

REPORT ON NATIONAL TRAINING ON SCIENTIFIC WRITING IN HIV/AIDS

Date : 25-27, May 2019
Venue : Wadduwa, Sri Lanka

Organized by
National STD/AIDS Control Programme (NSACP), Sri Lanka
&
The Voluntary Health Services (VHS), India
Supported by Centers for Disease Control and Prevention (CDC/DGHT-India)
(VHS-CDC Project)



MINISTRY OF
HEALTH
SRI LANKA



NATIONAL
STD/AIDS
CONTROL
PROGRAMME



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ACRONYMS

ACASI	Audio Computer Assisted Self Interview
AIDS	Acquired Immunodeficiency Syndrome
ANC	Ante-Natal Care
AR	Attributable Risk
ART	Anti-Retroviral Treatment
CAPI	Computer Assisted Personal Interviewing
CDC	Centers for Disease Control and Prevention
CSS	Cross-Sectional Study
CSS	Case-Control Study
C&S	Care & Support
DD	Data Dictionary
DGHT	Division of Global HIV & TB
DQA	Data Quality Assurance
EPI Unit	Epidemiology Unit
FcFT	Facilitator cum Feedback Team
FGD	Focus Group Discussion
FSW	Female Sex Worker
GIS	Geographical Information Systems
HIV	Human Immunodeficiency Virus
HSS	HIV Sentinel Surveillance
IBBS	Integrated Biological and Behavioral Surveillance
IDI	In-Depth Interviews
IEC	Information Education Communication
KAP	Knowledge Attitude and Practice
Litt.	Literature
M&E	Monitoring and Evaluation
NTSW	National Training on Scientific Writing in HIV/AIDS
NSACP	National STD/AIDS Control Programme
OR	Operational Research / Odds Ratio
PAR	Population Attributable Risk
PEPFAR	President's Emergency Plan for AIDS Relief
PHI	Public Health Inspector
PHLT	Public Health Laboratory Technician
PHNS	Public Health Nursing Sister
PLHIV	People Living with Human Immunodeficiency Virus
PM	Project Management
PMTCT	Prevention of Mother To Child Transmission
PPT	Power-Point Presentation
PrEP	Pre-Exposure Prophylaxis
PRT	Peer Review Team
RCT	Randomized Controlled Trial
REC	Research Ethics Committees
RR	Risk Ratio / Relative Risk
STD STI	Sexually Transmitted Diseases / Sexually Transmitted Infections
SIMU	Strategic Information Management Unit
TA	Technical Assistance
TB	Tuberculosis
TNA	Training Needs Assessment
VHS	Voluntary Health Services

FOREWORD

I am happy to write a foreword to this training report on the National Training on Scientific Writing in HIV/AIDS organized by National STD/AIDS Control Programme (NSACP), Sri Lanka and The Voluntary Health Services (VHS), India - Supported by Centers for Disease Control and Prevention (CDC/DGHT-India) - (VHS-CDC Project) from 25th to 27th May 2019 in Wadduwa, Sri Lanka. The training was conducted with the objective of enhancing the capacity of the NSACP SI teams in principles of scientific writing & development of journal articles based on HIV/AIDS programmatic data and learnings.

Training and capacity building are key elements of the VHS-CDC Project on providing Technical Assistance to NSACP on Strategic Information with the support of CDC/DGHT-India. This is one of the series of training activities planned and conducted according to the findings of a formal assessment of training and capacity building. This training on Scientific Writing was conducted for SI team through participatory methodologies, contributed for enhancing knowledge and skills and supported with hands-on training. This training further enhanced required comprehensive knowledge and skills on Scientific Writing and contributed for development of 11 abstracts. This training will be of very much useful for developing more such abstracts by using this trained team and network for strengthening Scientific Writing for effective dissemination at national and international levels. This training report contains the training objectives, training needs, profile of participants, process adopted including proceedings, steps involved in Scientific Writing, guidelines & suggestions for every stage of Scientific Writing, key outcomes, feedback, recommendations & follow-up plans and other relevant details.

