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CAPACITY BUILDING IN HIV/AIDS THROUGH WEB-BASED TRAINING – CASE STUDIES IN CENTRAL ASIA

Innovative internet based e-learning platforms can be a powerful instrument for learning, dialogue and capacity building in order to facilitate and strengthen multisectoral HIV/AIDS responses.

Distant learning has among others the following **advantages**. It is close to the workplace context, available at the convenience of the user, based on a broad spectrum of media and pedagogic resources, facilitates group work and exchange with experts, is research oriented and allows for intensified networking between participants from public institutions and civil society organizations.

GIZ and its cooperation partners, the Kyrgyz State Medical Institute for Retraining and Continuous Education (KSMIRCE) have gained important experience through their work in this field.

In 2007 GIZ (former InWent) in cooperation with KSMIRCE launched the e-learning program “HIV/AIDS prevention in Central Asia”.

The first online course was designed for non-medical professionals from ministries, governmental institutions, non-governmental organizations and private companies, and one of the main aims of this course was to develop and strengthen the cross-sectoral approach in HIV/AIDS prevention.

Following the successful implementation of the first course for non-medical experts an e-learning course for medical professionals started in February 2008. In second half of 2008 a regional course for medical specialists from Kyrgyzstan, Kazakhstan and Tajikistan was successfully carried out by a regionally mixed team of tutors.

By now 10 online courses, 20 face-to-face workshops were carried out and **247** professionals were certified in completing on-line course on HIV/AIDS.

	On-line course	Face-to-face workshop	Beneficiaries
Non-medical	4	8	86
Medical (regional courses)	6	12	161
Total	10	20	247

Concept and content of the course

The e-Learning courses in Central Asia have been conceived as hybrid learning arrangements that are generally called “blended learning”. Blended learning refers to the combining of net-based learning and more traditional learning methods delivered as face-to-face tuition.

The course presented basic information on HIV in five modules. The basic lectures were about national and global epidemiology, basic medical facts, clinical management including special groups like injecting drug users and global response and best practices. Issues related to the vulnerability and HIV prevention among youth also were considered in the course.

In addition to the theoretical introduction to the subject, participants are encouraged to relate their knowledge to their own context of work, to share their experiences and to present local challenges to other participants. The course tutors assisted them to find solutions to the problem they have been facing in their working environment.

The educational tools, which promote interactive learning and communication are: forum, chat, interactive quizzes, electronic library and links to other Internet resources.

Learning environment

In Central Asia **Moodle**, a free licence open source software, has been used for course development and operations. This browser based platform provides easy to use HTML editing tools, course

administration and communication tools like electronic bulletin boards, file sharing systems, database systems or chat communication. It enables users to train and upgrade online, share information and experience, and work on joint projects.

The multifunctional e-learning platform allows users make different choices in it's using according to their abilities, preferences and the group dynamics.

Our approach to web design takes account of **limited Internet bandwidth** and possible substantial charges for Internet use. So to keep the data volume as low as possible, we dispense with the inclusion of media elements like sound, video and flash animations in web-based training (WBT). To enable the participants to work offline as often as possible, they are given the option of downloading the course material. The online course is also made available in a CD-ROM version for computer based training (CBT), so that study can proceed on computers without Internet connection.

Strengths of the course or the factors of success

- **Relevance** (rapid growing of HIV epidemic in CA region and development of the Internet in Central Asia Counties)

While in the most regions of the world the growth speed of the HIV epidemic could be reversed, Central Asia continued in recent years to have a fast growing HIV epidemic with still rising numbers of annual reported HIV diagnosis. Absolute numbers as well as prevalence of HIV infection remain relatively low.

The internet in Central Asia develops with a fast pace. The number of internet users in Central Asia Countries has been increasing in a few past years and the growth rates much higher than the world average. Most of the Internet users in the region are young people.

