b>	<b>27</b>



Table 6. Themes and sentiments for Setting the scene

Sentiment	Content	Learning experience			Mode of delivery			Total
	relevant, useful, practical	high-quality lecturer or facilitator	interesting, engaging, exciting	peers	lecture	slides	examples	
Negative						1		1
Recommendation				1				1
Positive	1	1	1		1			4
<b>Total</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>		<b>1</b>	<b>6</b>

Participant feelings about the Setting the scene session were largely positive: “Highlighting the coming course and also the previous course in a short time is really necessary. Well done!” This comment is representative of the positive comments and alludes to the allocation of time theme. (Because the allocation of time was not directly referred to, it was not coded as a theme.) However, as shown in Table 7, it supports the participant’s concern about not having enough time for the sessions presented in this module. Suggestions for improvements were identified in the classification process and are included below.

- “Some slides had fonts too small to read.”
- “I would prefer a bit more participant involvement but the lecture style of delivery was also more effective than usual.”

Table 7. Themes and sentiments for eHealth lectures and case studies

Sentiment	General remark	Content	Knowledge or skills gained			Learning experience	Mode of delivery			Total
	course or module	relevant, useful, practical	learning goals met	learned new information or skills	allocation of time	interesting, engaging, exciting	slides	examples	discussion	
<b>Introduction to eHealth and WHO-ITU eHealth Strategy Toolkit</b>										
Negative		1		1						2
Positive	1									1
<b>Developing an eHealth vision and action plan</b>										
Negative		1			2		1			4
Positive	1	1								2
<b>Developing an eHealth monitoring and evaluation framework</b>										
Negative					1					1
Recommendation					1				1	2
<b>eHealth strategies in practice – case studies</b>										
Positive	1	1				1		1		4
Recommendation			1							1
<b>Total</b>	<b>3</b>	<b>4</b>	<b>1</b>	<b>1</b>	<b>4</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>17</b>

The general comments about the session were positive; however, comments on the specific themes were evenly distributed between positive and negative sentiments (7/7). The most common themes concerned the relevance, usefulness and practicality of the session content and the allocation of time for the session. In the latter case, comments were either negative or suggested a change. Clearly, the time allocated for some of the sessions was not considered appropriate. In this case, too little time was allowed for the sessions.

- “Too short.”
- “Very much information in very little time. If the topic is new then it is difficult to concentrate and remember everything in so little time when presented so quickly. Too much text on the slides – hard to concentrate while listening to the lecturer. However, the presented material is definitely useful for those who will have to make an eHealth vision and action plan.”
- “Too much information for so little time.”
- “It might have been longer session as there was much more information to grasp.”

The concern about not having enough time was repeated in the course evaluation comments, and the interview contained a question on the interviewees’ feelings about the length of the daily session and course. The course evaluation and interviews contained two strategies identified by participants to address this concern: sending materials or assignments to participants before the start of the course, and lengthening the duration of the course. Reducing course content was not considered a solution to this issue and others felt that the time was adequate for the learning goals to be met. The following comments are typical of those opinions.

- “Please, send the materials at least a week in advance.”
- “I wouldn’t have minded one or two days more ... Maybe there should be homework for participants to research a particular subject prior to the course.”
- “Kind of long, but would be pity to miss something if shortened.”
- “Tough course. However, don’t think it’s possible to make it shorter. It is doable.”



Feelings about the usefulness and practicality of the eHealth sessions were divided and appear to depend upon both the state of eHealth within a country and whether eHealth is within the scope of a participant’s professional responsibilities. Comments that represent that divide follow.

- “... presented material is definitely useful for those who will have to make an eHealth vision and action plan.”
- “As I am not responsible for eHealth it was not useful to my everyday work.”

The case study session was very positively received. However, the analysis points to the need for some changes or improvement in this module. Given the positive feelings about this session, the lecturer might want to review the session to determine if its success can be applied to other sessions within this module. Here are two comments praising this session.

- “This was great!”
- “Useful real world examples of functions.”

Table 8. Themes and sentiments for eHealth groupwork sessions

Sentiment	Content	Mode of delivery	Total
	relevant, useful, practical	examples	
<b>Group: Developing an eHealth vision and action plan</b>			
Negative	1		<b>1</b>
Positive	1		<b>1</b>
<b>Group: Developing and eHealth monitoring and evaluation framework</b>			
Negative	1		
<b>Group: Establishing national governance for eHealth</b>			
Recommendation		1	<b>1</b>
<b>Total</b>	<b>3</b>	<b>1</b>	<b>4</b>



There were only three comments about the three eHealth group sessions, and only four themes were coded for those comments. The comments reinforce the previous discussion of the eHealth module. The relevance and usefulness of these sessions depend upon participants' prior experience with eHealth and whether eHealth has a direct impact on their responsibilities. Given that modules are designed to balance theoretical and practical content and sessions, and that the sessions build upon one another, participants who struggled or did not find the theoretical aspects useful could be expected to have the same issues with the hands-on group sessions. The following comment articulates the struggle of some participants with this group of sessions.

- “It is difficult to measure the vision when you do not have strategy and to agree on indicators for outcome and output. It might be only my opinion but eHealth Strategy is not in my reach in my country; therefore it is good to know but not that practical to me.”

## Day 2. Interpretation and prioritization of differing data sources in the health information system

Comments for the module on data sources for health information were extremely positive and covered all the major themes relevant to sessions. The sessions were viewed as relevant and the lecturer was praised for the quality of their lecture and leadership. Group sessions were “well led” with “good examples ... and ... discussion”. For one participant, even though the lecturer was excellent, future lectures on data sources might be improved by adding more depth and examples to the session. “The lecturer was very good, interesting and easy to follow. Although, there was not much new for me. The topic is very important and I would have liked to hear more specific examples, more in-depth.” Table 9 illustrates the breadth of the themes that were so positively commented on.

Table 9. Themes and sentiments of comments on Interpretation and prioritization of differing data sources

Sentiment	Themes												Total
	General remark	Content	Knowledge or skills gained			Learning experience			Mode of delivery				
	course or module	relevant, useful, practical	learned new information or skills	depth of learning: basic	allocation of time	high-quality lecturer or facilitator	fun, pleasant	interesting, engaging, exciting	peers	examples	discussion	group work	
<b>Overview of data sources</b>													
Positive	2	1			1	2	1	2					9
Recommendation				1						1			2
<b>Group: Discussion of challenges in practice</b>													
Positive			1			1				1	1	1	5
<b>Group: Discussion of challenges in practice</b>													
Positive		2							1				3
<b>Total</b>	<b>2</b>	<b>3</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>3</b>	<b>1</b>	<b>2</b>	<b>1</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>19</b>

## Day 3. Knowledge translation and research: developing issue briefs based on health information and research: bridging the know-do gap

Commentary on this module was exceptional. Although the response rate of surveys was lower than the other modules, this module had the highest response rate for comments and the highest number of comments of any course module. All 21 comments were categorized as positive. When thematic coding was applied, a single recommendation was identified in a comment about the issue briefs group work: “It was good to have hands-on task. It could have been a lot longer (~30 min) then we could have been even better in conducting the task. In general, it is really practical task...*(that)...*I did expect to have on the training...” Analysis of the sentiment and thematic coding point to the key factors in the success of this module. The module content was useful and practical, participants learned new information and skills, and the lecturer was recognized for the high quality of their performance and leadership. The details are set out in Table 10.

Table 10. Themes and sentiments of comments on Knowledge translation and research: developing issue briefs

Sentiment	General remark	Content	Knowledge or skills gained					Learning experience		Mode of delivery			Total
	course or module	relevant, useful, practical	learning goals met	learned new information or skills	depth of learning: challenge	prepared for learning	allocation of time	high-quality lecturer or facilitator	interesting, engaging, exciting	peers	lecture	examples	
<b>WHO's role in promoting evidence-informed policy-making: mandate, concepts and tools</b>													
Positive	1	1		1				3	1	1	1		8
<b>Setting the scene: issues, stakeholders and the issue brief template</b>													
Positive	2	2		1		1		1					7
<b>Presentation of participants' issue briefs</b>													
Positive	1			1				1		1		1	5
<b>Summary of the day: lessons learned, next steps</b>													
Positive	1	1		1				1					4
<b>Group: Finding systematic reviews</b>													
Positive				2				1				1	4
<b>Group: Drafting issue briefs</b>													
Positive	1	3	1	1	1			1				2	10
Recommendation							1						1
<b>Total</b>	<b>6</b>	<b>7</b>	<b>1</b>	<b>7</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>8</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>4</b>	<b>39</b>

## Day 4. Measuring well-being and qualitative methods

Although fewer comments were returned for this module, there is no qualitative indication that the quality of the module differed from the other highly rated modules. There is some possibility that survey fatigue was noticeable by Day 4 of the course. What is notable in the data is the emphasis on learning experience themes among the responses. Revealing comments about the high quality of the learning experience are illustrated below.



- “Professionally, easy to understand. The audience very active. The challenge does not cause depression, and forces to think through and analyse this challenge.”
- “Very, very good slides, lecturer and content!”

Table 11. Themes and sentiments of comments on Measuring well-being and qualitative methods

Sentiment	General remark	Content	Knowledge or skills gained	Learning experience			Mode of delivery		Total
	course or module	relevant, useful, practical	depth of learning	allocation of time	high-quality lecturer or facilitator	interesting, engaging, exciting	peers	lecture	
<b>Measuring well-being and quality of life – who is doing what and why?</b>									
Positive	1	1	1		2	1	1	1	<b>8</b>
<b>Selecting and interpreting well-being measures</b>									
Negative				1					<b>1</b>
<b>Total</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>9</b>

## Day 5. Public health communication

As mentioned earlier, all of the comments in the Public health communication module were positive. What is interesting about the pattern of comments and themes for this module is that both the first and last sessions received many comments, while the middle two sessions did not. The first session, Framing your communication, and the last session, The interview, accounted for six of the eight comments for the module. The interview session supplied four of those six comments. Within those six comments, 16 themes were identified, with a cluster of responses in the sub-themes of relevance and usefulness, knowledge or skill acquisition, and high quality of the lecturer or facilitator (who was also described as exciting, interesting or engaging). Comments that illustrate the success of this module and its sessions follow.

- “It is an extremely important topic that helps to think how you communicate with public: what are the things you need to think through before actually communicating. It helped to organize the pieces that I do know but widened the view on pieces that I had missed so far. Group work and getting feedback ... is the best way to learn ... to see that none of us is perfect and all of us make some mistakes.”
- “Super good work! Very interesting lecturer on topic. The use of graphs and narratives made it very clear and interesting. I learned a lot! Thank you!”
- “Very helpful and informative exercise. ... My final words for this day are that it was very good to have a course with a real professional. Thank you!”
- “Very interesting module. Got new skills, new information on handling interview. The module is presented in a very clear way.”
- “Practice is the best way to learn.”

The sessions on public health communication identify what makes for a successful module: it will be on an important topic; it will provide a new perspective for the participants, or it will expand upon their current view; it may present new skills or new tools to work with and if so, allow time to practise and receive feedback; and it will be delivered by someone respected and considered a professional in the field and an expert on the subject. Finally, from these comments, a theme not yet discussed is seen: the role of peer support begins to come into focus. Peer interactions and support was not a

commonly coded theme; however, it was a minor theme in each of the five sessions. These excerpts are listed in the order of delivery of the modules, that is, Day 1 to Day 5.

- “I would prefer a bit more participant involvement.”
- “Very useful peer insights.”
- “It is good to get feedback to improve future issues briefs. Extremely important. And also, to see the different approaches.”
- “The audience very active.”
- “Group work and getting feedback for it is the best way to learn and to see that none of us is perfect and all of us make some mistakes.”

The complete map of this module’s comments and themes is shown in Table 12.

Table 12. Themes and sentiments of comments on Public health communication

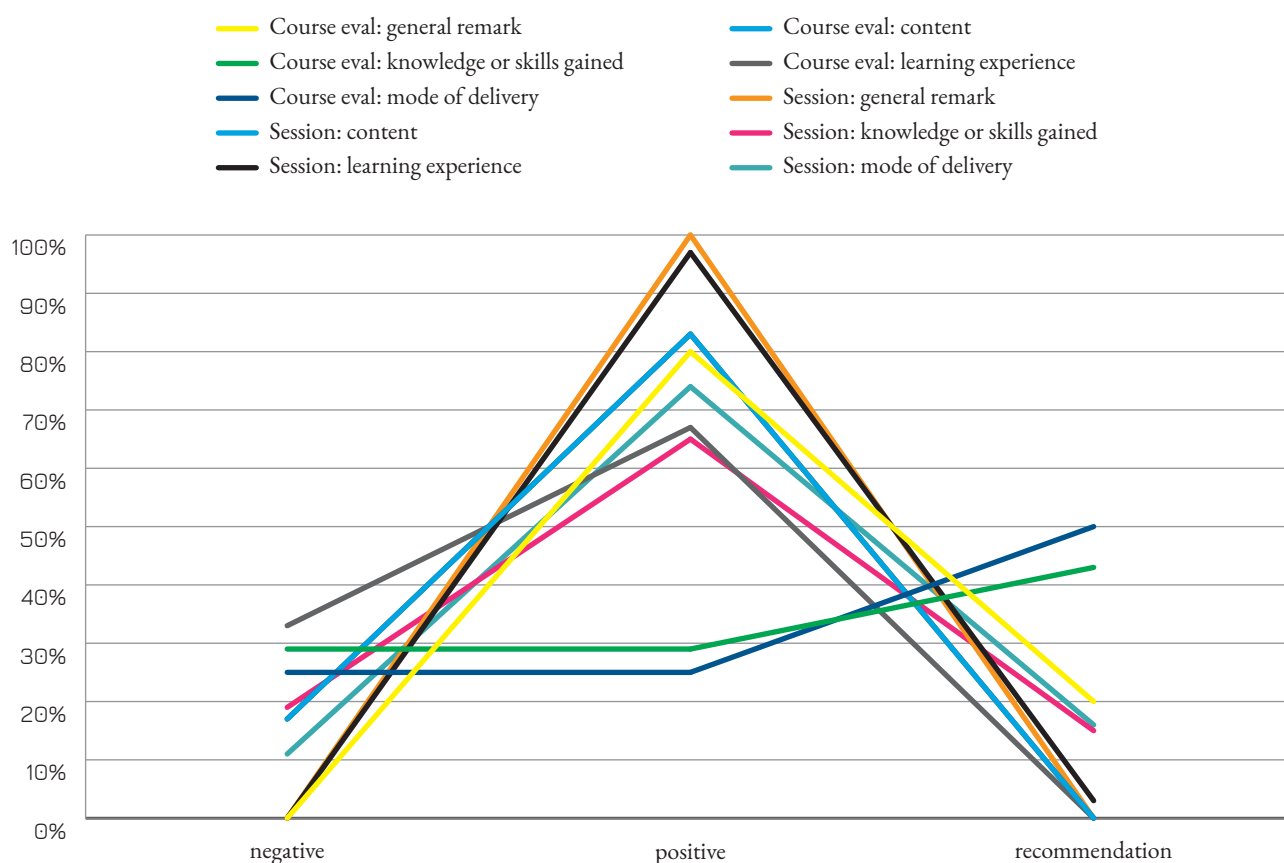
Sentiment	Knowledge or skills gained			Learning experience			Mode of delivery			Total
	Content									
	relevant, useful, practical	learned new information or skills	depth of learning	high-quality lecturer, facilitator	interesting, exciting, engaging	peers	examples	exercises and practice	group work	
<b>Framing your communication</b>										
Positive	1	1	1	1	1	1			1	7
<b>Developing communication products</b>										
Positive	1									1
<b>Working with the media</b>										
Positive	1									1
<b>The Interview</b>										
Positive	2	2		2	1		1	1		9
<b>Total</b>	<b>5</b>	<b>3</b>	<b>1</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>18</b>

## Course evaluation

Over 50% of participants included comments in their course surveys. Twelve people made comments about the course, twice as many individual respondents as any other survey. Although the survey questions for the course evaluation were different to those for the daily sessions, the themes presented in the questions map to the thematic structure used for this analysis. Because the course evaluation had more respondents and different survey questions, some variation to the patterns seen in the daily sessions might be expected. Fig. 7 confirms that expectation. However, the difference is only within two themes: mode of delivery and knowledge or skills gained. In those themes there is an increase in the percentage of recommendations found within the comments. The number of recommendations in these two themes is probably too small to draw any conclusions (five thematic recommendations in total). Nonetheless, there are some specific recommendations in the course evaluation comments that might be considered for future Advanced Courses because they align with recurring themes, including time allocation for topics that are new or challenging, the balance between theoretical and practical sessions, and the value of peer and group work.

- “Please, send the materials at least a week in advance.”
- “Working in group by the country and not a big group in order to express better our thoughts.”
- “eHealth: possibly more focus on practical health information aspect (but definitely use example of strategic approach); ISSUE BRIEF ... not so perfect ... WELL-BEING: I personally would appreciate more theory.”

