

**Evaluation of Health System Research Training Workshops
undertaken by Nepal Health Research Council
in the period 1998-1999**

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**Nepal Health Research Council (NHRC)
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Evaluation of Health System Research Training Workshops undertaken by Nepal Health Research Council in the period 1998-1999.

Introduction:

Health System Research (HSR) is action-oriented research programme, concerned with applied research. Its aim is to strengthen national research capability, promote and coordinate research on regional priority problems related to health, social and economic development. It also works to carry on research designed to facilitate the application of scientific knowledge. Its distinctive feature is the intention to provide research intelligence which is useful in the process of decision-making. HSR attempts to involve different parties from different sectors and disciplines and it uses participatory approaches. In addition, HSR employs robust, replaceable methodologies which provide safeguards concerning validity and reliability of findings. This approach is cost-effective and timely, and can be used as a rational tool for making day-to-day management decisions.

In Nepal, Nepal Health Research Council (NHRC) is responsible to conduct training and workshops in different level under the frame work of HSR.

The purpose of HSR training and workshops is to assist in harnessing research to improve health status within the local context by applying and producing better scientific technology.

NHRC Nepal has arranged several training and workshops in different time/ period on the following categories of workers:

1. Policymakers and high-level managers who were involved in decision-making for health.
2. Health workers and mid-level managers who (need to develop a capacity for critical thinking and learn how to do simple research to) provide information to aid in problem-solving.
3. Researchers and academicians who need to realign their research efforts to focus on priority health problems in the country.
4. Research managers who need to advocate, promote, and support the development and use of HSR.

5. Trainers who need to develop the capacity to conduct the various types of training needed for HSR.

On the basis of above guidelines NHRC Nepal has conducted several workshop training programmes which are evaluated and expressed on the basis of following background:

1. The participants were from different disciplines and had different academic backgrounds and working experiences. After HSR training most of them were then capable of writing project proposal and conducting research according to research method.
2. They gained basic research terminology and systematic ways of research procedures and ethics.
3. Received adequate knowledge of the basic steps of the research process (such as rational, objectives, literature review, selection of study type, sampling, collection and analysis of data, construction of findings, conclusions and method of recommendations).

The objectives of this evaluation:

1. To check whether the training granted to the participants are benefiting them or not and to find out the problems that the participants are facing so as to introduce improvement thus making the training productive.
2. To strive to provide the basic requirement, facilities and resources that are necessary to carry on researches.
3. To ensure that the participants fully utilize their knowledge to carry on researches.
4. To promote, co-ordinate and disseminate research finding at all level so that they can be implemented in best way so as to gain their aimed target.
5. To acknowledge the view of resource persons regarding the input, output, commitment, and outcome of the training activities.

Methods used for evaluation:

The methods of evaluation were used on the basis of reviewing the NHRC's proceedings of the Training Workshops on Health System Research Methodology held between 1998 to 1999, and by using confidential questionnaires and interviewed by telephone as well as postal media from the participants and resource persons.

Findings and discussions:**1. On the basis of proceeding review:**

The HSR training conducted by NHRC between 1998 and 1999 were presented systematically as follows:

Training / Workshop I

Introduction:

The seventh Health System Research Methodology Workshop:

The training started from June 14 to 20, 1998. 19 participants from various institutions received training from ten qualified resource persons.

The contents of training:

(a) introduction, briefing on training objectives and training procedures (b) Scientific session (c) final group discussion, presentation (d) recommendation and closing session.

There was multidisciplinary participation and it was intensive with active interaction. The participants worked diligently from 10.00 AM to 5.00 PM and some times even till evening. The participants also completed assigned tasks utilizing their free time outside the office hours.

The participants were given proper orientation and guidance. A total of six research proposals were developed and presented. The participants first identified several problem oriented topics of research areas. After prioritization each of six groups selected one topic for proposal development. Each day the groups worked and presented the results in two sessions. At the end of session each group developed a systematic research proposal, presented it discussed in group. They also identified drawbacks and made suggestions. The six proposals prepared are listed as follows:

1. A study on the relationship between microbial water quality and prevalence of water borne diseases in Kathmandu valley.
2. Study on microbial quality of street fruits.
3. Comparative study of performance level and problems among MCHWS in Hilly and Terai region.
4. Study on effects of water pollution on health in rural community at Pyuthan district.
5. Hospital based study of teenage pregnancy in Kathmandu district hospital.
6. A study of quality of drinking water and its outcome during monsoon in Chandranigahapur of Rautahat district.

At the end of training the participants made following recommendation:

1. The time duration of the workshop should be extended (at least two weeks).
2. Statistical aspect should be more elaborated and emphasized.
3. Field visit should be included during the workshop period.
4. More foreign resource persons from health and social research field should be included in the training workshop.
5. Computer facility must be provided for developing the research proposal for each group.

Training/ workshop II

Eighth Training Workshop on Health System Research Methodology:

Introduction:

The workshop was held in NHRC building on August 23-29, 1998 and sponsored by WHO. There were 19 participants selected from various institutions.

The aims of the eighth workshop were:

1. To broaden the understanding and capability as well as to strengthen the decision making power of health related professionals.
2. To motivate the young researchers to develop quality research proposals.
3. To conduct research that could be utilized in strengthening service programme.

Expected Outcome from the workshop were:

Three research proposals were developed for the potentiality of research capability. The participants expressed themselves and made some recommendations.

Group work:

Participants were divided into three groups, each consisting of six/ seven participants. Each individual was asked to select a research topic and each group was asked to choose a single research topic according to the rating scale provided to them. Then the group worked on the problem identification and justification, including its analysis and research topic selection.

Each group was made to emphasize on following:

1. Justification, 2. Research Topic, 3. Objectives: 3.1. General and specific,
4. Statement of problems, 5. Research Questions, 6. Design, 7. Research Methodology,
8. Sampling, 9. Duration, 10. Summary, 11. Utilization of Research Results and
12. References.

Output from the Group work:

Three research proposals were developed by the participants in the preliminary forms at the workshop. They were:

1. Prevalence of STD in female carpet factory workers of Kathmandu and to plan intervention.
2. Knowledge, Attitude and Practice of Secondary level students on HIV/ AIDs in KMC.
3. Prevalence of common diseases among the workers handling waste disposal of Kathmandu Metropolitan city (KMC).

Recommendations made by participants:

1. As the trip always generate interest it would be better if it is organized outside Kathmandu valley.
2. Practical assignments and field visits should be included so that the participants would be able to learn more.

3. Qualified experts on the concerned areas need to be invited.
4. Handouts and recent articles on the topic need should be provided.
5. Skill development part should be extended and for this after each and every lecture group work and presentation should be organized.
6. To make it more successful computer system need to be introduced.
7. For the people outside of the valley accommodation should be provided.
8. Statistical aspect should be more elaborated and emphasized.

Ninth Training/ Workshop III.

Introduction:

The training workshop on HSR methodology was organized by NHRC and sponsored by WHO between Sept. 6-12, 1998. There were 19 participants selected from various institutions.