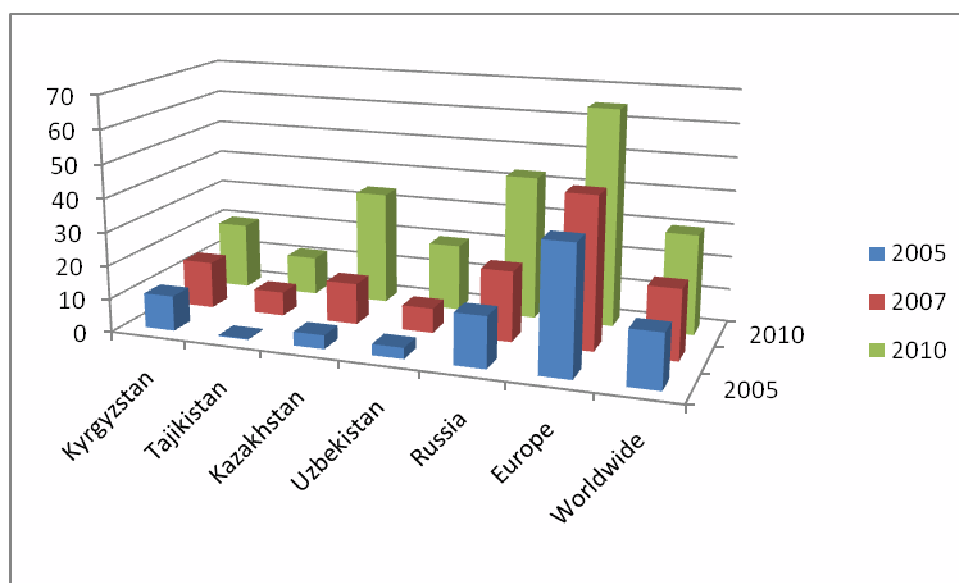


Table 2: Internet Users per 100 inhabitants (Source Data)

Country	Users per 100 inhab.		
	2005	2007	2010
Kyrgyzstan	10.45	14.11	20.00
Tajikistan	0.3	7.19	11.55
Kazakhstan	4.11	12.32	34.00
Uzbekistan	3.31	7.4	20.00
Russia	15.22	21.05	43.00
Europe	38.04	45.28	65.00
World Wide	16.17	20.96	30.00

Source: International Telecommunication Union
<http://www.itu.int/ITU-D/icteye/Indicators/Indicators.aspx#>

- **Quality assurance and official accreditation**

The content of the course was developed by national and international health consultants working for the cooperating partner organisations, in particular with the Medical Mission Institute Wuerzburg, Germany. The concept was tested in different other pilot course since 2000 before adapting to the Central Asian setting. The courses are evaluated internally and are continuously improved and adapted to the rapidly changing conditions of the HIV/AIDS epidemic in Central Asia by an international team of experts.

The curriculum of Central Asia Online Course on HIV/AIDS was developed and it was approved by the Ministry of Health of the Kyrgyz Republic.

Participants who completed the program successfully receive a certificate jointly issued by the KSMIRCE and GIZ. The certificate not only confirms the prosperous completing of the course, but also credits academic hours, that are necessary for medical specialists for getting next level of professional category.

- **Partnership**

The success of the program at the regional level can be explained by the fruitful partnership between institutes for Postgraduate Education from Kyrgyzstan, Kazakhstan and Tajikistan, GIZ and United Nation Development Program in the Kyrgyz Republic.

The MoU in field of e-learning implementation between institutes for postgraduate education from Kyrgyzstan, Kazakhstan and Tajikistan was signed in 2008.

- **Political support** in institutions and Ministries of Health of Kyrgyzstan, Tajikistan and Kazakhstan

- Distance Learning Department was established at the KSMIRCE in September 2009;
- Round table 'E-learning for health care specialists in the Kyrgyz Republic' was held in November 2009.

Participants of the Round Table (key persons from MoH and leaders of educational institutions from three CA countries) stated that e-learning approach can be successfully applied as a method of education in the health sector and can be a real alternative to classical forms (face to face training) of continuous education.

- **The course lives up the participants expectations**

The course got an evaluation by course participants ranging between 'very good' and 'excellent'. Participants stated that the program had a direct impact on their knowledge, work practices as well as on their attitudes toward to People Living with HIV (PLWH). The participation of PLWH in forums and chats discussions helped participants to eliminate stigma and discrimination. Participants could discuss issues related to the sexual and reproductive health and right more open than it could be possible during face to face seminars because in our society there is a still taboo. Participants also gave positive feedback on methodology used. No one participant said he would not recommend the course to others.