On behalf of NSACP, I wish to express my sincere thanks to Dr Joseph D Williams, Director Projects-VHS for his immense support in ensuring partnerships and continue to support in providing TA. We also appreciate the strategic support being extended by Dr T Ilanchezhian, Senior Technical Advisor, VHS-CDC Project for coordinating with NSACP and SIMU in providing technical



Dr Rasanjalee Hettiarachchi,
Director,
National STD/AIDS Control
Programme (NSACP),
Sri Lanka.

assistance on strategic information and managing and coordinating this training program.

Thanks to VHS-CDC Project team, resource persons / trainers for the support extended in successful conduct of this training.

My gratitude should go to Dr. Timothy Holtz, Country Director, CDC/DGHT-India for his strategic leadership and guidance in providing Technical Assistance to NSACP, Ministry of Health, Nutrition & Indigenous Medicine, Govt. of Sri Lanka and CDC team for their support and guidance in these technical assistance initiatives.

Appreciate Dr. Ariyaratne Manathunge, Consultant-Venereologist and Coordinator-SIMU, NSACP for his strategic leadership in coordinating the technical cooperation initiatives on TA to NSACP on SI with VHS-CDC Project, CDC team and contributions on meaningful, successful conduct of national capacity building program on Scientific Writing.

Dr Rasanjalee Hettiarachchi,
Director,
National STD/AIDS Control Programme (NSACP),
Sri Lanka.

Acknowledgement

The Voluntary Health Services (VHS-CDC Project) with the support of Centers for Disease Control and Prevention (CDC/DGHT-India) and in partnership with National STD/AIDS Control Programme (NSACP), Ministry of Health, Nutrition & Indigenous Medicine, Govt. of Sri Lanka is providing TA to NSACP on Strategic Information through a technical partnership initiative on:

- Enhance SIM Unit capacity to utilize electronic and manual program data for decision making;
- Improve capacity of SIM Unit to carryout management, analysis, documentation and dissemination of summary program data reports;
- Improve capacity of SIM Unit to conduct and disseminate results of operational research;
- Consultation with stakeholders on monitoring and documentation of accomplishments & sustainability plans.

As part of this technical cooperation initiatives, VHS-CDC Project is providing capacity building initiatives, system strengthening, documentation and dissemination. In accordance with the capacity building initiatives, the project is organizing a series of training programs. VHS-CDC Project with the support of CDC/DGHT-India and in partnership with NSACP has organized a *'National Training on Scientific Writing in HIV/AIDS'*.

To support this training, the project has developed a resource kit, agenda, customized and developed resource materials, identified and engaged international professional trainers along with VHS-CDC Project team and conducted the training program by adopting participatory approaches supported with hands-on training which lead to development of 11 abstracts. This training was conducted with the great participation and contribution from SIMU-NSACP.

VHS-CDC Project has documented the training program and brought out this training report titled *'Training Report on National Training on Scientific Writing in HIV/AIDS'*. This training report contains a brief on the key stakeholders and organizers involved in conducting this training program, CDC



Dr Joseph D Williams,
Director Projects,
The Voluntary Health
Services (VHS),
Chennai/INDIA

support on Technical Assistance to NSACP on Strategic Information; an overview of training on Scientific Writing; (objectives & methodologies of training; details & profile on participants, facilitators and coordination team; Pre & Post-Training Assessment analysis & Post-Evaluation analysis; feedback of participants; and recommendations), day wise proceedings; Scientific Writing Abstracts; outcome of the training; and follow-up plans. This training report comprehensively captured the overall plan, process and outcomes of the training program.

We thank Dr Rasanjalee Hettiarachchi, Director, NSACP for her leadership and supportive guidance in this technical cooperation initiatives and in conducting this training program.