Objectives:

1. To strengthen understanding and capabilities of health and related professionals in order to develop HSR proposals independently, and to strengthen the decision-makers to utilize research ability results.
2. To motivate the young researchers to develop quality research proposals.
3. To conduct research that could be utilized in strengthening service programme.

Expected Outputs:

1. Three research proposals were developed.
2. The research capability of all the participants was strengthened.
3. The participants contributed to the institutional strengthening of their respective institutes by training their staff in research methodology.

Chairman, NHRC welcomed all the participants and expressed the main theme of the training was to develop the knowledge and skill of the participants not only by studying the books but also by the interacting with one another.

Participants were divided into three groups, each consisting of six/ seven participants. Each individual was asked to select a research topic according to the need of the problem and each group was asked to choose a single research topic according to the rating scale

provided to them. Then there was group work on the problem identification and justification including its analysis and research topic selection.

Each group was made to emphasize on following:

1. Justification, 2. Research Topic, 3. Objectives: 3.1. General and specific,
4. Statement of problems, 5. Research Questions, 6. Design, 7. Research Methodology,
8. Sampling technique, 9. Duration, 10. Summary, 11. Utilization of Research Results and
12. References.

Keeping in view the above criteria, group work was conducted and developed three proposals:

1. Group A: The risk of childhood tuberculosis with their mother having active TB.
2. Group B: Knowledge, attitude and perception of HIV/ AIDS among the Taxi Drivers in Kathmandu.
3. Clinical waste disposal in general tertiary hospitals of Nepal.

At the end of session the participants jointly **recommended** as follows:

1. This type of training should be held frequently by NHRC so that more people would have the opportunity to learn more about the research methodology.
2. Statistical need to be given more time with numerous examples along with the use of Epi Info 6 in computer.
3. Qualified experts on the concerned areas need to be invited.
4. Group discussion need to be extended.
5. The training should be prolonged.

Tenth Health System Research Methodology training/ workshop IV:

The workshop was held in NHRC building between October 7 to 13, 1998. There were 18 participants selected from various institutions.

Objectives:

1. To broaden the understanding and capability as well as to strengthen the decision making power of health related professionals.
2. To motivate the young researchers to develop quality research proposals.
3. To conduct research that could be utilized in strengthening service programme.

Expected Outputs:

1. Three research proposals were developed.
2. The research capability of all the participants was strengthened.
3. The participants contributed to the institutional strengthening of their respective institutes by training their staff in research methodology.

The chairman of NHRC welcomed all the participants and expressed the main theme of the training was to develop the knowledge and skill of the participants not only by studying the books but also by the interacting with one another.

Participants were divided into three groups, each consisting of six/ seven participants. Each individual was asked to select a research topic according to the need of the problem and each group was asked to choose a single research topic according to the rating scale provided to them. Then there was group work on the problem identification and justification including its analysis and research topic selection.

Each group was made to emphasize on following:

1. Justification, 2. Research Topic, 3. Objectives: 3.1. General and specific,
4. Statement of problems, 5. Research Questions, 6. Design, 7. Research Methodology,
8. Sampling technique, 9. Duration, 10. Summary, 11. Utilization of Research Results and
12. References.

The guidelines provided and developed three proposals:

1. Prevalence of water born diseases among the users of boiled or direct tap water in Balaju area.
2. Effects of food preparation practices in malnutrition among under 5 children in Hadigaun.
3. Knowledge attitude and practice concerning HIV/ AIDs and ATD among teenage students of secondary school in Kathmandu district.

Recommendations made by participants:

1. As the training has benefited the participants, such type of training should be conducted more frequently.
2. Statistical need should be emphasized more and adequate time should be provided.
3. Qualified experts on the concerned areas need to be invited.
4. Lodging should be provided to the non-local participants.

Eleventh Training/ workshop on HSR- V:

Introduction: The training workshop on HSR methodology was organized by NHRC and sponsored by WHO between Sept. 6 to 12, 1998. There were 19 participants selected from various institutions.

Objectives:

1. To strengthen understanding and capabilities of health and related professionals in order to develop HSR proposals independently, and to strengthen the decision-makers to utilize research ability results.
2. To motivate the young researchers to develop quality research proposals.
3. To conduct research that could be utilized in strengthening service programme.

Expected Outputs:

1. Three research proposals were developed.
2. The research capability of all the participants was strengthened.
3. The participants contributed to the institutional strengthening of their respective institutes by training their staff in research methodology.

The chairman of NHRC welcomed all the participants and expressed the main theme of the training was to develop the knowledge and skill of the participants not only by studying the books but also by the interaction of the participants among themselves.

Participants were divided into three groups, each consisting of six/ seven participants. Each individual was asked to select a research topic according to the need of the problem and each group was asked to choose a single research topic according to the rating scale provided to them. Then there was group work on the problem identification and justification including its analysis and research topic selection. The guidelines provided to the group were as follows:

1. The group should identify a core problem relating to the current status of the country.
2. Each group member should select one or two topics relating to the core-problem and rate the selected topic using the scoring sheet provided.
3. Select a topic that received the highest scores.
4. Make a problem tree (problem analysis diagrams).
5. Place a core problem in the center than write the contributing factors around the problem. Arrows should indicate the relationship between these factors. When regrouping the contributing factors, try to classify them, (e.g. Service-related factors, Socio-economic factors, disease related factors etc.).
6. Re-arrange these factors in the form of statement of the research problems.

The criteria given to the group for the selection of the topic were as follows:

- a. Political commitment and social obligation,
- b. Magnitude of the problem,
- c. Community demand,
- d. Manageability,
- e. Ethical acceptability,
- f. Avoidance of duplication.
- g. The rating scale provided were as 1= low; 2= medium; 3= high.

Outputs from the group work:

Three research proposals were developed by the participants in their preliminary forms at the workshop. They were:

1. Knowledge and practice on reproductive health among school enrollee and school dropout adolescent girls.
2. Factors responsible for water pollution in ward no. 34 of Kathmandu Municipality Corporation.
3. Vehicle pollution related chest diseases and hearing impairment among Geriatric age group in Thankot.

Participants view and recommendations:

1. Statistics and computer classes should be extended.
2. More emphasize should be given to group works.
3. Field work is very essential, thus it should be included.
4. More emphasize should be given in making the homogeneous group rather than heterogeneous group during the group formation.
5. Practical class on Med-Line search should be extended.
6. Duration of the training workshop be at least two weeks.
7. Steps in preparation a good research proposal and data collection procedures part are not to be slimmed down, but it should be at least two hours sessions.
8. Paper relating to Primary Health Care (PHC) issues should be included in the scientific session.

Twelfth training / workshop on HSR methodology- VI:

The training workshop on HSR methodology was organized by NHRC and sponsored by WHO. The workshop was held in NHRC building on February 10 to 16, 1999. There were 20 participants selected from various institutions.

Objectives:

1. To strengthen understanding and capabilities of health and related professionals in order to develop HSR proposals independently, and to strengthen the decision-makers to utilize research ability results.
2. To motivate the young researchers to develop quality research proposals.
3. To conduct research that could be utilized in strengthening service programme.

Expected Outputs:

1. Three research proposals was developed.
2. The research capability of all the participants was strengthened.
3. The participants contributed to the institutional strengthening of their respective institutes by training their staff in research methodology.