Fig. 7. Comparison of the proportions of comment sentiment by major theme and survey type



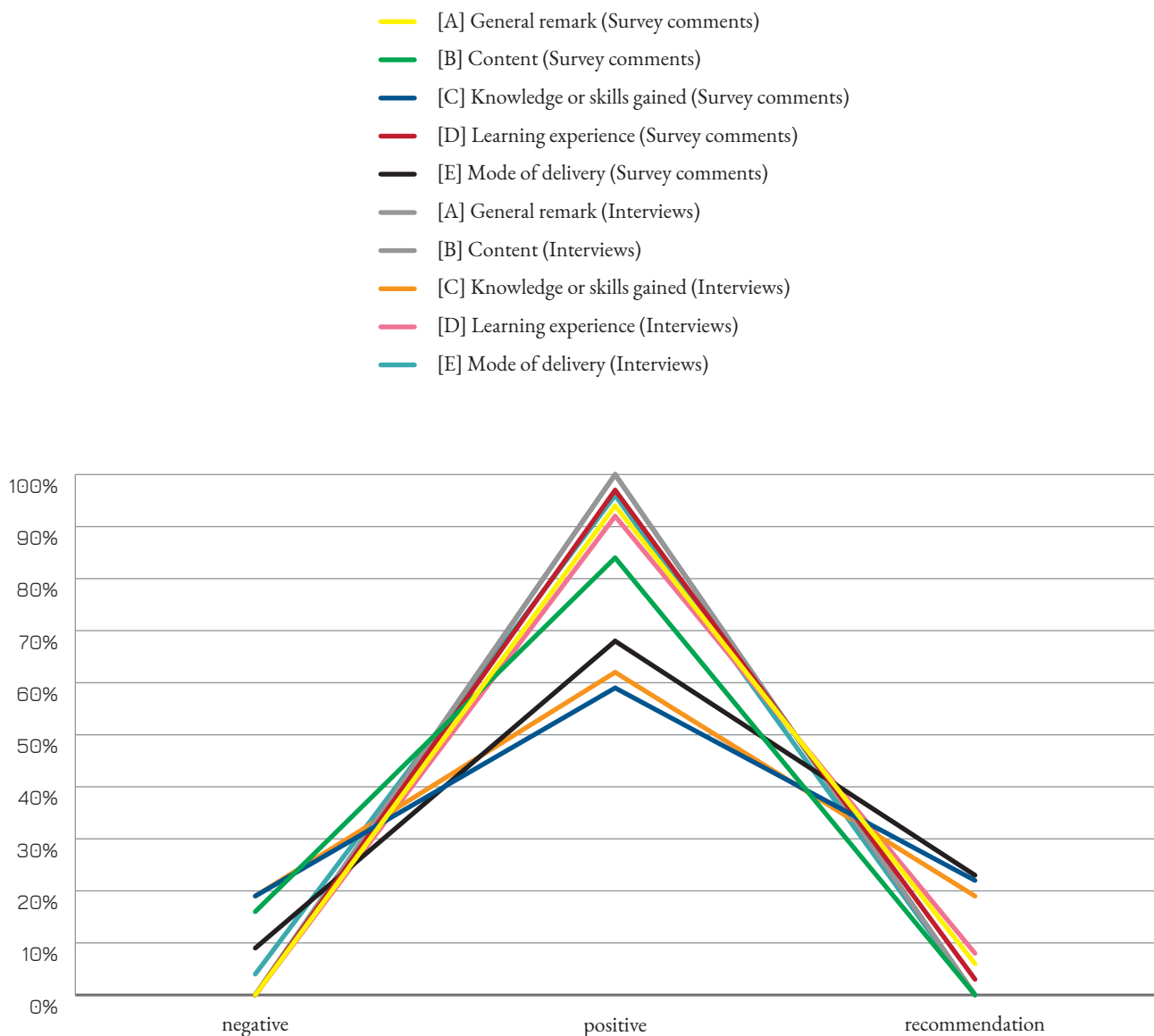
A complete overview of the distribution of themes aggregated by day, session and sentiment is shown in Annex 5.

## Interviews

Five participant interviews were conducted between 11 and 24 July 2017. The interviews consisted of 13 questions. Eleven of the questions were highly structured: one factual question asked about prior WHO training participation; five questions asked interviewees to compare (most favourite to least favourite) training experiences, course modules, sessions, lecturers and modes of delivery. Five questions probed reactions to groupwork sessions, the time allocation of the sessions and course, challenging aspects or sessions of the course, and course administration and organization. The first question asked interviewees to give a three-word description of the course. The final question was more open-ended and very similar to the final question of the session surveys and course evaluation. Four of the questions had binary (yes/no) components. Transcriptions of interviews were put into Excel and subjected to both sentiment and thematic analysis. The five answers to interview question 2, whether or not participants had attended previous WHO courses, were not assigned a sentiment; however, they were coded by the theme, adequately prepared for learning.

An easy way to compare the sentiment and thematic coding between the interim results (surveys conducted during the course and results of interviews conducted after course completion) is to look at the shape of the sentiment and thematic analysis for the two data sources. This comparison is shown in Fig. 8. The results are remarkably similar. There are only two themes that differed between the surveys and interviews. One theme showed a more even distribution of sentiment, and that difference was consistent in both survey and interview themes. Analysis of the interviews shows a more positive response to the relevance and usefulness and mode of delivery of the course content than in the survey comments. In both data sources, feeling about the knowledge or skills gained in the course was less positive than for other themes.<sup>4</sup> However, that difference is strongly related to the sub-theme of time allocation.

Fig. 8. Comparison of data by relative rate of sentiment distribution within major themes



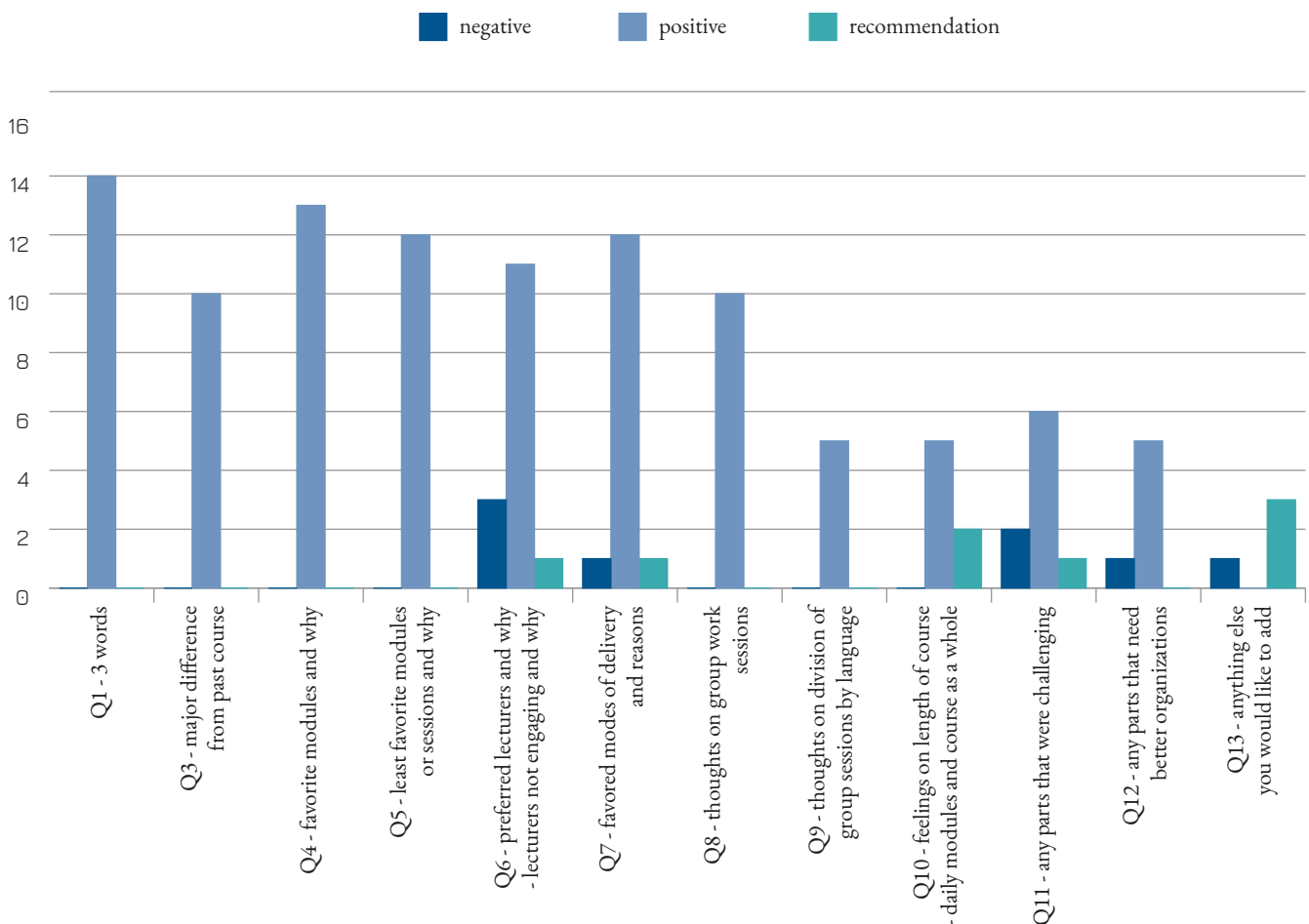
<sup>4</sup> Thematic data for course administration themes were not included in this analysis.

These same data support insights into, and some speculation on, the possible reasons for the higher proportion of positive comments in the content and mode of delivery themes found in interview responses.

- During the course, participants voiced negative feelings about the eHealth module content. These negative feelings centred around the relevance of eHealth to the participant or to the readiness for eHealth within a Member State. These concerns were not echoed during the interviews. Those negative feelings were repeated, by one respondent, on several session surveys for that module and this amplified the proportion of negative comments in that theme.
- The interview script contained a question about group work, which resulted in a larger number of responses mapped to that theme and these comments were all positive.
- Finally, survey respondents commented on lecture slides, and many of those comments were negative. The interviewees did not mention the slides. The difference might be due to the fact that during a course the slides are a prominent mode of content delivery; however, it is also a one-directional method of communication (from the sender to the receiver) with no direct feedback. Many of the other modes of delivery (group work, discussions and exercises and practice) are more interactive and perhaps more likely to be remembered, and commented upon, after the course.

In light of this more detailed analysis, it seems unlikely that the distribution of sentiment by major themes substantially differed during and after the course. The differences shown in Fig. 8 are more likely to be a result of differences in the focus of the survey and interview questions. Fig. 9 shows the distribution of sentiment by interview question.

Fig. 9. Sentiment assignment by interview question



Question 5 asked interviewees to name their least favourite modules: none were named. Analysis of the negative sentiments and recommendations in other questions, however, identified two interviewees who each mentioned a module with which they were less satisfied.

- “EVIPNet is challenging, did not show advantages of being a member, difference between member and non-member is use of EVIPNet not clear. Instructors should use better examples to illustrate theory.”
- “Day 4 – well-being module. More theory needed. With no social science background, wasn’t familiar with concept. Wasn’t sure of good way to do qualitative research. Found difficult. Day 3 – exercises were difficult. Examples weren’t easy to do in assigned time. The rest were enjoyed.”

Interestingly, these two modules received quite positive comments in the course surveys, and the module that received quite negative comments in the course surveys was not mentioned in the interviews. This suggests that the population of participants who commented in the session surveys and course evaluations did not completely overlap with the population of participants who volunteered to be interviewed.

There was a shift from the most common themes found in the session and course survey comments and the interview responses. This was true of all comments, including negative comments and recommendations. The shift seen with all responses is shown in Fig. 10. The shift in negative responses or recommendations is shown in Fig. 11.

Fig. 10. Most common themes for two sources, all sentiments

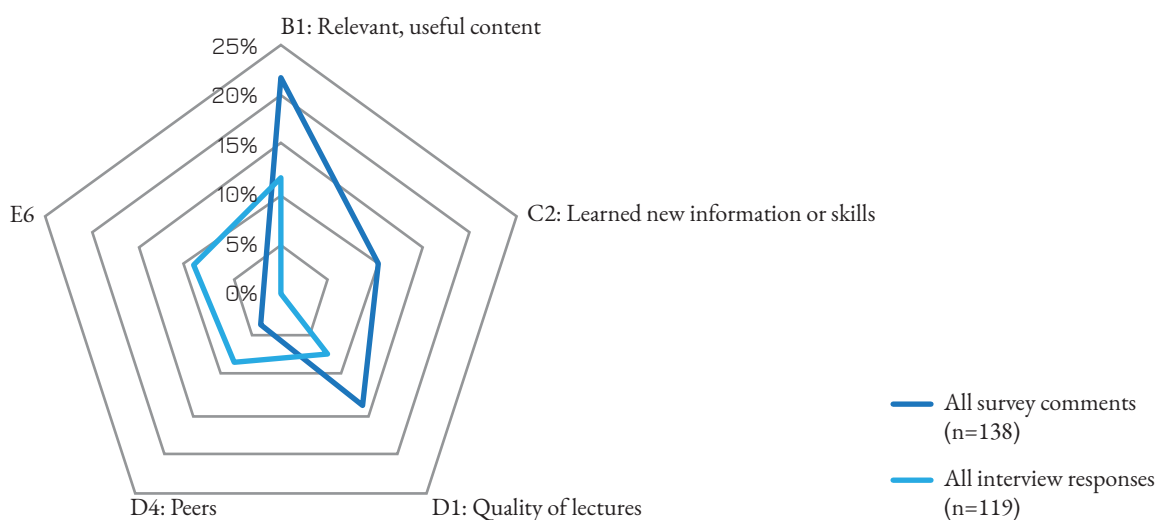


Fig. 10 shows two differences between the two sources of information. Firstly, although the sample sizes are similar, interview responses were more evenly distributed across the themes. Secondly, there is a shift in the thematic focus of the two sources. The acquired new skills/information themes, one of most commonly mentioned themes in survey comments, dropped from 10% of the coded survey comments to 0% of the coded interview responses. This difference is most likely due to the influence of the collection instrument (survey questions) on the themes found in comments. However, the shift from the course content (B1, C2) to experiences with peers and group work (D4, E6) is notable and represents the prominence of a theme recognized in the course structure, but only tangentially mentioned in the surveys or interview questions. This validates the structure and interactive components of the course. Here are some of the most striking affirmations of the importance and role of peer relationships in the course.

- “The groups were compact with high level of participation. Some of the people in the groups were already known through the Autumn School. The intro section, the working groups, plenary session and discussion were all rich and useful.”
- “[I]n the Advanced course everyone was more familiar with each other and there was a level of trust, solidarity and confidence amongst the participants.”

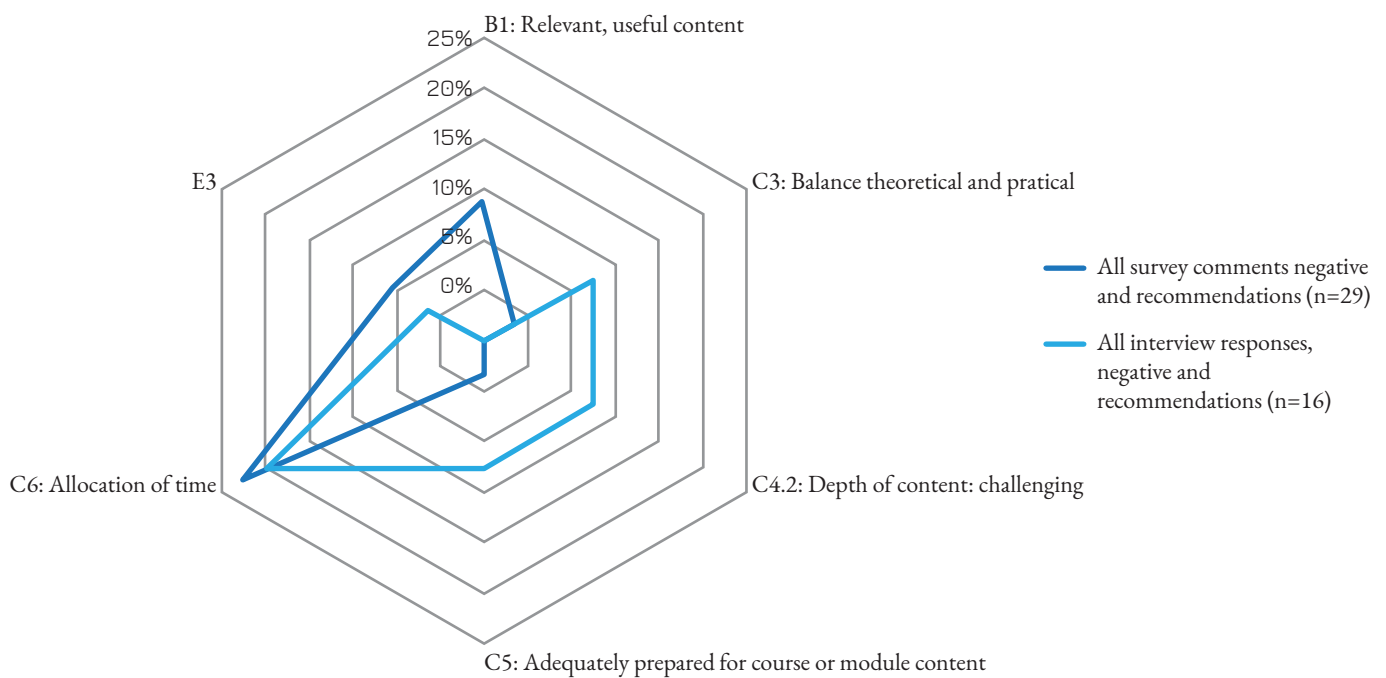


- “[T]he only problem I faced was sometimes not being able to understand some of the content but my colleagues helped me. The sessions were then easy to follow.”
- “Periodically invite people from different countries to speak about personal experiences and problems. (A kind (of) ... alumni group.)”