We wish to acknowledge & thank Dr Ariyaratne Manathunge, Consultant - Venereologist and Coordinator-SIMU, NSACP for his continuous support, strategic guidance and cooperation being extended in execution of this technical cooperation initiatives. Appreciate and thank his support in systematic planning and coordinating this training program, serving as a facilitator and contributing for the successful conduct of the training program. Acknowledge the support extended by SIMU team, senior consultants in NSACP, SI team in peripheral STD clinics and key stakeholders.

We sincerely thank and acknowledge the technical guidance and support being extended by Dr Timothy Holtz, Director, Mr Lokesh Upadhyaya, Associate Director for Management and Operations, CDC/DGHT-India and CDC team. Wish to thank Ms Srilatha Sivalenka, Public Health Specialist, CDC/DGHT-India for her support and contribution in this technical cooperation initiatives.

We would like to thank Dr T Ilanchezhian, Senior Technical Advisor and Dr Yujwal Raj, Technical Advisor (SI), VHS-CDC Project for their systematic support and inputs in developing the PPTs, tools, resource book and contribution for conducting and facilitating this training program. We wish to acknowledge Dr Niranjana Saggurti, consultant of VHS-CDC Project for his contribution and support extended in facilitating the training sessions.

We thank Mr Suneel Kumar Chevvu, M&E Officer, VHS-CDC Project for his support in this training.

We thank Ms T Sudha, Senior Programme Associate, VHS-CDC Project for her support extended in preparations for conducting the training & communication, consolidation of the report and designing of this training report.

We thank Mr B Kamalakar, Finance Controller, VHS-CDC Project, Mr S Sathyaraju, Associate Manager Finance, VHS-CDC Project and admin team for their support in logistics coordination, finance management and other arrangements. Overall, this training program was successfully, meaningfully and effectively conducted.

We greatly appreciate the fullest cooperation extended by NSACP and SIMU team in this technical cooperation initiatives & conducting this training program.

Dr Joseph D Williams,
Director Projects,
The Voluntary Health Services (VHS),
Chennai/INDIA

EXECUTIVE SUMMARY

UNDER THE VHS-CDC PROJECT PROVIDING TECHNICAL SUPPORT TO NSACP ON STRENGTHENING STRATEGIC INFORMATION FOR THE HIV/AIDS PROGRAM IN SRI LANKA, A SERIES OF CAPACITY BUILDING WORKSHOPS ON CRITICAL SI AREAS ARE BEING CONDUCTED FOR THE SIM UNIT STAFF, EPIDEMIOLOGISTS, DATA MANAGERS, VENEREOLOGISTS AND MEDICAL OFFICERS AT VARIOUS STD/HIV CLINICS ACROSS THE COUNTRY.

THE SECOND TRAINING UNDER THIS SERIES TITLED 'NATIONAL TRAINING ON SCIENTIFIC WRITING IN HIV/AIDS' WAS CONDUCTED AT HOTEL BLUE WATER, WADDUWA, SRI LANKA FROM 25-27, MAY 2019. THE TRAINING WAS INAUGURATED BY DR RASANJALEE HETTIARACHCHI, DIRECTOR, NSACP, DR ARIYARATNE, COORDINATOR, SIMU, NSACP AND MR B KAMALAKAR, FINANCE CONTROLLER, VHS-CDC PROJECT. DR JOSEPH D WILLIAMS, DIRECTOR PROJECTS HAS PROVIDED OVERALL STRATEGIC GUIDANCE AND MENTORING SUPPORT FOR PLANNING AND CONDUCTING OF THIS TRAINING PROGRAM. DR NIRANJAN SAGGURTI, CONSULTANT, VHS-CDC PROJECT & DR YUJWAL RAJ, TECHNICAL ADVISOR, VHS-CDC PROJECT CONDUCTED THE TRAINING AS THE FACILITATORS. DR T ILANCHEZHIAN, SENIOR TECHNICAL ADVISOR, VHS-CDC PROJECT PROVIDED THE OVERALL GUIDANCE AND COORDINATION SUPPORT IN CONDUCTING THE TRAINING. MR S SATHYARAJU, VHS-CDC PROJECT AND VHS-CDC TEAM PROVIDED THE ADMINISTRATIVE AND LOGISTIC SUPPORT FOR THE WORKSHOP.