Group work:

The participants were divided into three groups namely Group A, Group B, Group C to prepare the proposals on health and health related subjects. Before carryout the group work, they were properly guided and explained the mechanism of group work and proposal writing methods such as selection of proposal title, proposal summary, introduction, statement of the problem, literature review, rationale/ justification, research question, formulation of hypothesis, objectives, methodology, pre-testing the methodology, work plan, budget and expected significance from the result and way of sequencing references etc. Further it was explained that the title of the proposal should convey the message and should be attractive.

Outputs from the group work:

Three research proposal were developed by the participants and presented:

1. Study of respiratory diseases among Vikrom tempo drivers in Kathamandu valley.
2. Causes of scarcity of front-line health worker in Morang district.
3. Status of malnutrition among intestinal parasite infection in children.

During the training period an evaluation was done under the supervision of 5 resource persons on 5 major areas:

(i) Training process, (ii) Assistance provided by resource persons, (iii) Participation/ group discussion, (iv) Objective achievement and (v) comments/ suggestions. Most the participants were requested to draw a pictorial diagram for their response of the questions: (I) to (iv), and write few words for the question (v).

Evaluation results:

Q.N.	Fully satisfied	Satisfied	Not satisfied
(i)	38 %	37 %	25 %
(ii)	46 %	38 %	16 %
(iii)	43 %	37 %	20 %
(iv)	23 %	67 %	10 %
(v)	Need more time for practical work.		

Thirteenth Training workshop on Health System Research Methodology-VII:

Introduction:

The training workshop on HSR methodology was organized by NHRC and sponsored by WHO. The workshop was held in NHRC building on February 21 to 27, 1999. There were 20 participants selected from various institutions.

Objectives:

1. To strengthen understanding and capabilities of health and related professionals in order to develop HSR proposals independently, and to strengthen the decision-makers to utilize research ability results.
2. To motivate the young researchers to develop quality research proposals.
3. To conduct research that could be utilized in strengthening service programme.

Expected Outputs:

1. Three research proposals was developed.
2. The research capability of all the participants was strengthened.

3. The participants contributed to the institutional strengthening of their respective institutes by training their staff in research methodology.

Group work:

The participants were divided into three groups namely Group A, Group B, Group C to prepare the proposals on health and health related subjects. Before carryout the group work, they were properly guided and explained the mechanism of group work and proposal writing methods such as selection of proposal title, proposal summary, introduction, statement of the problem, literature review, rationale/ justification, research question, formulation of hypothesis, objectives, methodology, pre-testing the methodology, work plan, budget and expected significance from the result and way of sequencing references etc. Further it was explained that the title of the proposal should convey the message and should be attractive. In addition, the sample size estimation and calculation as well as data processing and analysis were described in detail.

Outputs from the group work:

Three research proposal were developed by the participants and presented. They were:

1. Comparative study of antibiotics prescribed in primary, secondary, tertiary hospital and private practitioners.
2. Utilization of antenatal, natal and postnatal services provided Panga healthpost and other health institution by women of reproductive age in Panga VDC.
3. Colour additives in raw vegetables in Kathmandu district.

Evaluation on workshop:

During the training period an evaluation was done under the supervision of 5 resource persons on 5 major areas:

- (i) Training process, (ii) Assistance provided by resource persons, (iii) Participation/ group discussion, (iv) Objective achievement and (v) comments/ suggestions. Most the participants were requested to draw a pictorial diagramme for their response of the questions: (I) to (iv), and write few words for the question (v).

Evaluation results:

Q.N.	Fully satisfied	Satisfied	Not satisfied
(i)	27 %	73 %	0 %
(ii)	64 %	18 %	18 %
(iii)	64 %	36 %	0 %
(iv)	27 %	46 %	27 %
(v)	Need more time for practical work.		

Fourteenth Training workshop on Health System Research Methodology- VIII:

The training workshop on HSR methodology was organized by NHRC and sponsored by WHO. The workshop was held in NHRC building on August 1 to 7, 1999. There were 19 participants selected from various institutions.

Objectives:

1. To strengthen understanding and capabilities of health and related professionals in order to develop HSR proposals independently.
2. To motivate the young researchers to develop quality research proposal.
3. To develop the ability of the participants to conduct similar workshops in their respective institutions.

Expected Outputs:

1. Three research proposals was developed.
2. The research capability of all the participants was strengthened.
3. The participants contributed to the institutional strengthening of their respective institutes by training their staff in research methodology.

Group work:

The participants were divided into three groups namely Group A, Group B, Group C to prepare the proposals on health and health related subjects. Before carryout the group

work, they were properly guided and explained the mechanism of group work and proposal writing methods such as selection of proposal title, proposal summary, introduction, statement of the problem, literature review, rationale/ justification, research question, formulation of hypothesis, objectives, methodology, pre-testing the methodology, work plan, budget and expected significance from the result and way of sequencing references etc. Further it was explained that the title of the proposal should convey the message and should be attractive. In addition, the sample size estimation and calculation as well as data processing and analysis were described in detail.

Outputs from the group work:

Three research proposals were developed by the participants and presented. They were:

1. A study of women who have undergone induced abortion.
2. Health status of mother and infant in Imadol village development committee of Lalitpur.
3. Awareness of tuberculosis and smoking among the smoker groups at Gaindakot village development committee of Nawalparasi district.

Evaluation of the workshop from the participants using on scale 1 to 5 (1 means disagree completely and 5 means agree completely), is presented as follows:

Percent distribution of the participants by their rating on different aspects of the workshop:

S.N.	Statement	Scale and percent				
		1	2	3	4	5
1.	This workshop has considerably strengthened my knowledge on HSR methodology	-	10.5	21.1	57.9	10.5
2.	The time allotment for the workshop	-	26.3	52.6	15.8	5.2
3.	Appropriateness of mix of group and teachers' presentation.	-	-	26.3	63.5	10.5
4.	Satisfied with the assistance provided by resource persons	-	5.2	31.6	26.5	36.8
5.	I expect to be able to use the knowledge gained on HSR methodology in the future	-	10.5	10.5	52.6	26.3
6.	NHRC should conduct similar training in the future.	-	-	15.8	31.6	52.3
7.	My over all competency in health research would be	-	-	26.3	52.3	21.1
8.	My over all evaluation of this workshop would be	-	-	10.5	57.9	31.6

The evaluation found that, 58% of the participants strongly agreed that this workshop strengthened their knowledge on HSR methodology considerably and the majority of them were satisfied with the time given for the workshop. About 63% of them strongly agreed that group and teaches' presentation was appropriate. Likewise, majority of them agreed that this workshop was very good. However, some participants suggested that duration of the workshop should be increased up to one month and conduct advance training on quantitative and qualitative data analysis in the future. One of them also suggested that

NHRC should co-ordinate and follow up those who had undergone the training on HSR methodology.

Training workshop on issues and methods in Health Research- IX:

Introduction:

The training workshop on “ **Issues and methods in Health Research**” was held at Hotel Himalaya, Lalitpur, Nepal and the workshop was held at the Nepal Health Research Council, Ramshah Path, Kathmandu, Nepal from June 21 to July 2, 1999. The resource persons were from NHRC, IOM and WHO/ SEARO. There were 26 participants selected from various NGOs, INGOs, Gos and institutions, including four from Myanmar.