The importance of peer relationships emerged as a key theme central to the success of the learning experience of the course. The last comment quoted above suggests that some participants want their relationship with the course and their peers to continue.

Negative sentiments and recommendations were most commonly expressed for the same theme in both data sources. The allocation of sufficient time for sessions and modules remained a concern, even after the course was over. Interviewees were more likely to express concerns about the themes related to learning success: being adequately prepared for the course or module content, challenging content and the balance of theoretical and practical content. Fig. 11 shows these differences.

Fig. 11. Most common themes for two sources, negative sentiment and recommendations



The last interview question was, “Is there anything else you would like to add?” Three of the interviewees responded, with answers that included recommendations and one admonishment.

- “Autumn School and Advanced Course linked to each other. On Advanced Course invitation it said person should remain the same for Autumn School and Advanced Course. Maybe to mix the topics between two courses. Autumn School is more data-oriented and Advanced Course is more policy-oriented – mix them so people who come to Autumn School don’t think it’s only about data. And for each programme specify in invitation who it be for, whether it be for policy-makers or data users, etc.”
- “[A] short exercise to do instead of it done in course to move more quickly through programme. Content and logistic work really well.”
- “Periodically invite people from different countries to speak about personal experiences and problems. (A kind forum or alumni group.)”
- “WHO can send participants materials beforehand to familiarize themselves like is done in Autumn School.”

## Word analysis of interviews

The first interview question asked interviewees to describe the course in three words. Fig. 12 shows a word cloud of the results.<sup>5</sup> Annex 6 contains a word cloud of all the interview responses.

Fig. 12. Word cloud of interviewees' description of the course



<sup>5</sup> The tool used to generate this is the free word cloud generator available at <https://www.wordclouds.com/>, accessed 24 October 2017.

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### Observation

A single observational study was conducted on Day 3 of the course. Observation was carried out by a member of the WHO Secretariat who was present at the course as a course lecturer. Their task was to monitor and record the behaviours, interactions and engagements of participants during the groupwork sessions for that day's module. The observer recorded their observations on a short feedback form containing six questions about group interactions, and sought to identify the emergence of potential challenges to effective group interactions. Those observations support the importance of group work and peer support to the success of the course.

- “Very strong engagement by all group participants and lively debates. Very clear presentations by facilitators. Participants looked very happy and interested.”
- “[Participants] ... seemed to be supporting each other.”

Despite the brevity and quantity of data from this source, they help to validate the analysis of both the themes and sentiments required for success.

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### Ranked Survey responses

The numerical average of the ranked responses was calculated for each session and course evaluation question. Overall, there was very little variation in the averages. For example, the range of responses for the course evaluation survey was 4.71 for the question, “To what extent did this course give you a clear understanding of Health Information and its use as Evidence for Policy-making?” to 4.95 for the question, “How would you assess the quality of the course as a whole?” This result shows almost no difference between the ranked responses to the two questions, one of which is designed to measure participants' overall satisfaction with the course and the other to measure the achievement of the overall learning objective, and demonstrates that value of qualitative methods for evaluating the course. The complete results of the ranked responses for the entire course and each session is available in Annex 7.

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### Conclusions

The primary aim of this analysis was to use participant feedback to improve the course in order to design an even better Advanced Course. Because the majority of feedback provided by participants of the 2017 Advanced Course was positive, the analysis had to be constructed to differentiate between negative feedback, recommendations, and positive feedback. Analysis of the strengths of the course can provide insight into opportunities to improve the course and challenges for capitalizing on those opportunities. An emerging alternative to the SWOT analysis (strengths, weakness, opportunities and threats) is the SCOC analysis (strengths, challenges, opportunities and challenges). SCOC is better suited to taking an asset-based approach to strategic planning for future Advanced Courses.<sup>6</sup> Table 13 summarizes the major findings of this qualitative analysis and report.

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<sup>6</sup> For an overview of the SCOC analysis see <https://www.linkedin.com/pulse/swot-more-armin-forstner/>, accessed 25 October 2017.

Table 13. Major report findings

<b>Internal</b>	<b>Strengths</b> <ul style="list-style-type: none"> <li>• High quality of faculty and sessions</li> <li>• Clear objects of modules and course               <ul style="list-style-type: none"> <li>○ Health 2020</li> <li>○ EHII</li> </ul> </li> <li>• Member State support</li> <li>• EHII support</li> <li>• Commitment to participant feedback</li> <li>• Balance of theory and skill development</li> <li>• Peer support and diversity of participants</li> </ul>	<b>Challenges</b> <ul style="list-style-type: none"> <li>• Diversity challenges               <ul style="list-style-type: none"> <li>○ language barriers</li> <li>○ different levels of Member States' internal, technical capacity</li> <li>○ different participant learning styles</li> <li>○ different level of participant readiness for course</li> </ul> </li> <li>• Improving the quality of participant feedback without overwhelming them with surveys and interviews               <ul style="list-style-type: none"> <li>○ feedback may be skewed toward those fully committed to the course</li> </ul> </li> <li>• Maintaining or improving the quality of faculty and sessions               <ul style="list-style-type: none"> <li>○ correct balance of theory and skill development across all modules</li> <li>○ sufficient time allocated for both challenging and interesting sessions</li> </ul> </li> </ul>
<b>External</b>	<b>Opportunities</b> <ul style="list-style-type: none"> <li>• Building on peer support               <ul style="list-style-type: none"> <li>○ alumni network</li> <li>○ continued training</li> </ul> </li> <li>• Recruitment of more faculty to enhance breadth and depth of course content</li> <li>• Reaching a broader audience</li> </ul>	<b>Challenges</b> <ul style="list-style-type: none"> <li>• Maintaining external support</li> <li>• Continuing evolution of health information practices and health policies</li> <li>• Time commitment required of faculty and participants</li> </ul>

One of the most powerful results of this analysis is insights about the importance of participant peers to the success of the course. This validates current efforts to balance lectures with group work, discussions and other interactive methods of delivery of course content. It also offers an opportunity to form and support an informal network of Advanced Course alumni who can further the goals of EHII and building Member State technical capacity.

## Recommendations

- Continue to build on the success of the Advanced Course
  - Build on the interactive sessions
    - For modules with new, evolving or challenging subjects (measuring well-being, eHealth, knowledge translation), ensure that participants have a solid theoretical foundation in order to ensure their readiness to practise new skills and to use new tools. That may mean trimming some of the later content in order to allow participants sufficient time to integrate the new knowledge and learn to use it. Language barriers may increase the time required to complete sessions.
  - Correct the few things that need to be improved. Develop a checklist for instructors and facilitators on the small things that can distract from a session.
    - Use simple text: too much text makes slides illegible.
    - Use examples that illuminate the theoretical concepts being explained.
    - Use visual representations of data and ideas.

- Decide when and how discussion will be integrated into a lecture session; that is, is it acceptable to be side-tracked by an interesting discussion or is it more important to get through that last slide?
  - Include the full life-cycle of a case study (from design, to implementation, to results).
  - Provide a time outside the course when instructors are available for one-on-one assistance or discussion.
- Plan the next course evaluation and consider approaches that will bring in other points of view. Here are some examples.
- Survey the instructors or, better yet, schedule a face-to-face debriefing session with them.
  - Organize a focus group of alumni to generate ideas to improve the current Advanced Course and identify their aspirations for future courses (for example, an alumni group and other ways to maintain contact with the cohort of Advanced Course graduates, volunteer opportunities, etc.).
  - Have an expert facilitator use Delphi technique with experts in the subject matter to identify any core content that is not already in the course.

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## References

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6. MeaningCloud for Excel. In: MeaningCloud [website]. Union, NJ: MeaningCloud LL; 2017 (<https://www.meaningcloud.com/products/excel-addin>, accessed 10 November 2017).
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## Annex 1. Sample survey form

Advanced Course on Health Information and Evidence for Policy-making  
Day

### Group work:

#### Lecture(s):

1=Very bad/little

2=Bad

3=Average

4=Good/enough

5=Very good/much

Circle your response

The learning goals were met 1 2 3 4 5

The content was useful 1 2 3 4 5

We received sufficient background documentation/Information which was a beneficial accompaniment to the module 1 2 3 4 5

The length of the module was appropriate 1 2 3 4 5

I learned new information and/or skills 1 2 3 4 5

I recommended this module be repeated 1 2 3 4 5

Using the same rating scale, please assess the:

Lecture(s) 1 2 3 4 5

Lecture slides 1 2 3 4 5

Mode of delivery of the session 1 2 3 4 5

Please elaborate on your answer above or write down any additional comments or suggestions. In particular we are interested to learn how we could improve this session for future editions of the Advanced Course.



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## Annex 2. Sample observation form

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### Observer Feedback form WHO Advanced Course 2017

This feedback form is for the qualitative evaluation of the WHO Advanced course. We want to know the attitudes, behaviours and interactions of participants during groupwork sessions.

Please fill out form during a groupwork session. **Walk around and observe the different groups and note anything particular you see about any group – you can specify which group or talk about all of them generally.**

#### Observer guidelines

- Your role as an observer is to monitor the interactions, behaviours and attitudes of the participants as they engage in group activities throughout the course.
- During the group activities you will walk around the different groups with this form, using your observations to answer the questions outlined below.
- Be as discreet as possible. Groups should not be aware they are being monitored and you should avoid at all costs talking to the participants or asking them for their opinions, etc. Answers on this form should be based solely on what you observe during group tasks.
- Feel free to use the back page for any extra comments or observations.

Day 3                      Module: Evidence for Policy session                      Group Session \_\_\_\_

Any general observations you see in groups during the group work?

Are most, if not all the group members interacting with each other? If not, why not?

Learning Objectives of group task: Was it clear what participants are supposed to learn?

---

Did any areas of **confusion** arise? If yes, what were they?

And how did the instructor handle the confusion?

During group work or case presentations, did **participants help each other** understand or apply the material?

During group work, did the **group have enough time** to complete the assigned task?

Did they have too much time?    \_\_\_ Yes \_\_\_ No

Did the group activity produce an **outcome** that indicates it was an effective way for individuals to practise and apply what was covered in the lesson?

---

## Annex 3. Sample interview form

### Interview

#### WHO Advanced course 2017

Interview 1

July 11, 2017, 12:00

Using 3 words, how would you describe this year's WHO Advanced Course?

Have you attended any other previous WHO training programme? ... In particular the Advanced Courses or Autumn School?

Did you notice any major difference between this year's Advanced Course and any of the others?

In this year's Advanced Course, what were your favourite modules and why?

Were there sessions/modules you did not like and what is the reason for this?

In the course did you have any preferred lecturers? ... Why do you think this is? Were there any lecturers that you did not find engaging? What are the reasons for this?

In all the sessions, what were the modes of delivery you liked and why?

What are your thoughts on the groupwork sessions that took place?

As you know for the groupwork sessions, the groups were divided according to language/country. Do you have any thoughts on this?

How do you feel about the length of the course, both daily and the course as a whole?

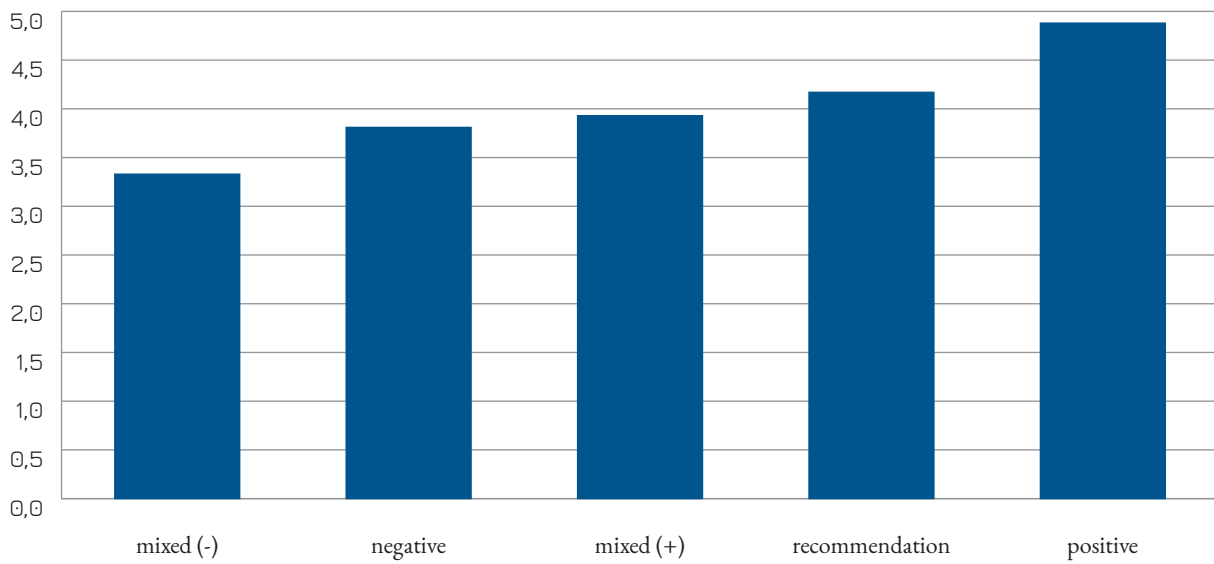
Was there any part of the course that you found challenging?

Was there any aspect of the course that you would say needs better organization?

Is there anything else you would like to add?