After the final face to face seminar participants expressed the wish to prolong the interaction in the framework of an alumni network.

Alumni component

Within the Alumni programme stakeholders of the program promote a continuous learning process and enable the further exchange among participants and partner organisations on specific topics. In this way the transfer of the acquired competences into the respective working environments is accompanied.

Challenges

- This is a rather low rate considering that some participants, mainly from the rural areas, faced problems with internet connection during the course.
- Lack of support though funding and allocation of resources. There is certainly no lack of moral political support in the institutions and Ministries of Health. But there is a lack of support through funding and allocation of resources. Now the Distance Learning Department at the KSMIRCE does not have its own server hardware. Currently UNDP contributes hardware and its IT specialist's support.
- Course for medical professionals does not have official accreditation in Kazakhstan and Tajikistan.

The perspectives of the e-learning programs in Central Asia

- On-line course for non-medical specialists in Kyrgyzstan and Tajikistan and Central Asian Regional Course for medical professionals (GIZ);
- Development and implementation on-line module 'Sexual and Reproductive Health and Rights' for medical and non-medical alumnus (GIZ);
- Development and implementation on-line module on Narcology and Harm Reduction for primary health care providers and social workers (HCI)
- The Netherland School of Public&Occupational Health is currently looking for possibilities to create e-learning facilities for reproductive health providers in the CA region and KSMIRCE is considered as a potential partner in the region;
- Human resource development in e-learning programs at KSMI;
- Development and implementation of e-Learning courses for primary health care providers;
- Ministry of Health of the Kyrgyz Republic funds the Distance Learning Department at the KSMI and further sustainable development of the e-learning for continuous medical education within the Health Reforming Program "Den-Sooluk" (Health) for 2012-2016.

Conclusion

E-learning methods can be successfully used to train different target groups on different actual topics particularly for youth educating on Sexual and Reproductive Health and Rights.

E-Learning courses base on needs assessment of the target groups so knowledge and skills gained will be immediately applied by learners to their work and life context. Instead of random massive information flow in SRHR field, offered by internet, participants gain systematized knowledge and support from skilled and experienced specialist, facilitating the course. According to the course concept participants contribute their own knowledge and experience (so the "peer to peer" principle is used). Most of the participants of e-learning courses have noted, that participants during on - line sessions had some communication embarrassment, which is very important for discussion of sensitive questions, related to SRHR, which are still taboo in our society.

In Central Asia, particularly in Kyrgyzstan, there are all backgrounds for successful implementation of distant approaches for educating youth on SRHR issues:

- In Kyrgyzstan young people are the most vulnerable in terms of access to SRH services and formal education so SRHR is actual issue.
- It is a time when a critical mass of internet users has developed in the region.
- There is a high political interest and support in introducing learning innovations.

The KSMIRCE the only institute in Kyrgyzstan which provides continuous education in health sector takes a leading position in introducing e-learning methods in education because it's organizational capacity in this field. KSMIE can provide technical/consultative support for local organizations in implementation of e – learning approaches.

It is necessary to take into account next challenges while implementing e-learning courses on SRHR:

- limited Internet excess in rural areas
- Lack of trained specialists on course development and tutoring.
- Although there is a political support some officials from Ministry of Education can be resistant to innovation in education

For successful implementation of distant approaches for youth education on SRHR coordinated work of ministries is necessary: Ministry of Health, Ministry of Educational and Ministry of Youth Affairs regarding standardizing curriculum and content of the courses on SRHR and accreditation of courses.

During implementation of e-learning approaches it is necessary to pay more attention to cover youth from rural areas, as youth in remote areas are in less beneficial position on the access to informational technologies and access to information on SRHR comparing to counterparts in major cities. For instance, 65% of population lives in rural areas.

Therefore, it is necessary that on the rayon centers level (it's an administrative unit) should be created informational – recourse centers, equipped with computers and Internet access. These centers could be created under rayon educational centers or under local autonomous centers. These centers can help to equalize computer skills and chances of rural youth to participate in distant learning projects.