Objectives:

1. To enhance the capacity for applying qualitative research methods in conducting health research .
2. To enhance technical skills in processing, analysing and interpretation qualitative research data.
3. To develop skills in analysing qualitative research data using computer software QSR.NUD.IST.
4. To enhance understanding of technical issues commonly encountered in conducting health research.

Expected Outputs:

1. The capacity for applying qualitative research methods in conducting health research among the participants were strengthened.
2. The skills in qualitative and quantitative data presentation, analysis, critique and writing-up research proposal / papers among the participants were strengthened.
3. The participants were conducted similar types of workshop in their respective institutions, which will contribute to strengthening service programme.

Group work:

The group work was conducted on two major questions related to health system of Nepal:

1. What are the different health systems, sectors and levels of health care that can be distinguished in Nepal?
2. Identify 3 health research questions/ topics where a holistic in-depth description of the Nepali health system would be a necessary part of the research project.

Workshop evaluation:

Evaluation of the workshop obtained from the participants were as follows:

1. This workshop has considerably strengthen my knowledge of a number of important issues in health research (such as responsible conduct of research, sampling techniques, how to avoid fraud and misconduct in research, etc.)

Scale	Number of participants
5	16
4	6
3	4

2. This workshop has considerably strengthened my knowledge of qualitative research (such as interview and observation techniques, data management, data quality, basic data analysis, etc.)

Scale	Number of participants
5	10
4	7
3	6
2	3

3. This workshop has been successful in giving a basic introduction to the Q.S.R. Nud * I.S.T. software package.

Scale	Number of participants
5	15
4	4
3	7

4. The practical fieldwork exercise and subsequent practical data management is necessary to get a proper first understanding of qualitative research.

Scale	Number of participants
5	18
4	7
3	1

5. I expect to be able to use the knowledge gained on issues in health research in future work.

Scale	Number of participants
5	13
3	2
4	10
2	1

6. I expect to be able to use the knowledge gained on qualitative research in my future work.

Scale	Number of participants
5	11
4	9
3	4
2	1
1	1

7. I expect to be able to use Q.S.R. Nud* IST software package in my future work.

Scale	Number of participants
5	12
4	6
3	4
2	4

8. I find the mix group work and teacher presentation appropriate.

Scale	Number of participants
5	15
4	6
3	3
2	2

9. I find the mix of general issues and qualitative research training appropriate.

Scale	Number of participants
5	9
4	9
3	6
2	2

10. The presentations were generally clear and at an appropriate level of difficulty.

Scale	Number of participants
5	14
4	3
3	7
2	2

11. The group interaction and participation during this workshop has been positive and fruitful.

Scale	Number of participants
5	17
4	7
3	1
2	1

12. The time allocated for the workshop was sufficient.

Scale	Number of participants.
5	12
3	3
2	5
1	6

13. I would have been able and interested to participate in a longer workshop giving more comprehensive coverage of the same topics.

Scale	Number of participants
5	17
4	6
3	3

14. I think NHRC and SEARO should conduct similar workshops in future.

Scale	Number of participants
5	18
4	6
3	2

15. On a scale from 1-5 maximum quality being 5, my overall evaluation of this workshop would be.....

Scale	Number of participants
5	10
4	8
3	4
2	2
1	2

Note:

5= Agree completely

1= Disagree completely

The numbers in between signify the range from one to the other.

Training workshop on health system research methodology for *community level health workers*- X.

Introduction:

The training workshop on HSR methodology for community health workers was organised by NHRC and sponsored by WHO. The workshop was held in NHRC building on September 5-11, 1999. There was 23 participants selected from various health posts of the five regions of Nepal.

Objectives:

1. To train the PHC level health workers on simple health systems research methodologies.
2. To train the PHC level health workers on how to access research information.
3. To train the PHC level health workers on how to use research based information to improve their work.

Expected outputs:

1. The PHC level health workers obtained some knowledge on HSR methodologies.
2. The participants knew how to access research information.
3. The participants were trained in writing simple HSR proposals in Nepali language.

Participants were divided into three groups namely Group A, Group B and Group C. Group work was conducted on problem identification; justification, analysis and research topic selection. After group work, each group developed research proposal and presented their research title, objectives and variables.

Three proposals developed by participants were:

1. Awareness of diarrheal diseases among the mothers of Aalapot village development committee of Kathmandu District.
2. Low use of oral contraceptive pills in Jhorahat VDC of Morang.
3. Factors affecting child mortality in Bauwa VDC of Sindhupalchok.

Training workshop on HSR methodology for Community level Health Workers- XI.**Introduction**

The training workshop on HSR methodology for community health workers was organised by NHRC and sponsored by WHO. The workshop was held in NHRC building on September 26- October 2, 1999. There was 20 participants selected from various health posts of the five regions of Nepal.

Objectives:

1. To train the PHC level health workers on simple health systems research methodologies development in Nepal.
2. To train the PHC level health workers on how to access research information.
3. To train the PHC level health workers on how to use research based information to improve their work.

Expected outputs:

1. The PHC level health workers obtained some knowledge on HSR methodologies.
2. The participants knew how to access research information.
3. The participants were trained in writing simple HSR proposals in Nepali language.

Participants were divided into three groups namely Group A, Group B and Group C. Group work was conducted on problem identification; justification, analysis and research topic selection. After group work, each group developed research proposal and presented their research title, objectives and variables.

Three proposals developed by participants were:

1. Factors affecting diarrheal diseases among children of Mahankal village development committee of Sindhupalchok district.
2. Relation between incidence of acute respiratory infections (ARI) and educational status of mothers in Bhadrabas VDC of Kathmandu.
3. Drinking water and prevalence of worm infestation in Naikap VDC of Kathmandu.

Training workshop on HSR methodology for Community level Health Workers- XII.

Introduction:

The training workshop on HSR methodology for community health workers was organized by NHRC and sponsored by WHO. The workshop was held in NHRC building on November 1-7, 1999. There was 20 participants selected from various health posts of the five regions of Nepal.

Objectives:

1. To train the PHC level health workers on simple health systems research methodologies development in Nepal.
2. To train the PHC level health workers on how to access research information.
3. To train the PHC level health workers on how to use research based information to improve their work.

Expected outputs:

1. The PHC level health workers obtained some knowledge on HSR methodologies.
2. The participants knew how to access research information.
3. The participants were trained in writing simple HSR proposals in Nepali language.

Participants were divided into three groups namely Group A, Group B and Group C. Group work was conducted on problem identification; justification, analysis and research topic selection. After group work, each group developed research proposal and presented their research title, objectives and variables.

Three proposals developed by participants were:

1. Malnutrition Problem among children of Shanti Nagar Village Development.
2. Worm Infestation and knowledge about it among students of primary schools in Benighat.
3. Treatment System and Treatment seeking Behavior of People in Acute Respiratory Infections (ARIs) in Adarsha VDC.