## Annex 4. Comparison of sentiment and quantitative survey results

Fig. 13. Comparison of sentiment and quantitative survey results



## Annex 5. Distribution of themes by session and sentiment

Table 14. Distribution of themes by session and sentiment

Sentiment	A1	B1	B2	C1	C2	C4	C5	C6	D1	D2	D3	D4	E1	E2	E3	E4	E5	E6	F1	Total
<b>Course evaluation</b>																				
Negative			1								1							1		6
Positive			4	5	2						1									14
Recommendation			1									1						1		6
<b>Course evaluation total</b>	<b>4</b>	<b>6</b>	<b>1</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>26</b>
<b>Day 1</b>																				
<b>Group work 1</b>																				
Negative																			1	1
Positive																				1
<b>Group work 1 total</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>2</b>	<b>2</b>
<b>Group work 2</b>																				
Negative																				1
<b>Group work 2 total</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>
<b>Group work 3</b>																				
Recommendation																				1
<b>Group work 3 total</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>
<b>Session 1</b>																				
Negative																				1
Positive																				4
Recommendation																				1
<b>Session 1 total</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>6</b>
<b>Session 2</b>																				
Negative																				2
Positive																				1
<b>Session 2 total</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>3</b>

Table 14. Contd

Sentiment	A1	B1	B2	C1	C2	C4	C5	C6	D1	D2	D3	D4	E1	E2	E3	E4	E5	E6	F1	Total
<b>Session 3</b>																				
Negative		1				2								1						4
Positive		1	1																	2
	<b>Session 3 total</b>	<b>1</b>	<b>2</b>			<b>2</b>								<b>1</b>						<b>6</b>
<b>Session 4</b>																				
Negative						1														1
Recommendation					1											1				2
	<b>Session 4 total</b>				<b>2</b>											<b>1</b>				<b>3</b>
<b>Session 5</b>																				
Positive	1	1							1											4
Recommendation										1										1
	<b>Session 5 total</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>5</b>
<b>Day 1 Total</b>																				
	<b>3</b>	<b>8</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>4</b>	<b>1</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>3</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>27</b>
<b>Day 2</b>																				
<b>Group work 1</b>																				
Positive				1				1							1	1	1		1	5
	<b>Group work 1 total</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>5</b>
<b>Group work 3</b>																				
Positive		2										1								3
	<b>Group work 3 total</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>3</b>
<b>Session 1</b>																				
Positive	2	1					1	2	1	2										9
Recommendation																			1	2
	<b>Session 1 total</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>2</b>	<b>1</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>11</b>
<b>Day 2 total</b>																				
	<b>2</b>	<b>3</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>3</b>	<b>1</b>	<b>2</b>	<b>1</b>	<b>2</b>	<b>1</b>	<b>2</b>	<b>1</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>19</b>
<b>Day 3</b>																				
<b>Group work 1</b>																				
Positive				2				1											1	4
	<b>Group work 1 total</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>4</b>

Table 14. Contd

Sentiment	A1	B1	B2	C1	C2	C4	C5	C6	D1	D2	D3	D4	E1	E2	E3	E4	E5	E6	F1	Total
<b>Group work 2</b>																				
Positive	1	3		1	1	1		1									2			10
Recommendation							1													1
<b>Group work 2 total</b>	<b>1</b>	<b>3</b>		<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>						<b>2</b>				<b>11</b>
<b>Session 1</b>																				
Positive	1	1		1		1		3		1			1							8
<b>Session 1 total</b>	<b>1</b>	<b>1</b>		<b>1</b>		<b>1</b>		<b>3</b>		<b>1</b>			<b>1</b>							<b>8</b>
<b>Session 2</b>																				
Positive	2	2		1		1		1					1							7
<b>Session 2 total</b>	<b>2</b>	<b>2</b>		<b>1</b>		<b>1</b>		<b>1</b>					<b>1</b>							<b>7</b>
<b>Session 3</b>																				
Positive	1			1		1		1		1			1				1			5
<b>Session 3 total</b>	<b>1</b>			<b>1</b>		<b>1</b>		<b>1</b>		<b>1</b>			<b>1</b>				<b>1</b>			<b>5</b>
<b>Session 4</b>																				
Positive	1	1		1		1		1												4
<b>Session 4 total</b>	<b>1</b>	<b>1</b>		<b>1</b>		<b>1</b>		<b>1</b>												<b>4</b>
<b>Day 3 total</b>	<b>6</b>	<b>7</b>		<b>1</b>	<b>7</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>8</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>4</b>				<b>39</b>
<b>Day 4</b>																				
<b>Session 1</b>																				
Positive	1	1		1		1		2		1		1	1							8
<b>Session 1 total</b>	<b>1</b>	<b>1</b>		<b>1</b>		<b>1</b>		<b>2</b>		<b>1</b>		<b>1</b>	<b>1</b>							<b>8</b>
<b>Session 3</b>																				
Negative							1													1
<b>Session 3 total</b>							<b>1</b>													<b>1</b>
<b>Day 4 total</b>	<b>1</b>	<b>1</b>		<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>2</b>	<b>1</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>				<b>9</b>



Table 14. Contd

Sentiment	A1	B1	B2	C1	C2	C4	C5	C6	D1	D2	D3	D4	E1	E2	E3	E4	E5	E6	F1	Total
<b>Day 5</b>																				
<b>Session 1</b>																				
Positive	1			1	1	1		1	1	1	1	1						1		7
<b>Session 1 total</b>	<b>1</b>			<b>1</b>	<b>1</b>	<b>1</b>		<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>						<b>1</b>		<b>7</b>
<b>Session 2</b>																				
Positive	1																			1
<b>Session 2 total</b>	<b>1</b>																			<b>1</b>
<b>Session 3</b>																				
Positive	1																			1
<b>Session 3 total</b>	<b>1</b>																			<b>1</b>
<b>Session 4</b>																				
Positive	2			2	2	2		2	1	1	1	1								9
<b>Session 4 total</b>	<b>2</b>			<b>2</b>	<b>2</b>	<b>2</b>		<b>2</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>								<b>9</b>
<b>Day 5 total</b>	<b>5</b>	<b>3</b>	<b>1</b>	<b>3</b>	<b>1</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>18</b>
<b>Grand Total</b>	<b>16</b>	<b>30</b>	<b>1</b>	<b>2</b>	<b>14</b>	<b>5</b>	<b>2</b>	<b>10</b>	<b>19</b>	<b>2</b>	<b>8</b>	<b>5</b>	<b>3</b>	<b>3</b>	<b>7</b>	<b>2</b>	<b>5</b>	<b>3</b>	<b>1</b>	<b>138</b>

## Thematic Key<sup>7</sup>

A1	General remark	Course or module
B1	Module/course content	Relevant/useful/practical
B2	Module/course content	Organized
C1	Knowledge or skills gained	Learning goals were met
C2	Knowledge or skills gained	Learned new information or skills
C3	Knowledge or skills gained	Balance of theoretical and practical
C4	Knowledge or skills gained	Depth of learning
C4.1	Knowledge or skills gained	Basic
C4.2	Knowledge or skills gained	Challenging
C5	Knowledge or skills gained	Adequately prepared for learning
C6	Knowledge or skills gained	Allocation of time
D1	Learning experience	High-quality lecturer/facilitator
D2	Learning experience	Fun/pleasant
D3	Learning experience	Interesting/engaging/exciting
D4	Learning experience	Peers
E1	Mode of delivery	Lecture
E2	Mode of delivery	Slides
E3	Mode of delivery	Examples
E4	Mode of delivery	Discussion
E5	Mode of delivery	Exercises and practice
E6	Mode of delivery	Group work
F1	Administration	Conference facilities
F2	Administration	Conference administrative arrangements
F3	Administration	Conference location

<sup>7</sup> Themes F2 and F3 did not appear within the survey comments.

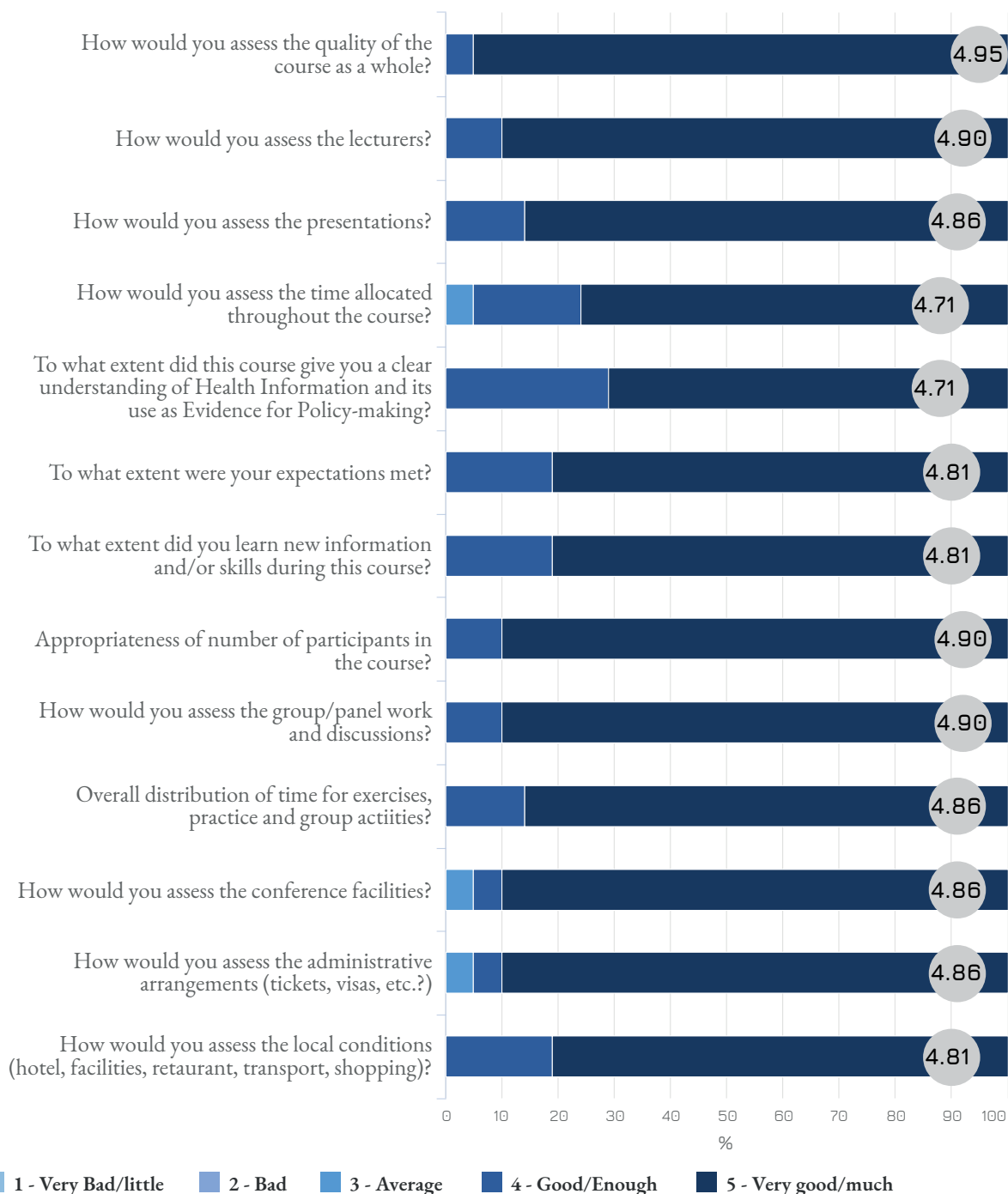


## Annex 7. Survey responses by module

Bar charts summarise the reported numerical ratings by respondents, depicting with the share of each numerical rating that was received on the scale 1-5. In addition, the average score is marked in a gray circle for easier comparison.

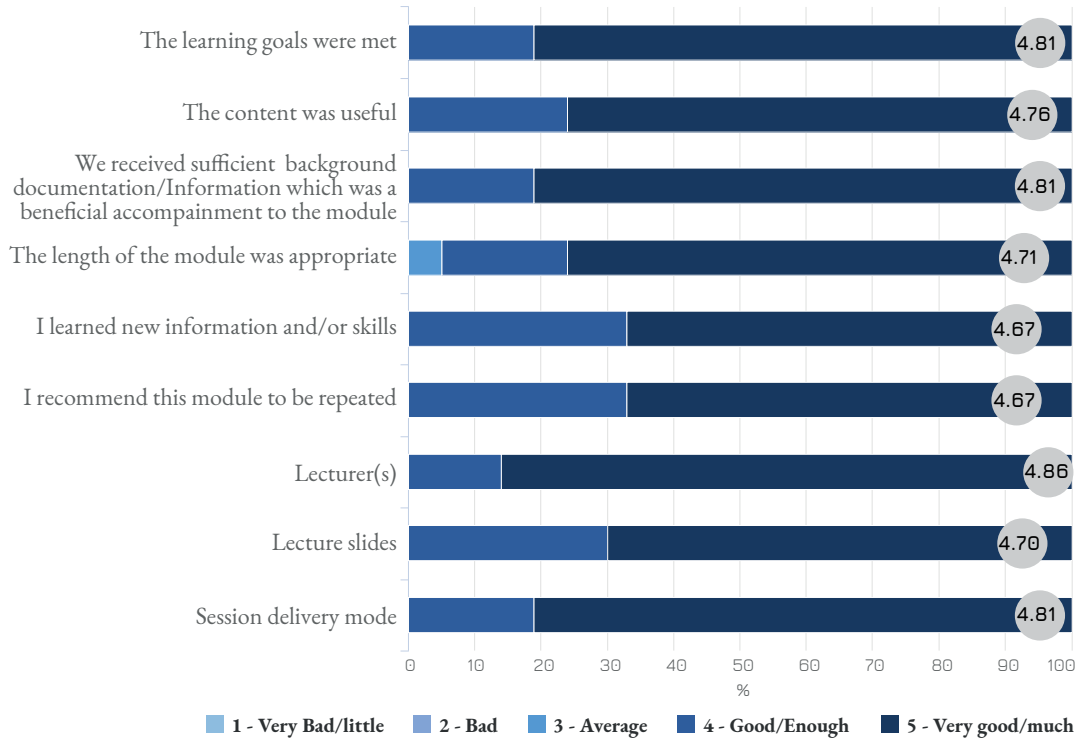
### Overall feedback about the course

(21 respondents)

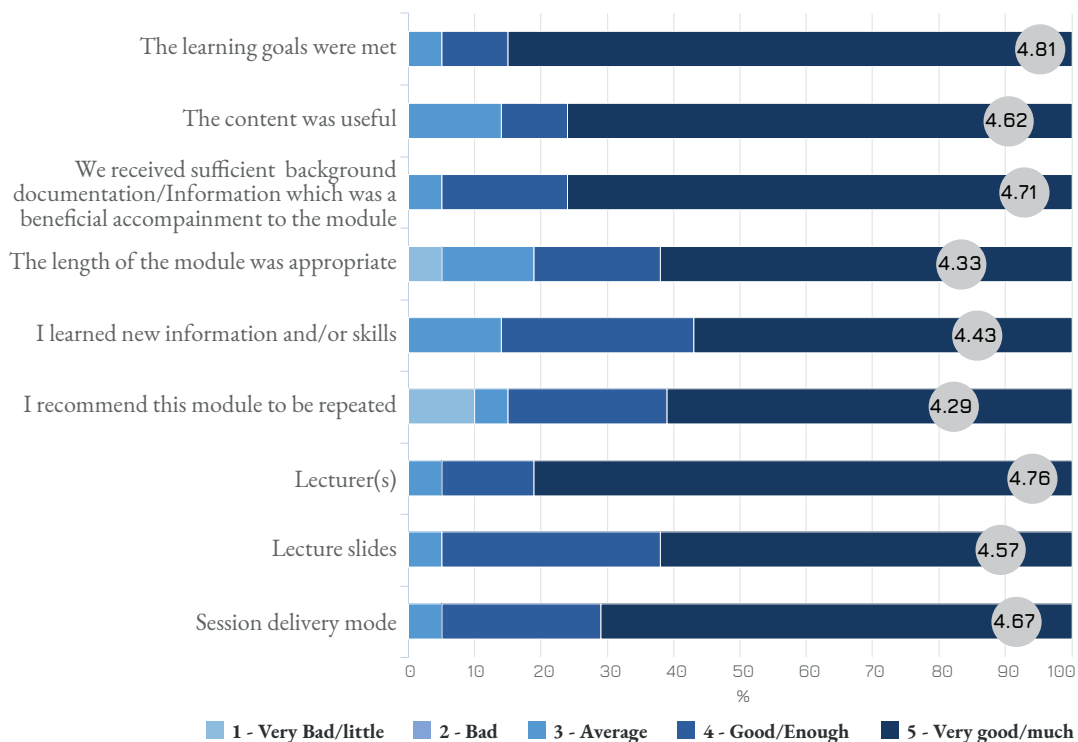


Day 1  
(21 respondents)

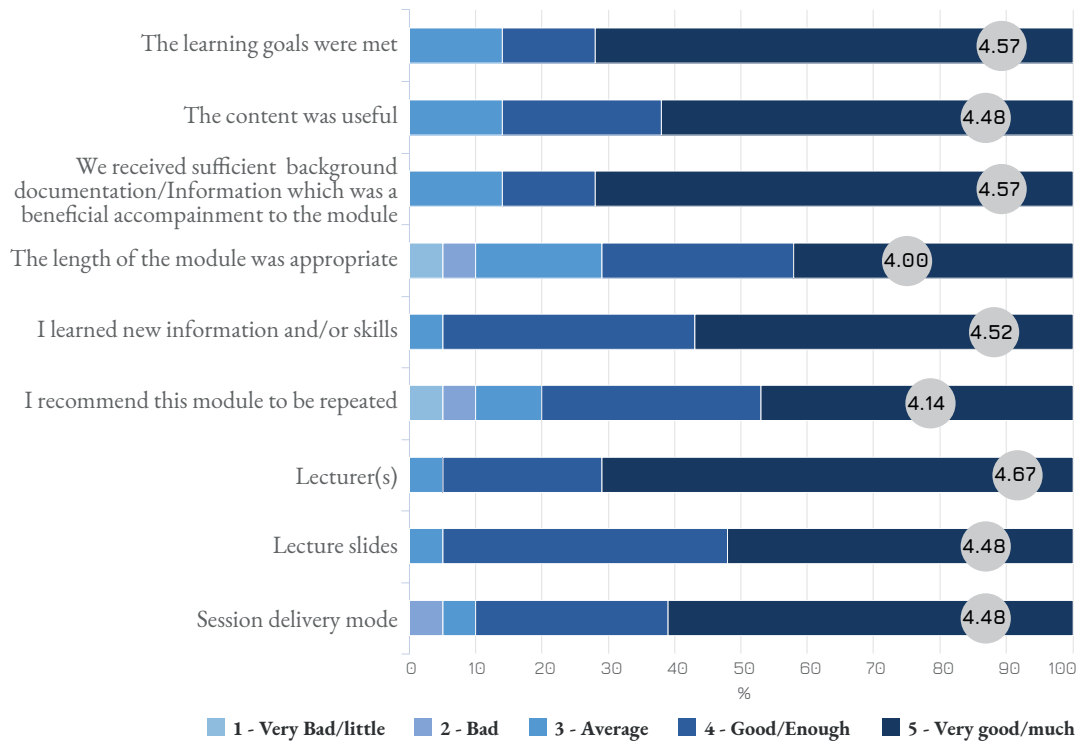
Session 1: Setting the scene (Tina Dannemann Purnat)