At the end of training workshop one of the participant expressed thanks to the resource persons and the organizers of the Nepal Health Research Council NHRC. He said that this workshop was very essential for community level health workers and we participants were very glad to get an opportunity to learn about research methods. He said that they benefited from the training and further said that they would definitely utilize the gained knowledge in their related field. Finally he requested NHRC to continue such type of training in future also.

Findings and discussions:

2. From Respondents:

A total of 240 participants held between June, 1998 to November, 1999 from various areas were involved in the HSR training workshops.

Out of 240 participants 155 (64.6 %) were male and 85 (35.4 %) were female. 57 participants could be contacted by mail and telephone. Other information (from reviewing NHRC proceeding of the training workshop on health systems research methodology conducted between June, 1998 and November, 1999) were collected and analysed..

Table: 1. Sexwise distribution of participants and respondents

Male	No (%)	Female	No (%)	Total (%)
Participants	155 (64.6%)	Participants	85 (35.4%)	240 (100)
Respondents	31 (54.4%)	Respondents	26 (45.6)	

The above table (Table 1) indicates that male participants was higher than female participation. The HSRM owes the credit for better gender equity, equality and justice. In the training workshops, male were found more active, regular and enthusiastic in knowing exchange, sharing experiences but statistically no significance difference ($P > 0.005$) was observed. However, the HSRM workshops has positive impact through equal participation of both the gender.

Respondents by age group:

Among the 57 candidates who replied the questionnaires, 35.1% were age group 31 to 40 and 10.5% was above 51 years of age. 5 (8.7%) respondents did not mentioned their age (Table 2).

Table 2. Age-wise distribution of respondents.

S.N.	Age	Number	Percent
1.	Below 20 years of age	0	0
2.	21 - 30	12	21.05
3.	31 - 40	20	35.08
4.	41 - 50	14	24.5
5.	51 >	6	10.5
6	no response	5	8.77
	Total	57	

The above table shows that the trainees were adult and mature since no candidate was below 20 years of age. Majority (35.08%) were of 31 to 40 years, and were active in education and research.

Table 3. Type of participants and number of respondents:

S.N.	Participants by discipline/education/ speciality	No	Respondents (%)
01	Medical Sciences- MBBS/ MD/ MS	37	9 (15.8)
02	Health Laboratory (BMLT/MS/ PhD)	12	4 (7.01)
03	Ayurvedic/ Yoga psychology	4	1 (1.7)
04	Nursing	22	5 (8.8)
05	Pharmacy	3	1 (1.7)
06	Health Education	14	4 (7.01)
07	Public Health (BPH/ MPH/ Ph.D)	7	3 (5.3)
08	Paramedics (HA/ AHW/ CMA)	26	8 (14.03)
09	Microbiology (Bsc/ Msc/ PhD)	19	5 (8.8)
10.	Statistics/ Information management/ Computer	11	3 (5.3)
11.	Engineer/ Bio-Tech (Bsc/ Msc/ Ph.D.)	9	1 (1.7)
12.	Population studies	8	2 (3.5)
13.	Bsc/Msc (Zoology/ Botany/ Physics/ Chemistry)	23	4 (7.01)
14.	Public Administration	4	0 (0.0)
15.	BA,MA,BBS, Mcom (Art/Commerce/Economics)	31	6 (10.5)
16	Social Workers/ volunteers	9	1 (1.7)
	Total	240	57 (23.75)

Most participants were from medical professionals with the degrees like MBBS, MD, MS, in which 9 (15.8 %) respondents were involved. Other participants were from Art/ Commerce/ Economics where 31 participants in which 6 (10.5 %) were enrolled for this study. Other respondents belong to different fields are paramedics, microbiology, nursing, art, health education, health laboratory, statistics/ information management/ computer, science faculties, ayurvedic, population studies, public administration and social workers etc.

The table shows that the HSRM training package has comprehensive union of different subjects as major tool for integrated researches. The incorporation of various subjects follows the public health and epidemiological subject matters which denote the health system research methodology in a unified and vital components of researches. Biomedical research has little concern in promoting public health related researches and other researches beside bio-medical are one sided. Thus, the union of bio-medical and socio-cultural sciences in health researches bring a totality and holistic outcome from the researches. It is only the NHRC which has started to comprehensive attachments of different subjects in research training organized through workshops.

Profession on before and after training workshop:

Table 4.

S.N.	Description of affiliated organization	Number	Percent
1.	Same	34	59.6
2.	Different	22	38.6
3.	Unknown response	1	1.7
		57	

On the basis of professional wise it was found that the involvement of the participants before and after workshops in their profession, 59.6% were engaged in the same professions before and after participating the HSRM workshop. 38.6% participants changed their professions due to good quality acquired from researches and 1.7% showed no response. Thus, the training workshop provided the skill to get job in different institutions which need trained persons for their research component. This assures the good quality of HSRM workshops from NHRC.

Workshops participants by duration:**Table 5.**

S.N.	Workshop	Number Participants	of Number & percentage of respondents
1	June 14-20, 1998	19	3 (15.8 %)
2.	Aug 23-29, 1998	19	4 (21.05 %)
3.	Sept. 6-12, 1998	19	4 (21.05 %)
4.	Oct. 7-13, 1998	18	5 (27.8 %)
5.	Dec. 22-26, 1998	19	7 (36.84 %)
6.	Feb. 10-16, 1999	20	9 (45.00 %)
7.	Feb. 21-27, 1999	20	6 (30.00 %)
8.	June 21-27, 1999	26	5 (19.23 %)
9.	Aug. 1-7, 1999	19	6 (31.6 %)
10	Sept. 5-11, 1999	21	2 (9.52 %)
11	Sept. 26-Oct.2, 1999	20	3 (15.00 %)
12	Nov. 1-7, 1999	20	3 (15.00 %)
Total		240	57 (23.7)

Although there were 240 participants who joined the workshops only, 57 participants replied the questionnaires (Table 5). The highest respondents (45 %) were participants of workshops from February 10-16 and the lowest respondents were 9.52 % the participants of workshop of September, 1999.

Table 6. Source of information to attend HSR- workshop:

S.N.	Source	Number	Percentage
1.	Advertisement	22	38.6
2.	Letter from NHRC	15	26.15
3.	Office	12	21.05
4.	Office/ friends	5	8.8
5.	By requested	3	5.3
Total		57	

According to above table 6 on the sources of information for the attending workshops, the highest (38.6 %) knew from advertisement and 26.15% received letter from NHRC and lowest 5.3 % requested for participation due to their own interest. 8.8% knew with friends. All these provided an opportunity for the candidates to attend the workshop training of which the out come was rational e.g. they were trained on research methodology, could receive job opportunity in NGO/ INGO, empowered themselves to promote further research in scientific manner and become capable of writing proposal.

Decision made for sending to workshop:

Table 7.

S.N.	Via	Number	Percentage
1.	Self decisions	7	12.2
2.	Respondent's organization	12	21.0
3.	NHRC nominated	23	40.3
4.	Friend circle	7	12.2
5	Before higher study/ to join NGO/ INGO	8	14.0
	Total	57	100

Table 7 shows how the participants were sent to attend the workshops. 21 % was sent by their organization, 40.3 % was nominated by NHRC on the basis of request and applications and 14 % decided to join it for their higher study and before joining NGO/ INGO service. 12.2 % were sent by friends who previously obtained the training and feel the importance of the training workshops.

Hence, it was understood that the participants were not by force sent and it was the credit of NHRC which is successful in providing HSRM training workshops.

Table 8. Causes of participation in the workshop:

S.N.	Cause of participation	Number	Percentage
1.	Self decisions	21	36.8
2.	To be familiar	12	21.05
3.	NHRC nominated	18	31.6
4	Others-friend/ encouragement	6	10.5
	Total	57	

Above table shows the participants opinion on the HSRM training workshops. 36.8% participated the workshop to be trained on writing proposal and to acquire substantial knowledge. 21 % to be familiar with HSRM. where as 31.6 % feel the need of training and nominated by NHRC.

Table 9. Feeling about NHRC workshop before attending the workshop:

S.N.	Feeling	Number	Percent
1.	Not known	6	10.5
2.	Brief information	20	35.08
3	NHRC's Schedule	10	17.54
4.	High expectation activities	11	19.3
5.	NHRC provide research activities	2	3.5
6.	NHRC national level health research council of Government	3	5.26
7.	Curious and interest to learn new ideas	5	8.8
	Total	57	

Those who received the training workshop had different opinion before participation in HSRM workshop (Table 9). 10.5 % were unknown about NHRC workshops where as 35% knew it very briefly, 17.5% knew about the NHRC schedule and 8.8 % were curious to learn new things. 19.3 % had high expectation from workshop and 3.5 % expressed NHRC'S multiple activities, NHRC's status.

Table 10. Found the training workshops as:

S.N.	Found	Number	Percent
1.	Scientific training,	23	40.3
2.	Adequate knowledge on research	15	26.3
3.	Useful for job and relevent work	13	22.8
4.	Nothing	1	1.7
5.	Below expectation	3	5.3
6.	poor organization	2	3.5
Total		57	

Table 10 shows that most of the participants were satisfied with training workshops. They found more the procedure, curricula, and scientific sessions more knowledgeable and skill oriented which made them more capable. They found it the workshop as a scientific training (40.3%), adequate knowledge on research (26.3%), useful for job and relevant work (22.8%), below expectation and considered it a poor organization (5.3% and 3.5%) respectively.

Regarding the participants rational, it was found that most of the participants remembered their workshop objectives as strengthening the capabilities of researchers, institutions, developing quality research, make individual as free-independent researchers, identification of investigation/ research problems, capable to understand and conduct researches as time permits with proper utilization of budget, time, ethical considerations and human right, etc. Everybody who were participated regularly remembered the course contents given in the workshop-training. 55 persons feel the importance of resource persons.

Most important outcome from these workshops was the keen interest and enthusiasm of participants during the entire period of workshops. Some found methodology more interesting part, followed by focus group discussion (FGD), proposal preparations, research prioritization, group work procedure, multiple subjects utilization, academic resource persons and mechanism for research activities and research publications.

After completing the training workshop they feel independent, competent to do research, write proposal and report together with data analysis, as well as understand technical issues commonly encountered during conduction of health research. Some of the participants felt that they could conduct similar types of workshop in their respective institutions, which will ultimately contribute in strengthening service programme.

There view regarding advantages and disadvantages of the training workshops are as follows:

Advantages from training workshops:	Number of Respondents
1. Obtained knowledge on health system research	36
2. Gained substantial knowledge	23
3. Acquired research methodology in detail	31
4. Preparation of research proposal	41
5. Priority areas of HSR	16
6. Problem identification	33
7. Fact training	12
8. Planning for research	19
9. Identification of new research	24
10. Develop new skill	13
11. Article development	12
12. Awareness	18
13. help to develop country with special planning	30
14. Confidence	34
15. New experience	32
16. Status of health system	20
17. Know solution in research	32
18. Ability improved	40
19. Improved quality of health and life if the outcome put into practice	28
20. Easiness in research	43

21. Reduce unemployment	38
22. Knowledge about government's public health policy	21
23. Interaction with people and community	16
24. Familiar with research topic	12
25. Received innovative ideas and implement	20
26. Received detail information about NHRC	14
27. Easy to find out health problems	16
28. Received idea to implement the plan	12
29. Increase in attitude to ward research	8
30. Contribute their respective institutions strengthening service programme	34

DisAdvantages from training workshops:	Number of Respondents
1. Time of training workshop found very short	46
2. The training was found more epidemiological	52
3. Clinical based for non clinical person	23
4. Training management poor	34
5. Time loss	12
6. Expensive	14
7. If finding is not true implementation of plan fails	22
8. Not appropriate for all people	17
9. Should use some human volunteers	12
10. Wrong statistics	9
11. Difficult to access in remote areas by budget	14
12. Needs time	12
13. Needs ranking	17
14. Not utilized by concerned authorities	22
15. Lack of appropriate researcher	32
16. Frustration after the outcome is not being properly utilized	16

17. Due to lack of fund no research possible	13
18. Research only in paper not in field	19
19. time very short	47
20. Some topics are irrelevant and unknown	30
21. Teaching learning process seems fast	25
22. Approved research proposal but no fund provided	46
23. Unfamiliar persons cannot express their ideas	29
24. Hiding some facts and takes more time then allocated	38
25. Difficult to conduct project work due to weak administration	32
26. Lack of skill in qualitative and quantitative data, analysis presentation, critique and writing-up proposal/ paper	30

To rectify the above problems following recommendation

were expressed by respondents/ participants:	Number of respondents
1. Proposal must be appropriate and relevant.	43
2. Researcher or investigator must have adequate knowledge on proposed research topic.	32
3. Problem base priorities needs.	46
4. Facilities need to be provided	33
5. Fund need to be provided	42
6. Time extension needed	34
7. Appropriate time should be given	48
8. Advertisement should be continued on HSRM training	51
9. Suitable management is necessary	32
10. More time is necessary to learn computer programme	21
11. Provide some reading materials or methodology book before hand for training courses	34
12. Implement findings	17
13. More group discussion and practice on proposal development,	12

The following table show evaluation of training workshops feedback in terms of familiarity, effectiveness, practicability, post-workshop practice, research conducted after workshop, benefits, need of training and their personal opinion and suggestions.