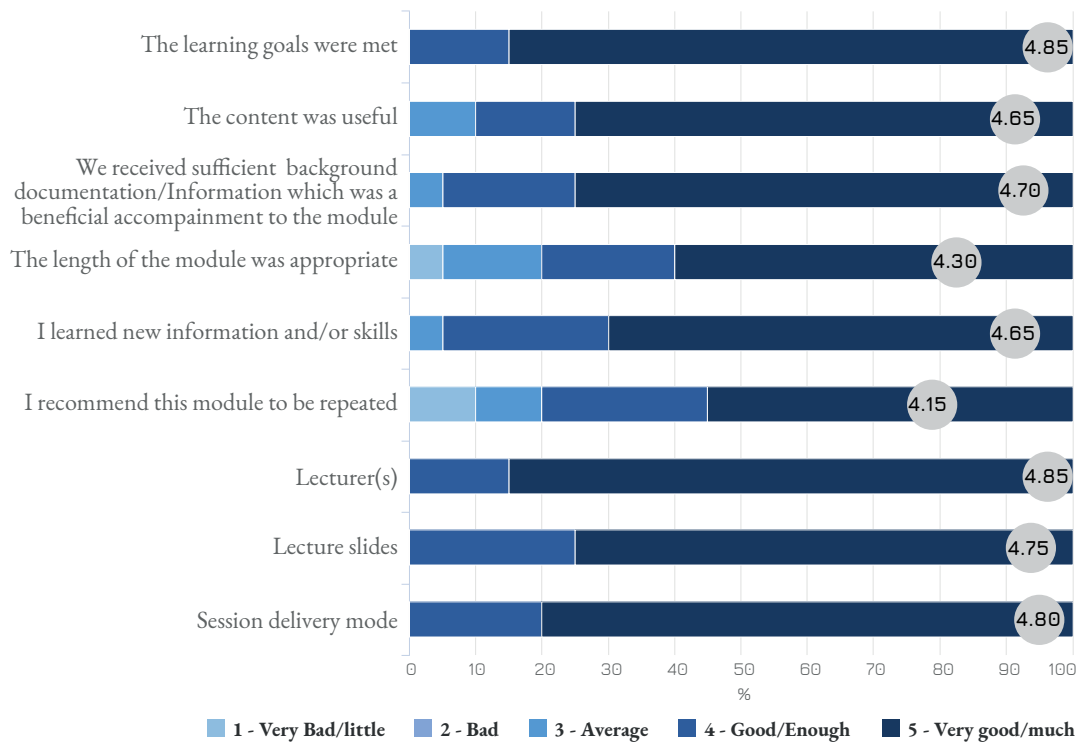
Session 2: Introduction to eHealth and the WHO-ITU eHealth Strategy Toolkit - Presentation (Clayton Hamilton)



Session 3: Developing an eHealth Vision and Action Plan – Presentation (Clayton Hamilton)

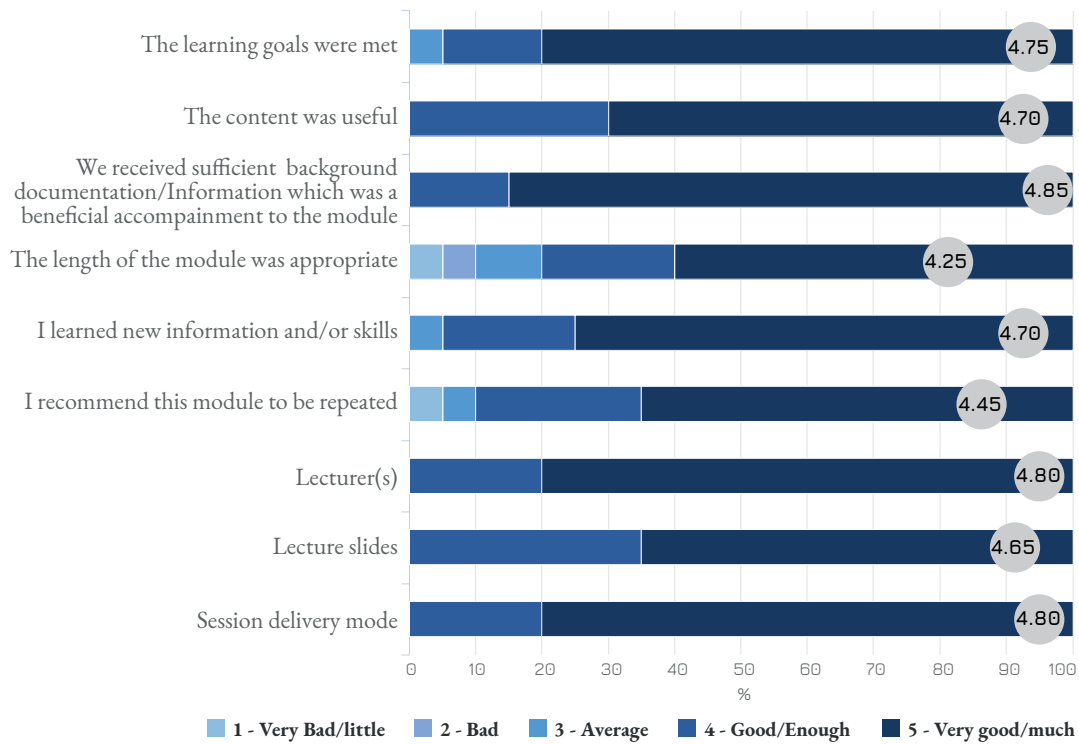


Session 4: Group work: Developing an eHealth Vision and Action Plan (Clayton Hamilton)

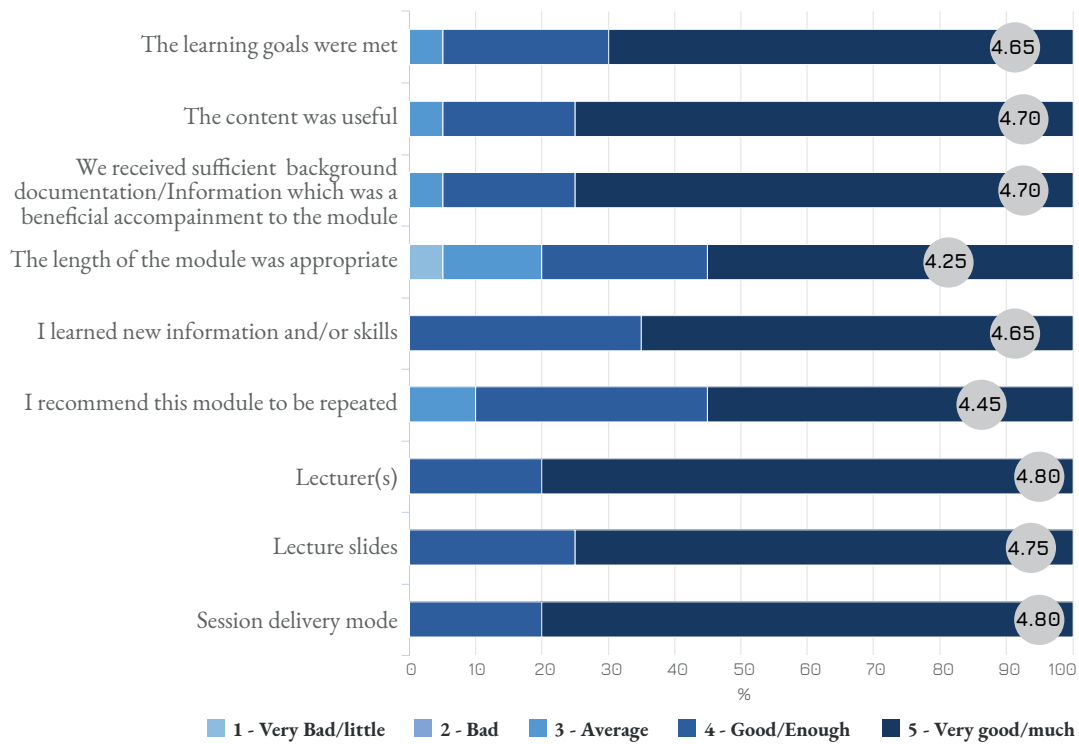




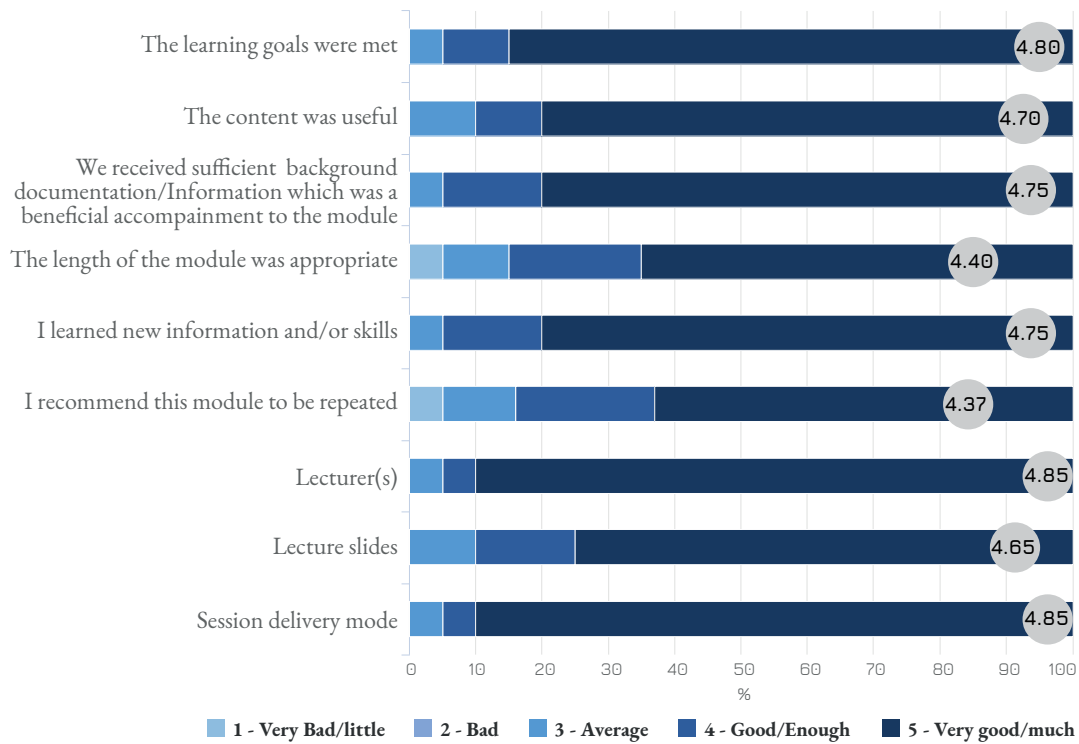
Session 5: Developing an eHealth Monitoring and Evaluation Framework – Presentation (Clayton Hamilton)



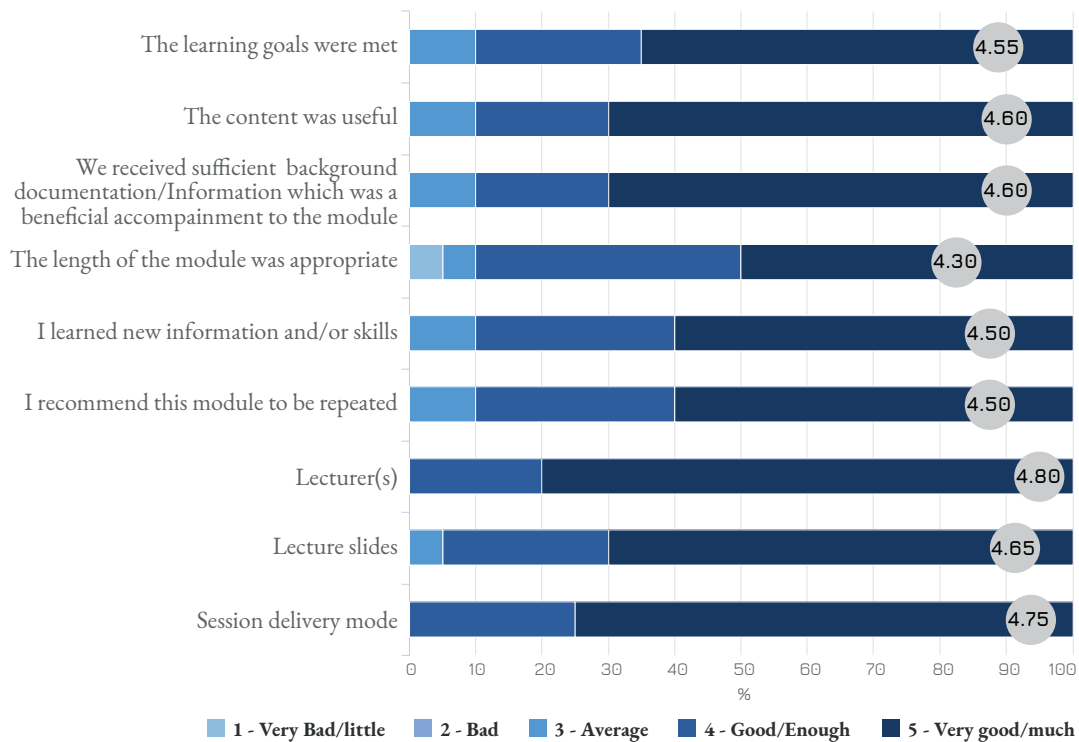
Session 6: Group work: Developing an eHealth Monitoring and Evaluation Framework (Clayton Hamilton)



Session 7: Case studies: eHealth Strategies in practice (Clayton Hamilton)

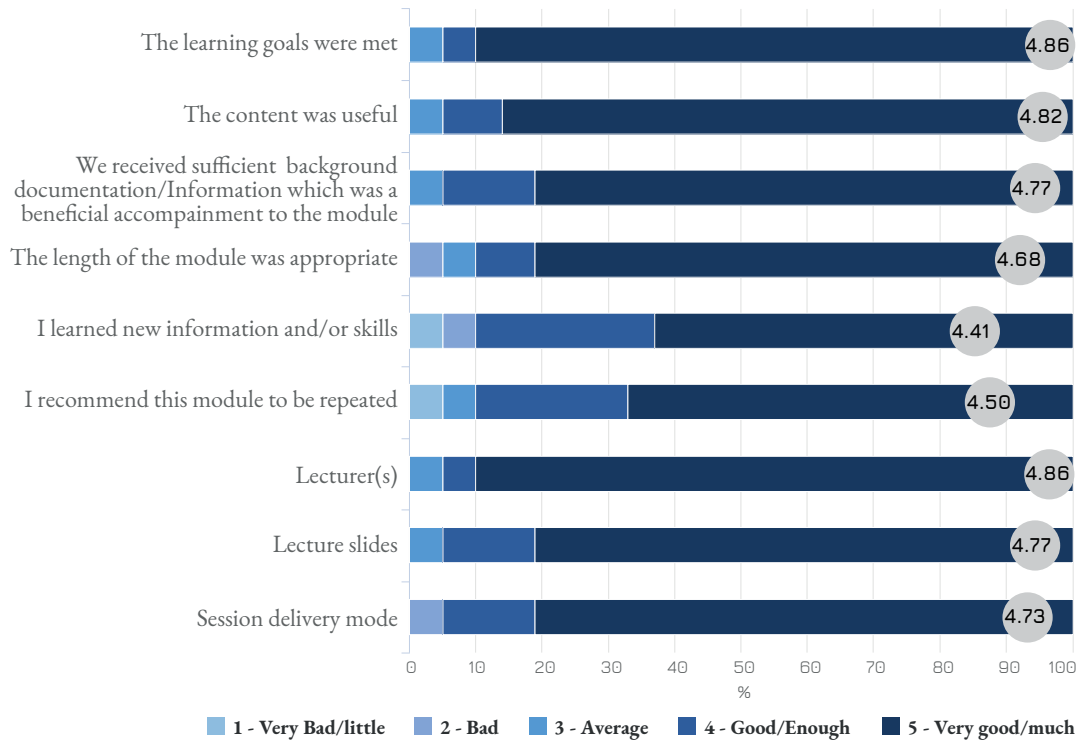


Session 8: Group work: Establishing national governance for eHealth (Clayton Hamilton)