S.No	Topics/contents of workshops	Familiarity		Effectiveness			Practicability	
		familiar	Totally New	Effective	Semi-effective	Not effective	Yes	No
1.	Welcome Participants	26	4	29	25	14	35	8
2.	Objectives	37	23	21	23	2	43	4
3.	Health issues-HMG policy	23	6	12	11	16	18	20
4.	Epidemiological brief	19	24	22	31	1	12	2
5.	ENHR concept	22	40	9	11	19	19	3
6.	Priorities in HSR	13	31	22	28	1	22	-
7.	Need of HSR in indigenous health system	19	23	41	16	17	20	5
8.	Field Epidemiology	12	45	17	43	3	21	1
9.	Bio-statistics in HSR	19	23	18	19	25	24	1
10.	Participatory Research	34	23	17	23	2	21	0
11.	Research methodology	32	34	33	32	16	28	1
12.	Proposal development	31	19	19	23	32	16	16
13.	Group work	21	21	41	18	20	11	5
14.	Topic selection	31	43	28	18	26	18	17
15.	Problem identification	23	32	34	24	22	16	18
16.	Justification of research	34	33	23	12	21	13	0
17.	Expectation of research output/questions	41	23	24	33	22	11	3
18.	Group presentation	33	14	13	18	1	12	5
19.	Interaction	22	12	23	16	0	12	6
20.	Briefing methods	14	5	8	7	1	13	1
21.	Assessing Information	43	1	20	12	13	12	8
22.	Social determinants of human health	34	18	29	17	5	19	9
23.	Ethical aspects and NHRC guidelines	32	22	18	11	10	21	17
24.	Sampling procedure and plans	29	21	19	21	8	17	11
25.	Techniques in field survey	41	26	26	12	13	21	6
26.	Data management	14	4	9	6	1	17	1
27.	Multi-disciplinary participation	43	4	34	12	21	25	7
28.	Test instruments and field requirement	29	17	4	17	12	11	6
29.	Final proposal development	40	22	15	12	10	19	10
30.	Logistic criteria	19	28	24	16	10	11	3
31.	Review criteria	31	16	17	19	0	18	3
32.	Submission procedures of proposal	24	19	16	15	13	14	10
33.	Assessing information of Health in Nepal	21	23	10	15	10	19	16
34.	Process of vilification	21	15	12	16	21	18	19
35.	NHRC's priorities area for HSR	41	32	24	12	30	16	18
36.	The role of Ayurvedic in Health	28	12	16	12	2	19	4
37.	Preparation of proposal writing, report analysis and report writing	21	15	18	12	27	29	0
38.	Budgeting for research	27	17	20	12	1	12	3
39.	Time schedule of research	24	19	22	8	3	11	0
40.	Dissemination process	27	12	19	20	1	21	0
41.	Research policy action loop	23	19	30	10	2	17	0
42.	Over all view	21	12	21	12	19	28	0

According to the above responses, it was found that most of the participants did not reply all points. Many of them replied multiple answer and responses. Though we have not perform statistical analysis, but it seems that the training workshops output is very effective and useful. Hence, continuation of training workshop is recommended. There should develop a networking system in this field.

Utilization of the skill and knowledge after completion of training workshops:

S.N.	Topics	Post Workshop Practice				Benefits			Need of Training	
		Always	Some-times	Not yet	Conducted Researches How many?	raised know-ledge	made easy in practice	change research habit	More	No
1.	Welcome participants	16	18	20	19	23	18	12	31	2
2.	Objectives	18	14	13	11	21	13	-	42	3
3.	Health issues-IMG policy	32	12	19	12	21	43	-	41	2
4.	Epidemiological brief	31	5	9	-	12	9	-	15	6
5.	ENIIR concept	23	12	17	-	18	12	-	11	9
6.	Priorities in HSR	21	13	20	-	15	21	-	17	-
7.	Need of HSR in indigenous health system	44	2	7	-	10	20	-	19	-
8.	Field epidemiology	31	12	9	-	12	13	-	21	-
9.	Bio-statistics in HSR	12	10	21	-	12	2	-	41	-
10.	Participatory research	13	40	8	11	12	-	7	12	-
11.	Research methodology	20	9	5	13	6	2	5	19	2
12.	Proposal development	16	12	18	-	21	10	18	9	2
13.	Group work	17	10	9	2	6	7	5	13	4
14.	Topic selection	8	10	16	-	8	8	-	8	4
15.	Problem identification	12	6	8	-	10	4	-	12	5
16.	Justification of research	15	6	12	-	12	4	3	14	3
17.	Expectation of research output/questions	33	10	5	-	15	4	-	8	2
18.	Group presentation	22	6	11	-	13	3	-	13	4
19.	Interaction	13	3	6	-	4	6	-	6	2
20.	Briefing methods	12	7	12	6	11	17	-	7	6
21.	Assessing information	13	2	13	1	16	10	-	12	16
22.	Social determinants of human health	23	12	9	1	12	22	-	13	2
23.	Ethical aspects and NHRC guidelines	14	10	12	-	15	3	-	16	5
24.	Sampling procedures and plans	21	6	8	-	9	10	-	15	6
25.	Techniques in field survey	11	8	9	3	16	8	8	9	10
26.	Data management	18	10	13	1	11	6	12	17	3
27.	Multi-disciplinary participation	12	18	9	-	11	14	14	11	-
28.	Test instruments and field requirement	21	15	17	1	11	14	11	16	2
29.	Final proposal development	22	6	14	3	9	14	-	9	11
30.	Logistic criteria	23	11	12	5	14	11	9	12	12
31.	Review criteria	12	6	13	-	8	10	2	15	6
32.	Submission procedures of proposal	21	12	7	-	18	31	26	22	1
33.	Assessing information of Health in Nepal	33	12	5	-	12	22	30	6	2
34.	Process of validation	25	12	5	-	19	15	-	13	1
35.	NHRC's priorities area for HSR	18	13	12	1	15	2	3	8	1
36.	The role of Ayurveda in Health	5	8	2	-	8	4	-	9	7
37.	Preparation of proposal writing, report analysis and report writing	13	11	9	6	4	6	5	15	4
38.	Budgeting for research	13	16	10	-	8	6	4	9	5
39.	Time schedule of research	6	12	5	-	6	11	6	13	3
40.	Dissemination process	12	5	15	-	8	-	3	9	10
41.	Research policy action loop	9	13	7	-	9	5	3	8	3

For utilization of the skill after HSR training workshops: The above table presented the attributes of NHRC's Health System Research Methodology output. Majority have been practicing whatever they learned in training workshops. Many of them are doing research independently, they get benefits from research and feel they obtained some knowledge on doing research, and formulation of a new project. Most of these participants hope for further training workshops from NHRC.

The response from Resource persons was found positive and they feel (each discipline) should be added with workshop contents additions. Not all resource persons returned the questionnaire, about 50% returned it with their response.

Conclusion:

On the basis of above description and analysis it was found that the training workshop was highly effective and most of the participants have gained abundant knowledge on research methodology. They have acquired experience and skill in research developing research proposals. The outcome of intelligent research work helps policy makers, government officials and autonomous institution holders to make planning, strengthen organizations, recruit trained staff, direct the policies, co-ordinate different organization, report and make scientific and appropriate budget for proper developmental activities.

Nepal Health Research Council is one of the autonomous institutions established for the promotion of health researches from different directions. It has a responsibility to organize the training workshops on Health System Research Methodology for various persons who are willing to develop their skills on research and be involved different research field. It also has the strong component of Essential National Health Research (ENHR) to promote national health research systems. Together with the support of various organizations, NHRC should review to what extent the research results of various research projects has been reapplied to improve the health care delivery system of Nepal. The training workshops of NHRC has set positive impact, raised curiosity and interests of different scholars to participate in training workshops. It requires more training workshop for

national development. It is hoped that NHRC would stand as a strong body for research programme in future by taking various inputs from the WIIO/SEARO and from the participants.