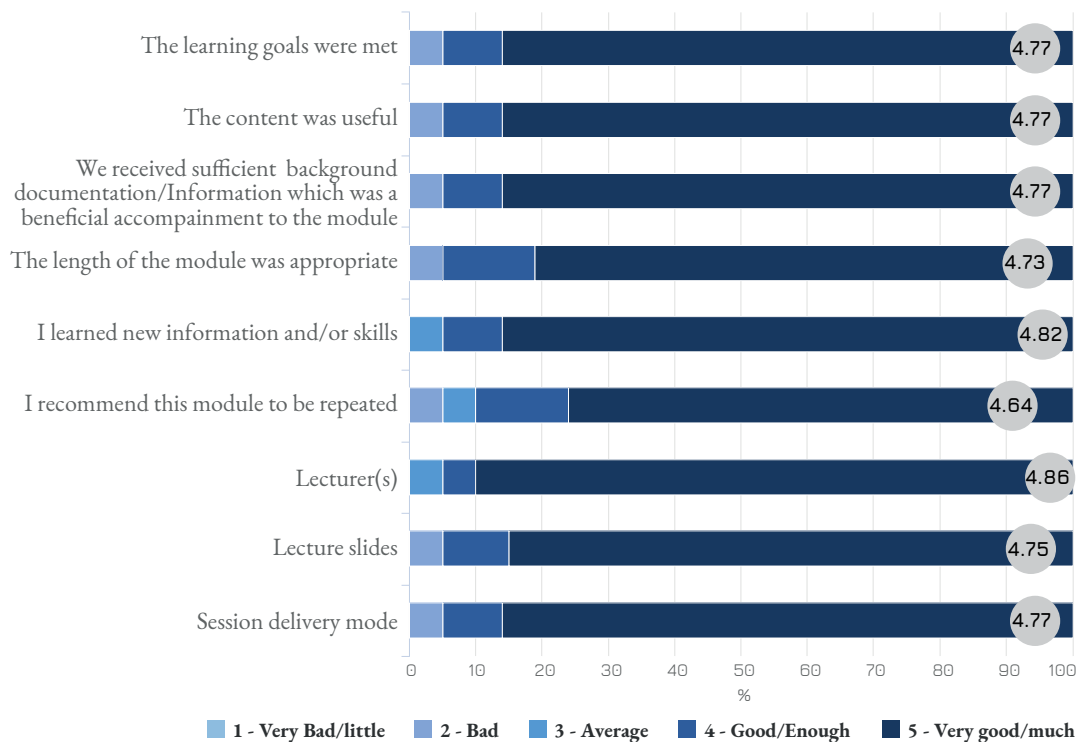


Day 2  
(22 respondents)

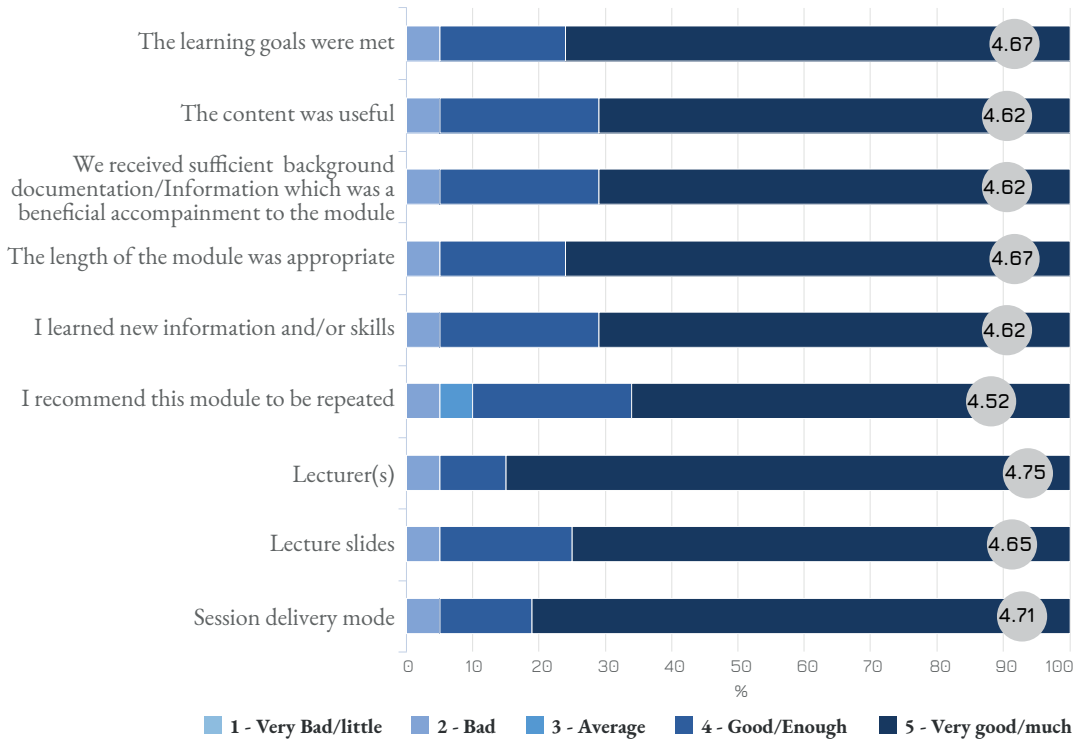
Session 1: Overview of data sources – Presentation (Neville Calleja)



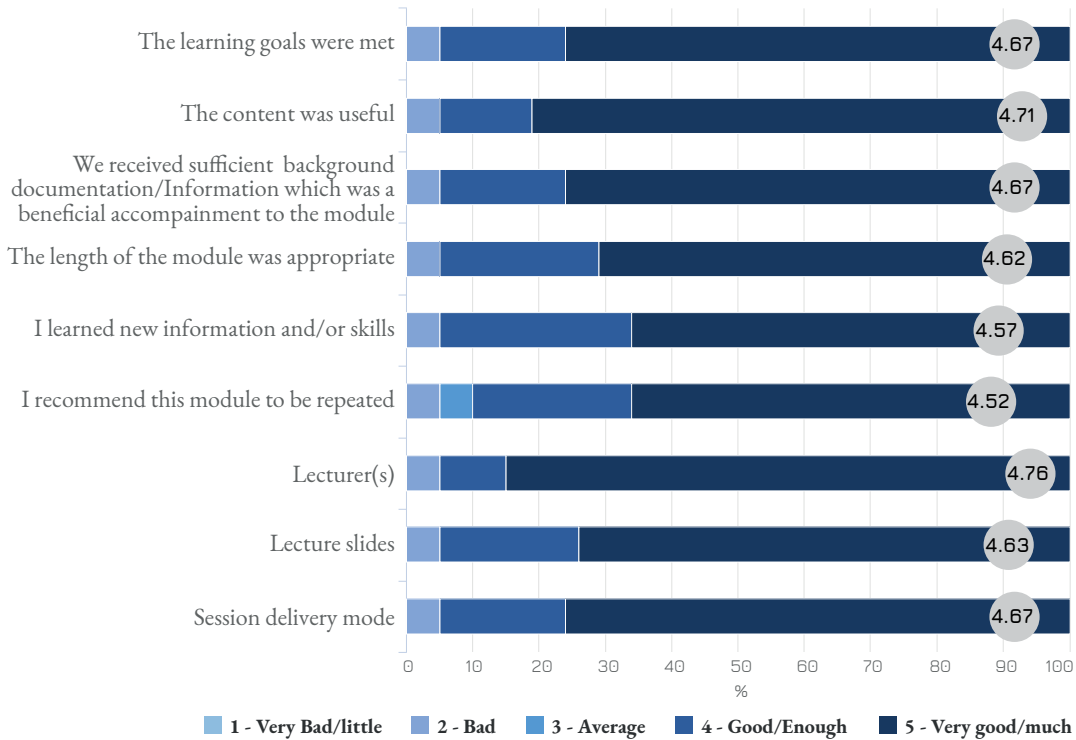
Session 2: Discussion of challenges in practice – Group work (Neville Calleja)



Session 3: Discussion of challenges in practice – Group work (Neville Calleja)



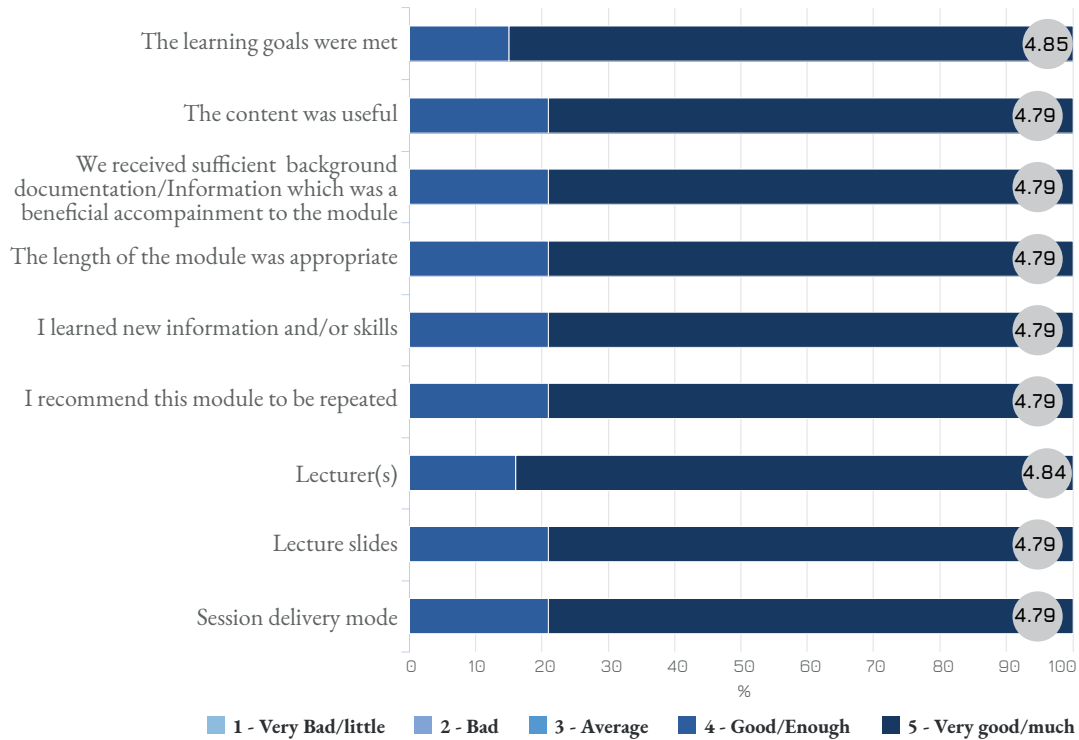
Session 4: Group discussion of participants' examples – Group work (Neville Calleja)



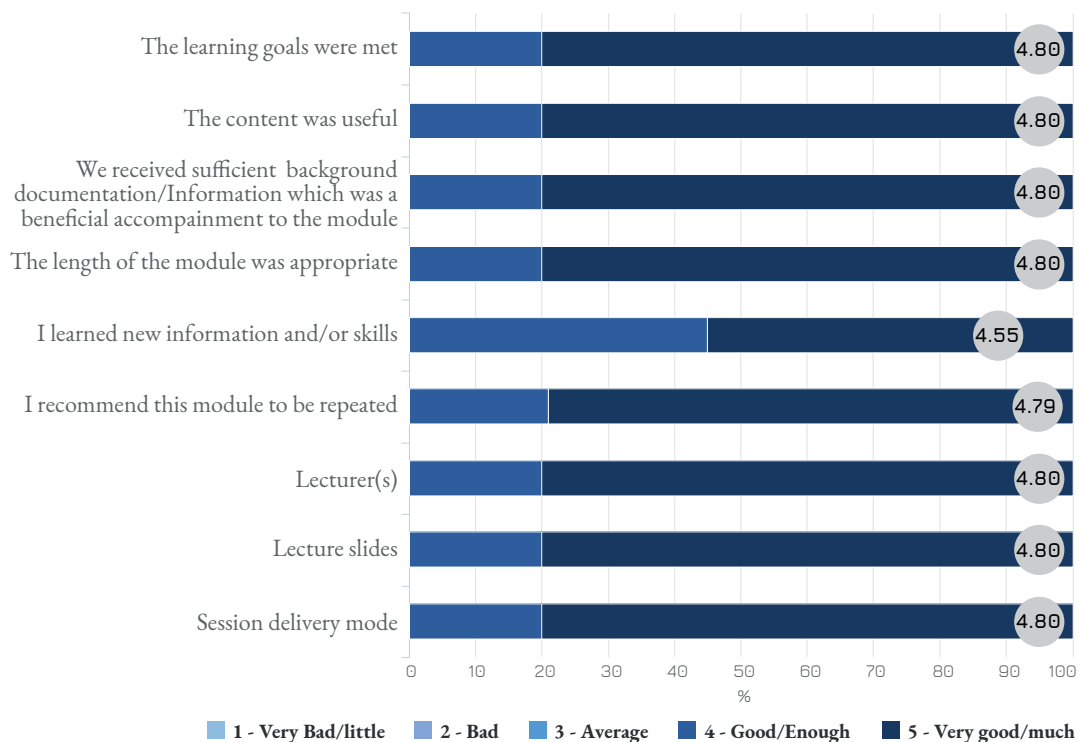
Day 3

(19 respondents)

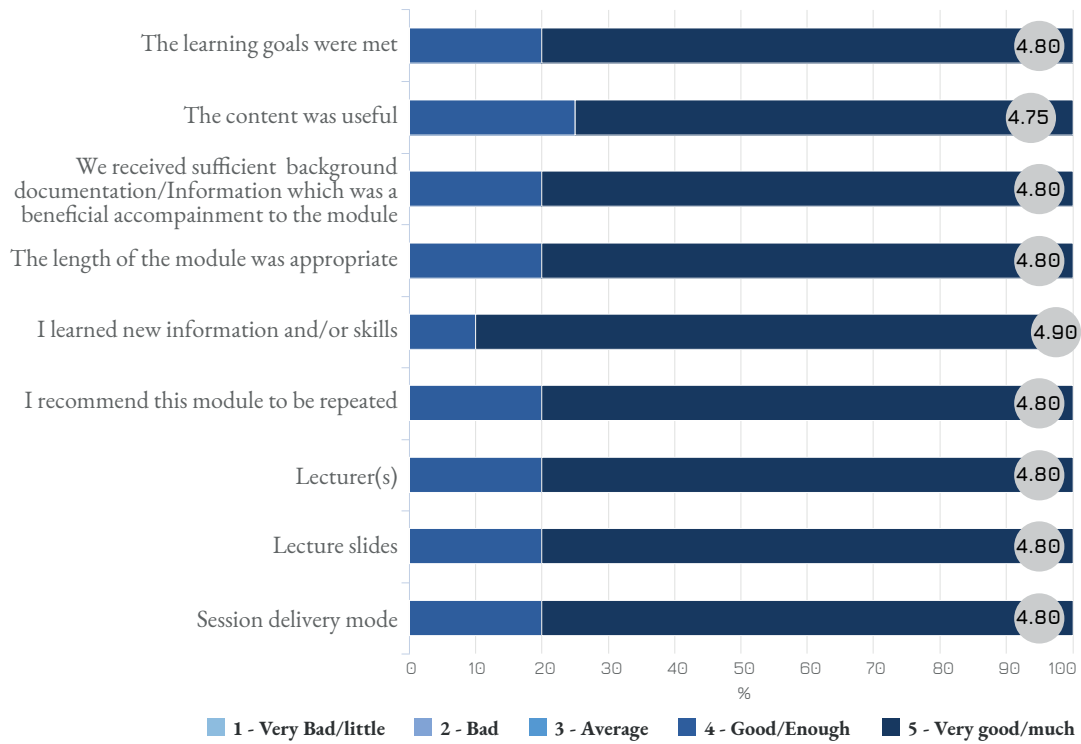
Session 1: WHO's role in promoting evidence-informed policy-making – key mandate, concepts and tools (Tanja Kuchenmüller)



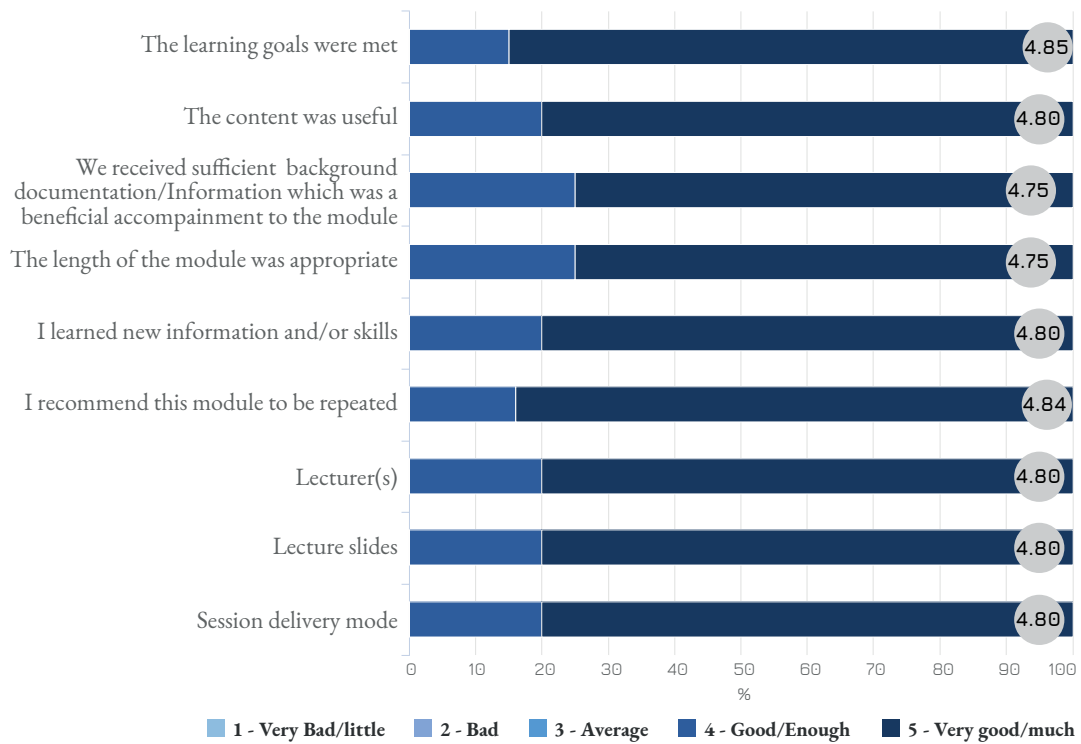
Session 2: Exercise 1: Finding systematic reviews (Tanja Kuchenmüller)



Session 3: Setting the scene: issues, stakeholders and the issue brief template (Tanja Kuchenmüller)

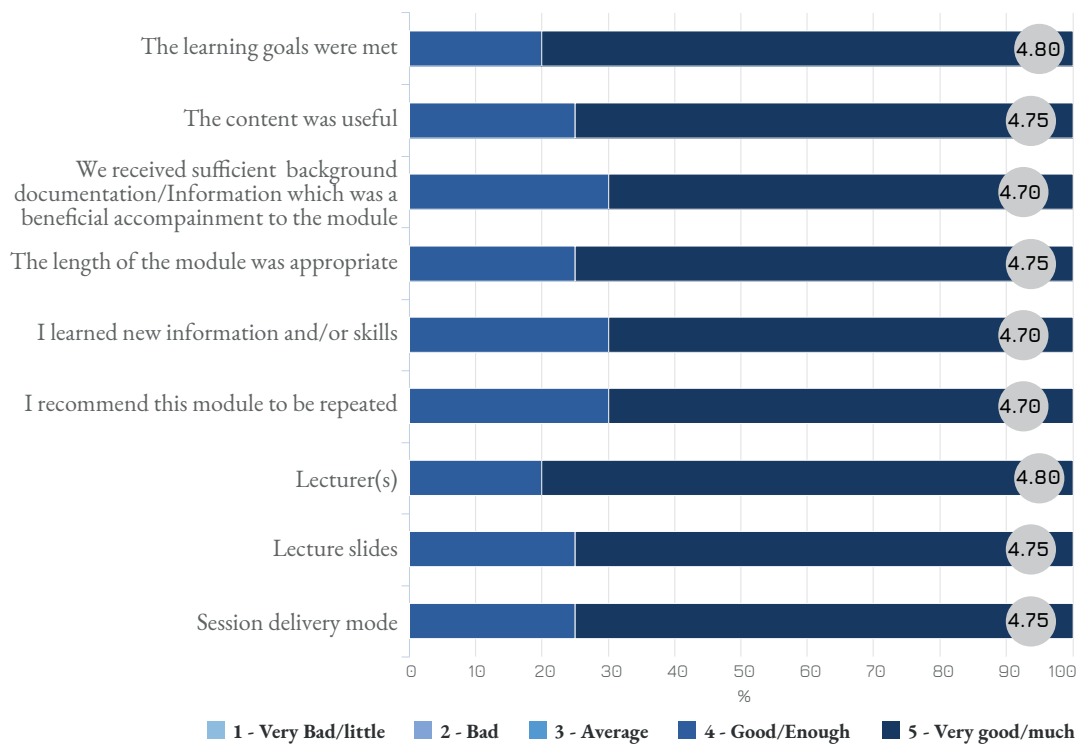


Session 4: Exercise 2: Drafting issue briefs (Tanja Kuchenmüller)

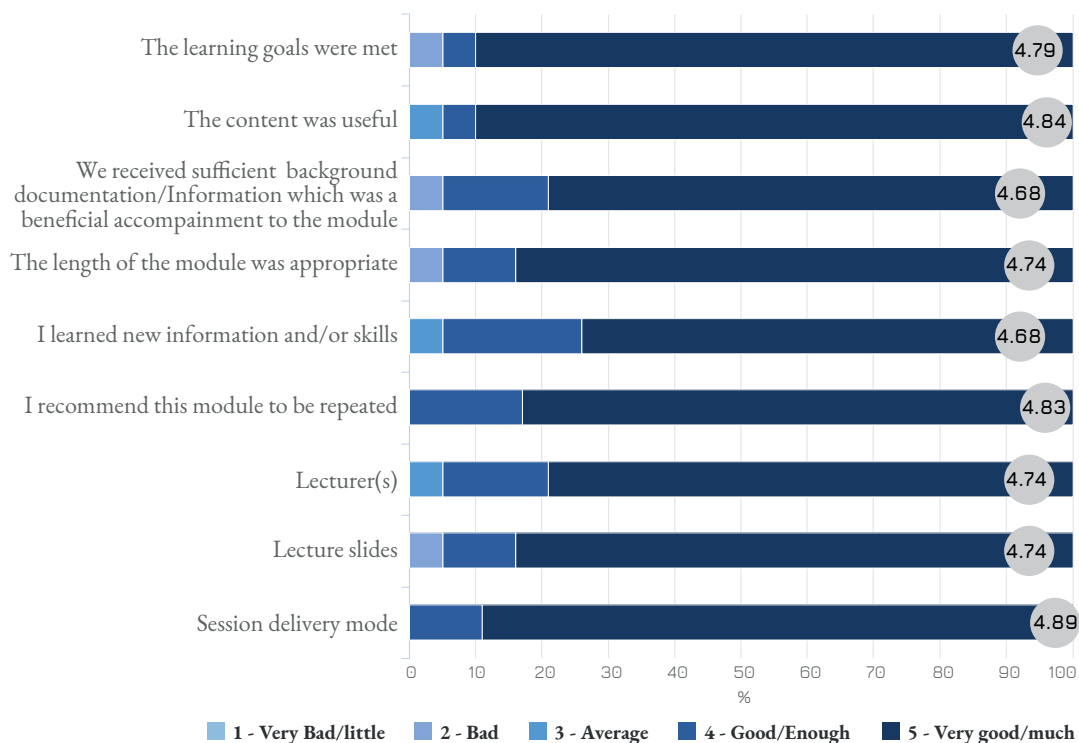




Session 5: Short presentations of participants' issue briefs during "gallery walk" (Tanja Kuchenmüller)

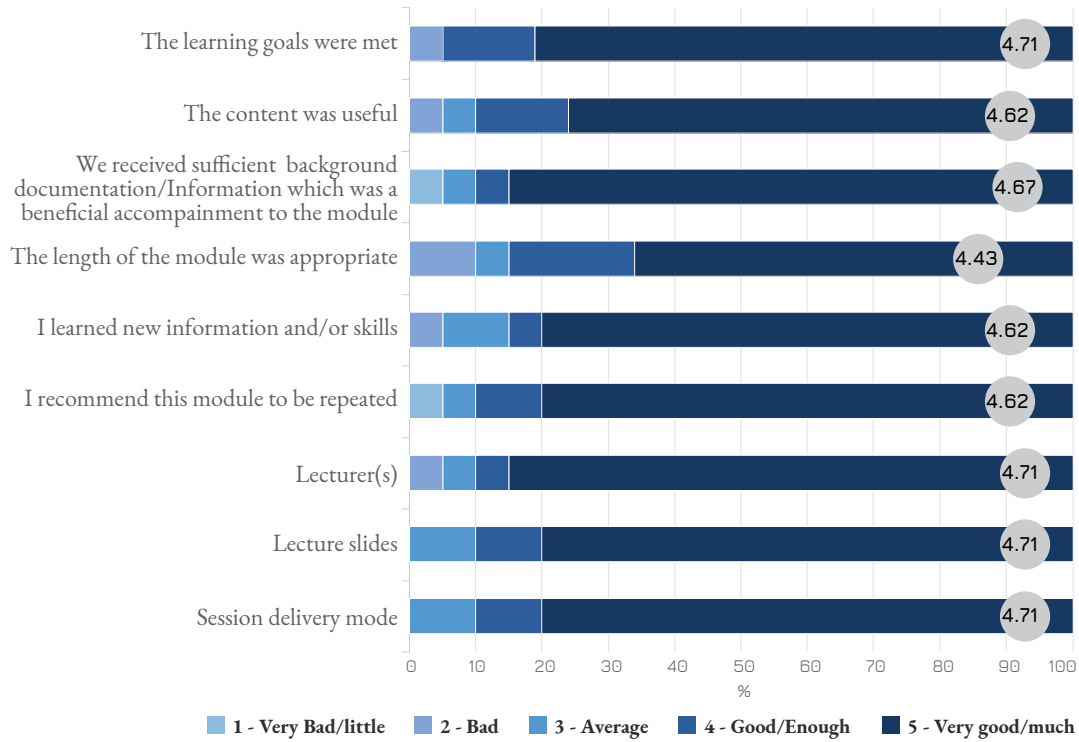


Session 6: Summary of the day incl. lessons learned and next steps, in particular how participants could disseminate the issue brief and bring it to the attention of national policy-makers (Tanja Kuchenmüller)

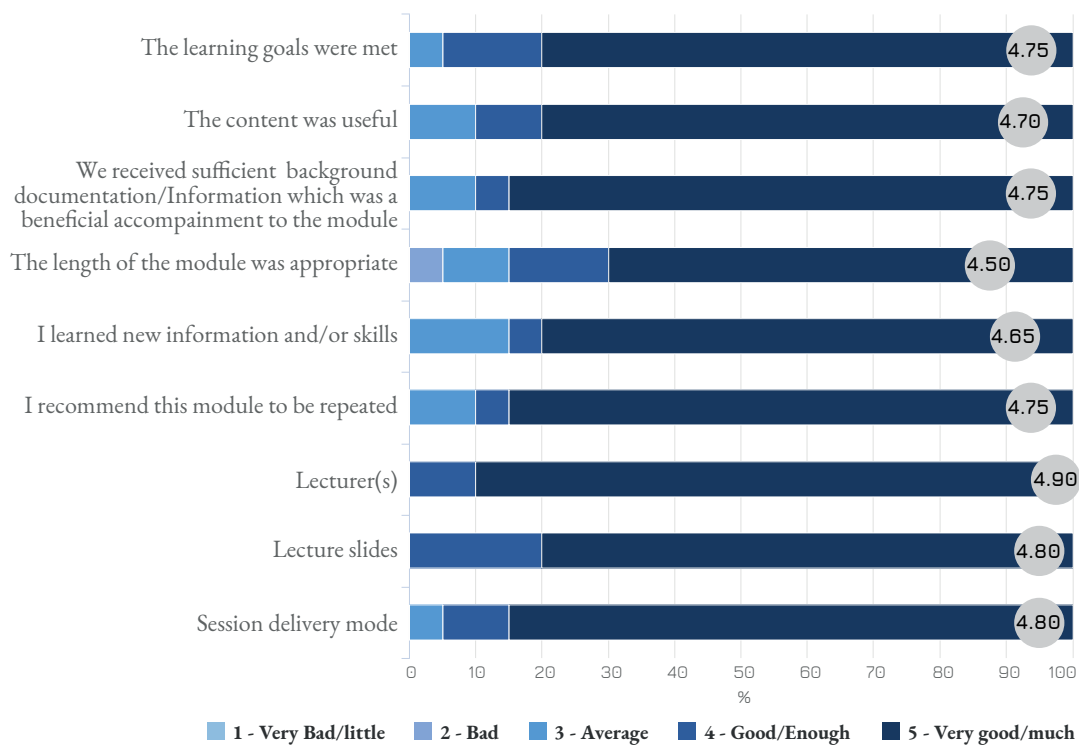


Day 4  
(20 respondents)

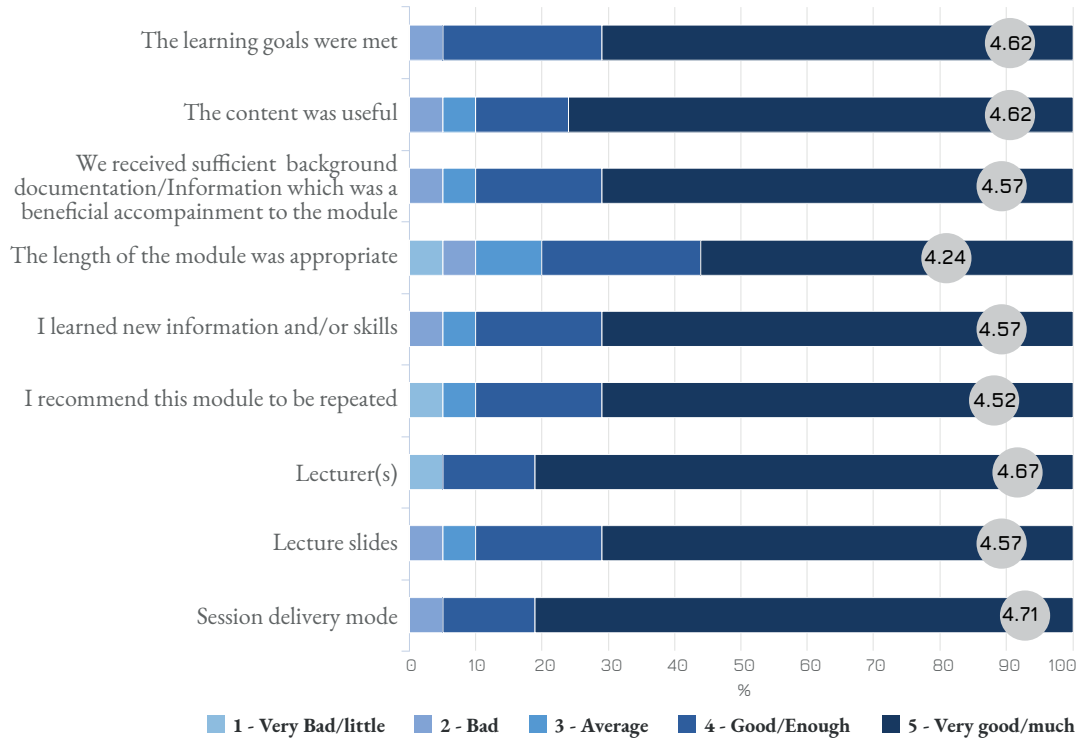
Session 1: Measuring well-being and quality of life – who is doing what and why? (Claudia Stein)



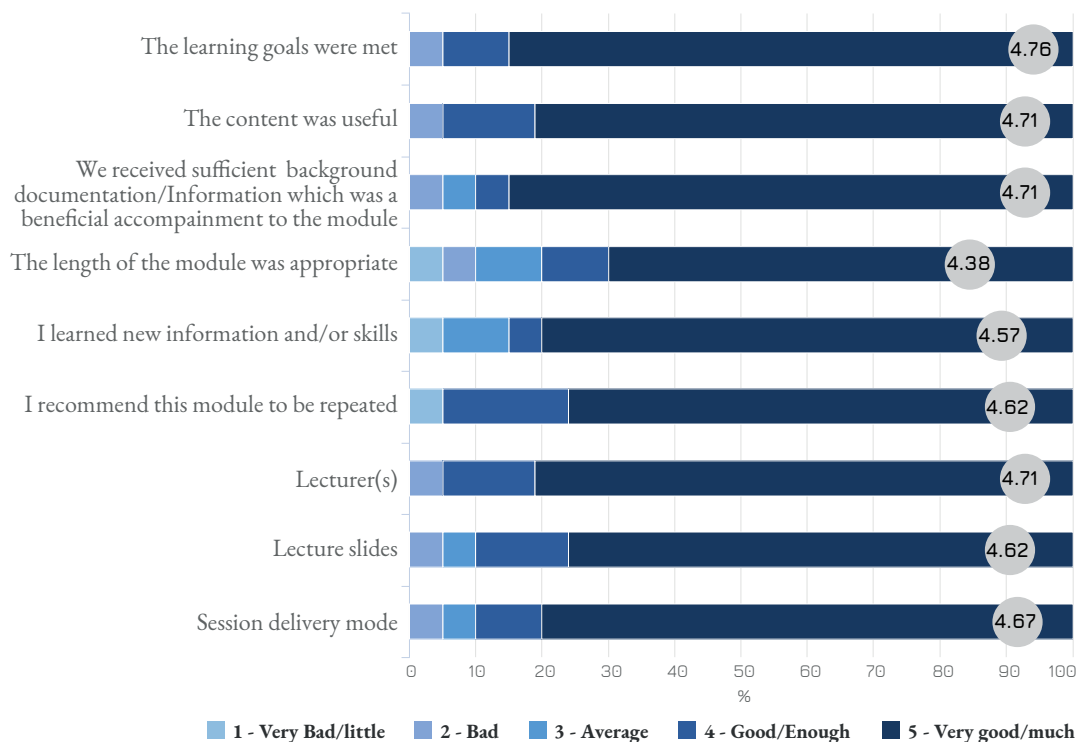
Session 2: Measuring well-being and quality of life – who is doing what and why? Group work (Claudia Stein)