Problems faced by the participants:

According to the general study, it was found that the participants who had proper knowledge to carry on research and develop public health, could not carry on the research. This is due to lack of proper financial aid and unavailability of facilities and resources essential to carry on research and training.

Hence, beside training the participants NHRC should also guide them as how to secure funds from various agencies and donor organizations.

It was also found that, some of the researchers were utilizing their knowledge to carry on research and training to improve the general public health level, however, these research and training are not being profitably utilized by the government.

Hence, the government should acknowledge the importance of these research and training and should, in best way utilize and implement the research findings.

Besides only if NHRC joins hand with the government to promote co-ordinate and disseminate research findings at all level, can the research and training be implemented in best way so as to gain their aimed target.

Recommendations:

1. NHRC should compile a list of competent health researchers.
2. NHRC should arrange a separate fund for under-Graduate, Post-graduate level research training workshop programme.
3. NHRC should organise refresher training workshops for those who had participated previously and give opportunity for them to analyzed this training workshops.
4. NHRC should develop a mechanism for promotion, co-ordination and dissemination of research findings at all levels.
5. NHRC should have a separate division for research training and NHRC should conduct HSR training workshops at all levels (central, regional, and district).

6. Regional basis for training workshops should be organized to minimize the participants expenditure in Kathmandu and to give equal opportunity to all interested people regarding Health System Research Methodology training workshop.
7. NIIRC should develop networking system and a separate section of counseling which is useful for researchers on the research proposal submitted to NHRC.
8. Close collaboration between NHRC, MOH and Academic institution in laying down national research proposal regarding priority issues.
9. NIIRC should develop an easy access system to retrieve research based information.
10. Government must give top most priority to research activities through pragmatic monitoring and evaluation.
11. Develop a multidisciplinary research oriented, research based, research promotional library.
12. NIIRC should offer proposals and supervise researches providing financial and technical support making separate research within NHRC and seeking funds from different donors.
13. NHRC should give professional credit/ reward/ incentives to researchers for their good research activities and make professionals aware of the research.
14. NHRC should conduct international level workshop in research methodology frequently.
15. Government should have clear policy on utilization of research findings and a separate policy for research.
16. Scientific publications should be regular and there must be quality control mechanism for research activities and research publications.

Appendices:**Appendix- 1. Questionnaire for Participants:**

Date:.....

Name:..... Age..... Sex.....

Current status:..... Specialized in.....

Place of work with full address:..... Level of education:.....

.....
Before training your affiliated organization:.....

After training your affiliated organization:.....

1. Please answer the following questions: which workshop did you participate ? (Tick in the bracket)

- | | | | |
|------|----------------------|---------|-----|
| I | June 14-20, 1998- | 7 days | () |
| II | Aug 23-29, 1998- | 7 days | () |
| III | Sept 6-12, 1998- | 7 days | () |
| IV | Oct. 7-13, 1998 - | 7 days | () |
| V | Dec. 20-26, 1998- | 7 days | () |
| VI | Feb. 10-16, 1999- | 7 days | () |
| VII | Feb. 21-27, 1999- | 7 days | () |
| VIII | June 21-July 2, 1999 | 12 days | () |
| IX | Aug. 1-7, 1999 | 7 days | () |
| X | Sept 5-11, 1999 | 7 days | () |
| XI | Sept 26-Oct 2, 1999 | 7 days | () |
| X | Nov. 1-7, 1999 | 7 days | () |

2. Who informed you about the workshop that you attended ?

2.1. Advertisement () 2.2. Letter from NHRC () 2.3. Office () 2.4. if other- please specify.....

3. Who decided to you to send to participate in the workshop ?

3.1. Your organization () 3.2. Yourself () 3.3. NHRC nominate () 3.4. Others specify.....

4. Why you decided to participate the workshop ?

5.1. To be familiar () 5.2. To obtain research knowledge () 5.3. I was sent by force from my office () 5.4. NHRC nominate () 5.5. If other, specify.....

6. What was your feeling about NHRC workshop before your attending the workshop ?

6.1. Unknown () 6.2. will be gained much knowledge on research methodology (), 6.3. NHRC's schedule () 6.4. only briefings () 6.5. if othe specify.....

7. What did you find in the workshop ?

7.1. Scientific training () 7.2. Comprehensives () 7.3. nothing () 7.4. if any specify.....

8. Do you remember the objectives of your workshop: Yes (), No ()

9. Could you note the contents of the workshop: Yes (), No ()

10. Were there any resource person ? Yes (), No ()

if yes how many.....

11. Of them which topic (s) got you more effective.....

12. What did you feel after completing workshop/s ?

12.1. Capable () 12.2. casiness in research 12.3. more attention () 12.4. Useless ()

12.5. If any, specify:.....

13. Do you feel compctent to do research independently ?

Yes () No () if yes, mention at least three points.

14. How do you evaluate on the advantages and disadvantages from the HSR training workshop?

S.N. Advantages Disadvantages Comments/ Ways of remedies

Appendix: 2.

Questionnaire for Resource Persons:

Date:

Name:..... Age..... Sex.....
 Education..... Speciality in.....
 Working place: Add:.....

Please answer the following question in clear view objectively:

1. Which workshop did you participate as a resource person? Please tick in the box:

1. Please answer the following questions: which workshop did you participate? (Tick in the bracket)

I	June 14-20, 1998-	7 days	()
II	Aug 23-29, 1998-	7 days	()
III	Sept 6-12, 1998-	7 days	()
IV	Oct. 7-13, 1998 -	7 days	()
V	Dec. 20-26, 1998-	7 days	()
VI	Feb. 10-16, 1999-	7 days	()
VII	Feb. 21-27, 1999-	7 days	()
VIII	June 21-July 2, 1999	12 days	()
IX	Aug. 1-7, 1999	7 days	()
X	Sept 5-11, 1999	7 days	()
XI	Sept 26-Oct 2, 1999	7 days	()
XII	Nov. 1-7, 1999	7 days	()

2. Who invited you to the workshop that you attended?

a. NHRC () b. Owns office authority () c. If other, specify.....

3. Who decided to send you to the workshop?

a. Chief of your office () b. Yourself () c. other specify.....

4. Why did you decide to be the resource person in the workshop/s?

a. experience () b. willing () c. request from NHRC () d. if other specify.....

5. What was your feeling about NHRC workshop before your attending the workshop/s?

a. Unknown () b. familiar () c. Pre-mature () d. mature () e. if other specify.....

6. What did you find in the workshop/s?.....

7. Do you remember the objectives of your topic for workshop/s?.....

8. What topic did you lecture?.....

9. What method did you use and why?.....

10. Did you present the paper only or facilitated during the group work?.....

11. Did you perceive the participants satisfactions? If yes, what did you find:.....

12. Were there other Resource persons? Yes () No ()

if yes how many?..... of them which topic got you more effective in the workshop?

13. What did you feel after finishing workshop/s? a. success () b. learned from participants ()

c. scientific () d. useful () e. if other specify.....

14. What do you feel about the advantages and disadvantages of HSR Methodology workshop?

S.No.	Advantages	Disadvantages	Ways of Remedies
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15. If you want to suggest more than the above, you are free to fill in the following lines.

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