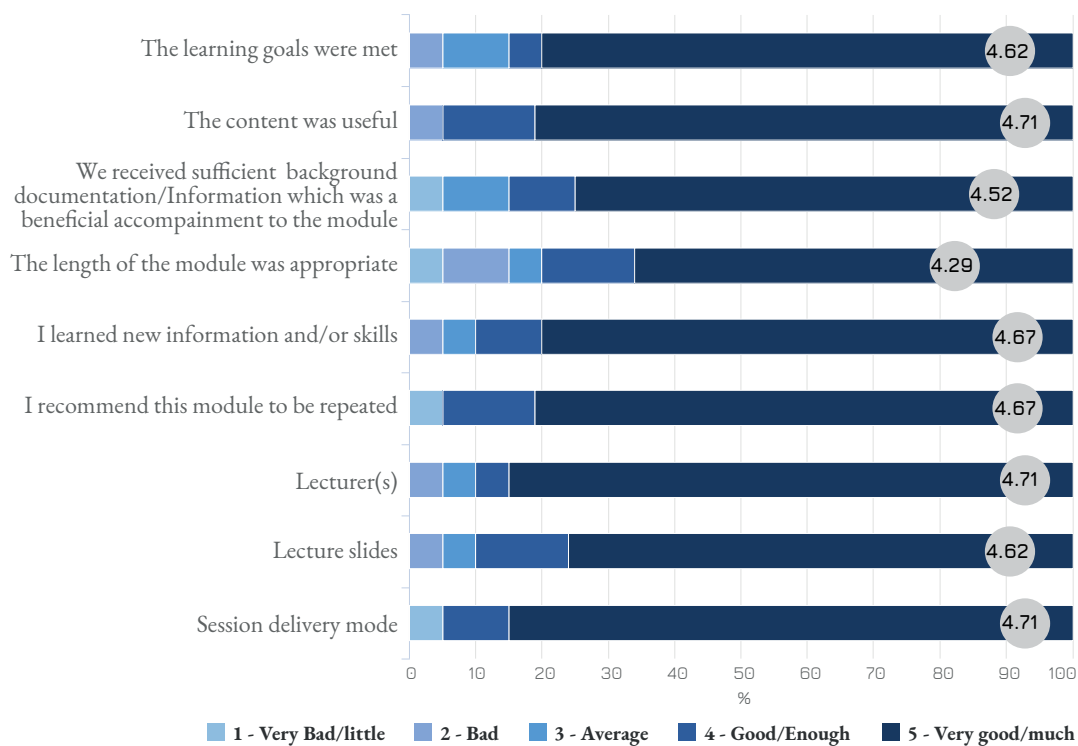
Session 3: Qualitative and quantitative dimensions of well-being – interactive presentation (Claudia Stein)



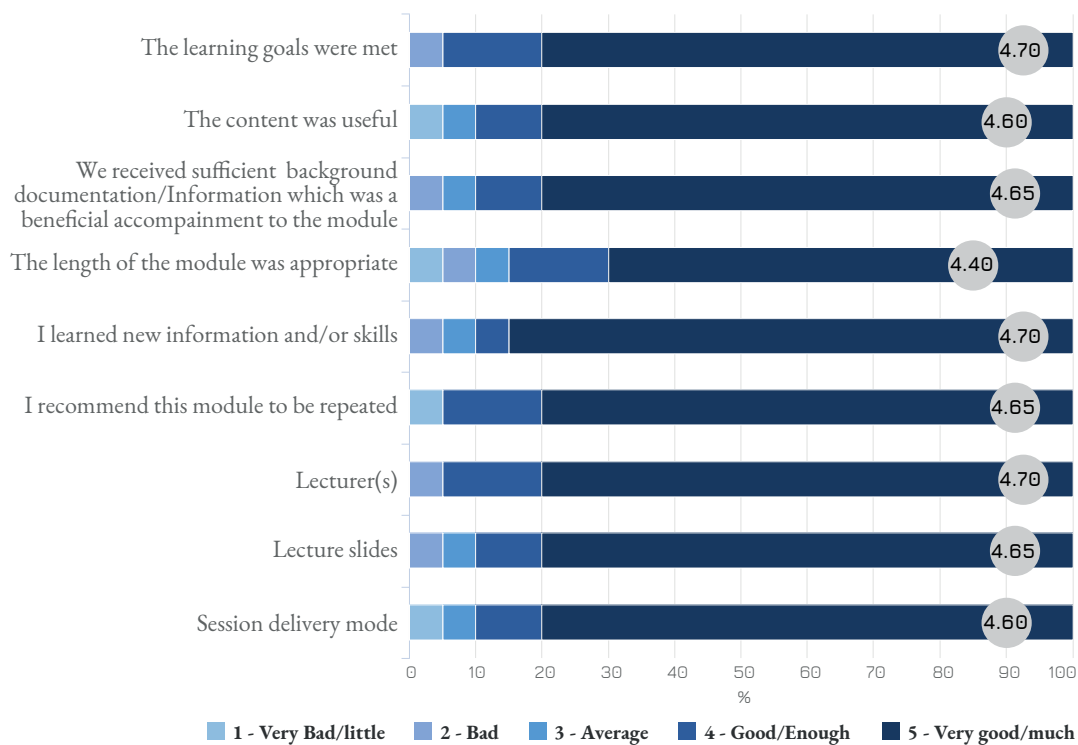
Session 4: Qualitative and quantitative dimensions of well-being – group work (Claudia Stein)



Session 5: Selecting and interpreting well-being measures – interactive presentation (Claudia Stein)

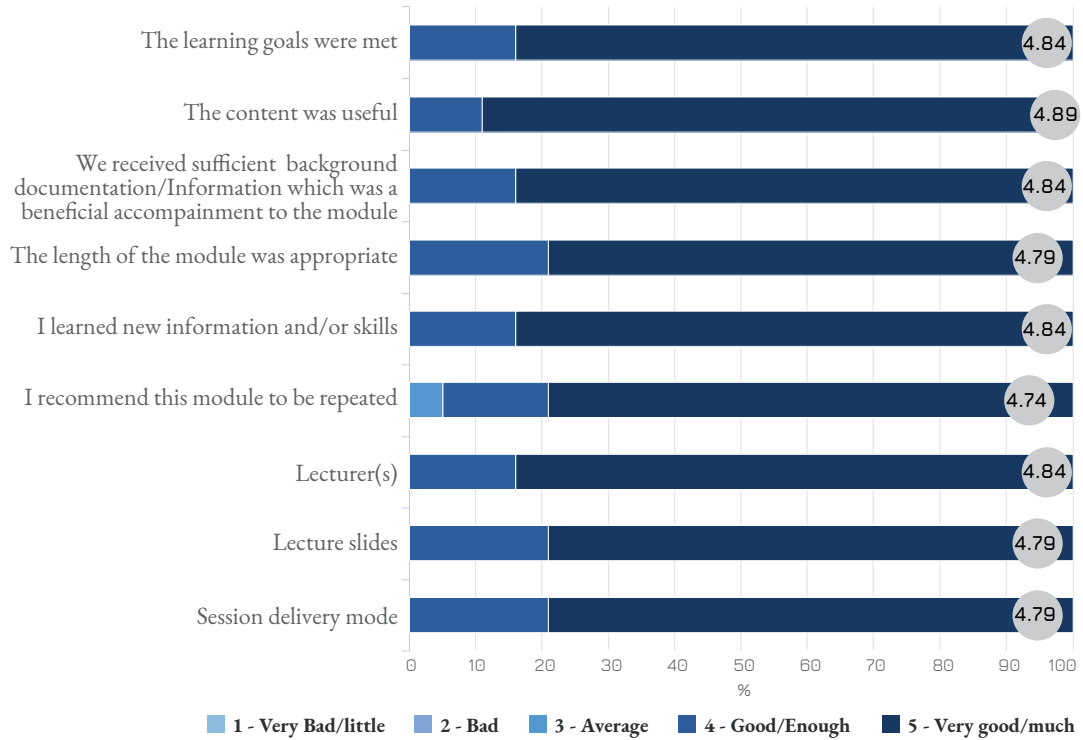


Session 6: Group work – selecting and interpreting well-being indicators in your country (Claudia Stein)

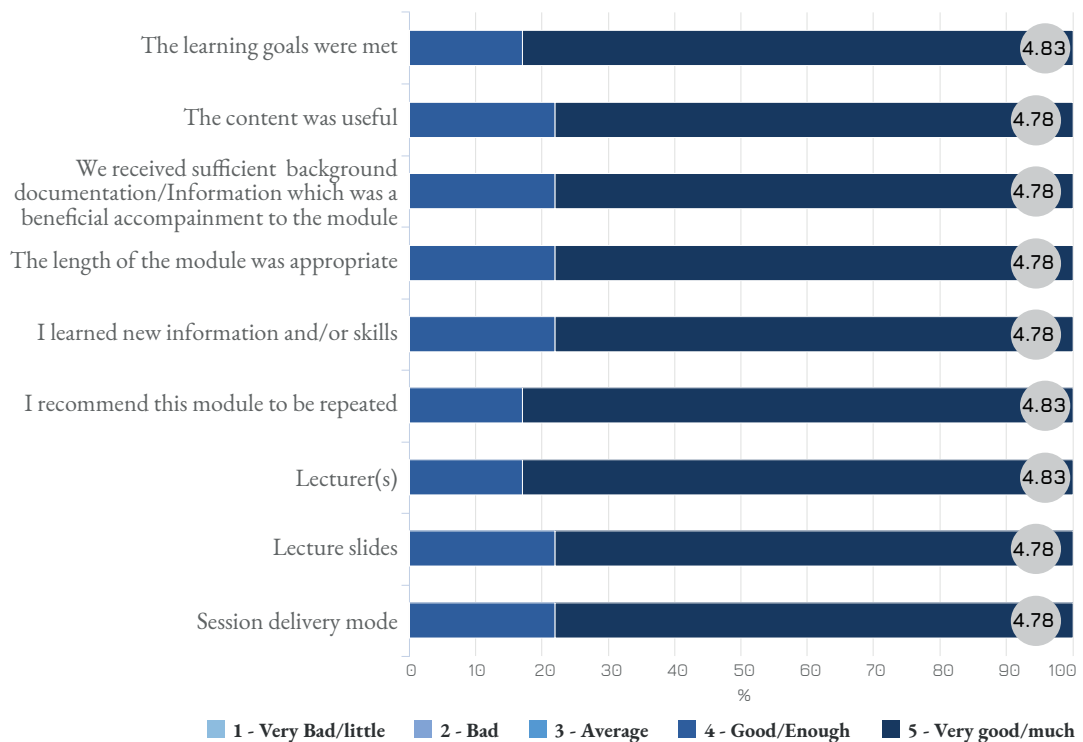


Day 5  
(19 respondents)

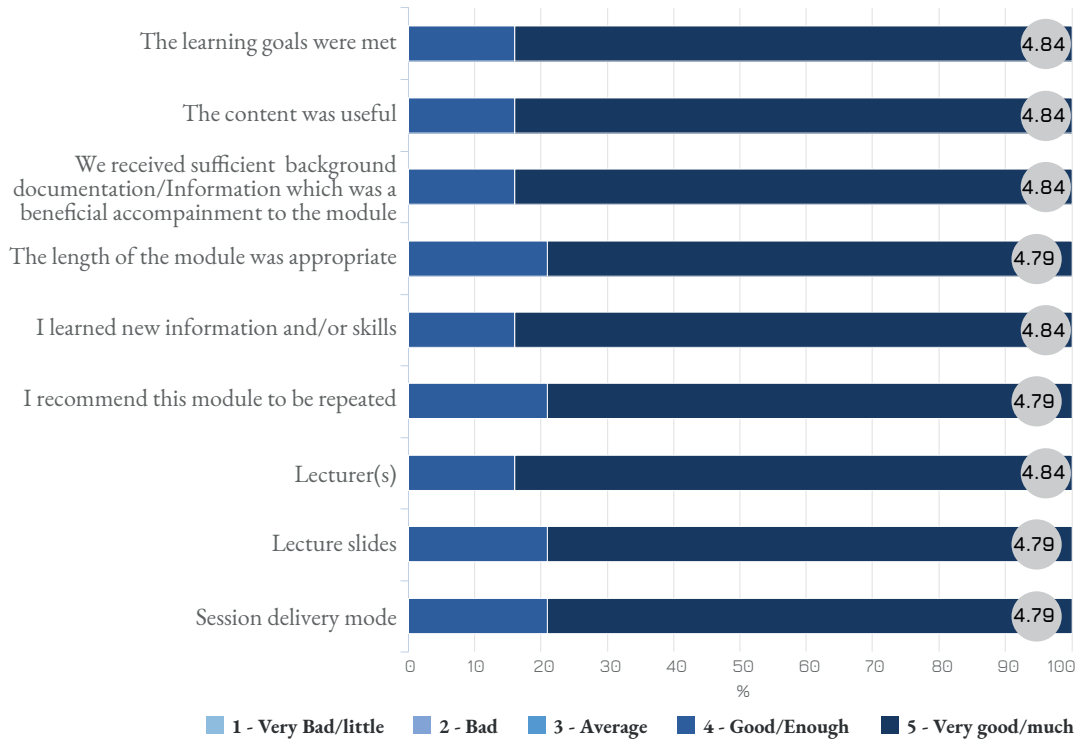
Session 1: Framing your communication (Claudia Stein)



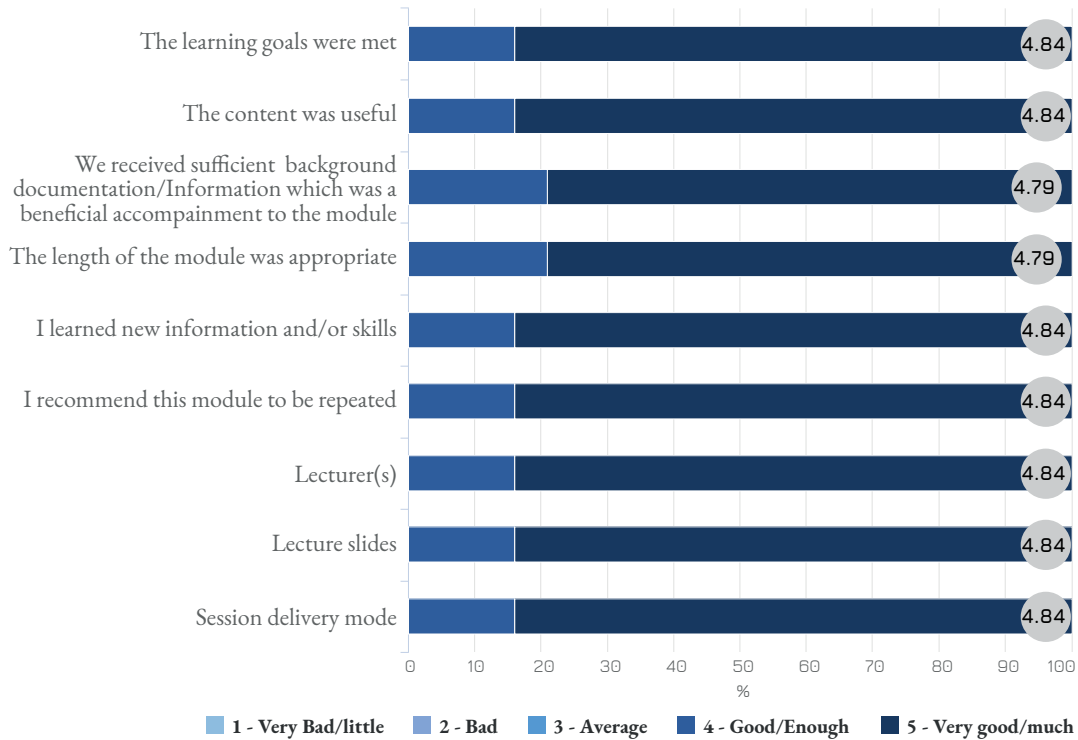
Session 2: Developing communication products (Claudia Stein)



Session 3: Working with media (Claudia Stein)



Session 4: The interview (Claudia Stein)











## The WHO Regional Office for Europe

The World Health Organization (WHO) is a specialized agency of the United Nations created in 1948 with the primary responsibility for international health matters and public health. The WHO Regional Office for Europe is one of six regional offices throughout the world, each with its own programme geared to the particular health conditions of the countries it serves.

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