THE TRAINING WAS CONDUCTED WITH THE OBJECTIVE OF ENHANCING THE CAPACITY OF THE NSACP SI TEAMS IN PRINCIPLES OF SCIENTIFIC WRITING & DEVELOPMENT OF JOURNAL ARTICLES BASED ON HIV/AIDS PROGRAMMATIC DATA AND LEARNINGS. THE KEY OUTCOMES ACHIEVED AT THE END OF THE WORKSHOP INCLUDE:

1. BUILT THE KNOWLEDGE & SKILLS OF NSACP PROGRAM MANAGERS IN THE FORMULATION OF AN ARGUMENT, CONCEPTUALIZATION OF A PROBLEM, RESEARCH DESIGN, METHODOLOGY, RESULTS AND THEIR INTERPRETATION.

2. MADE PARTICIPANTS UNDERSTAND THE PURPOSE AND CONTENT OF EACH ELEMENT OF A JOURNAL ARTICLE.
3. HELPED THE PARTICIPANTS NAVIGATE THROUGH THE PROCESS OF WRITING AN ARTICLE LEADING TO PUBLICATION IN NATIONAL AND INTERNATIONAL JOURNALS.
4. DEVELOPED DRAFT JOURNAL ARTICLES OF ACCEPTABLE STANDARDS ON THE IDENTIFIED TOPICS OF PROGRAMMATIC RELEVANCE.
5. EVOLVED PLAN FOR FOLLOW UP AND DEVELOPMENT AND SUBMISSION OF JOURNAL ARTICLES TO PEER-REVIEWED JOURNALS (SUPPORTED WITH MENTORSHIP PLAN).

THE TRAINING WAS PLANNED AS A COMPLETE PRACTICAL/ HANDS-ON MODEL WHERE AFTER A BRIEF INTRODUCTION TO THE KEY PRINCIPLES AND SUGGESTIONS, THE MAIN PART OF EACH SESSION COMPRISES OF PARTICIPANTS WORKING ON PRACTICAL EXERCISES. THREE TYPES OF PRACTICAL EXERCISES WERE DEVELOPED FOR THE HANDS-ON PRACTICE. FIRST, A FEW QUESTION-ANSWER TYPE EXERCISES WERE GIVEN WHERE THE PARTICIPANTS WORKED ON SOME PRIOR EXAMPLES FROM OTHER PAPERS. SECOND, A CASE STUDY WAS GIVEN AND PARTICIPANTS WERE ASKED TO WORK ON IT, FOR THE RESPECTIVE SESSIONS. THIRD, A SELECTED AND EDITED PAPER ON 'TELEPHONE HELPLINE FOR SEXUAL & REPRODUCTIVE HEALTH' WAS DEVELOPED AND PARTICIPANTS WERE MADE TO WORK ON THE SAME PAPER IN ALL THE SESSIONS, THEREBY REVISING THE ENTIRE PAPER BY THE END OF THE WORKSHOP.

THE FIRST DAY STARTED WITH AN INAUGURAL SESSION FOLLOWED BY INTRODUCTION OF PARTICIPANTS. THE PARTICIPANTS ALSO INTRODUCED THE TOPICS THAT THEY HAVE CHOSEN FOR DEVELOPING SCIENTIFIC ABSTRACTS. INTRODUCTION TO THE SCIENTIFIC WRITING COURSE WAS PROVIDED FOLLOWED BY TECHNICAL SESSIONS ON PRINCIPLES OF AUTHORSHIP, PUBLICATION ETHICS AND FRAMING AN APPROPRIATE TITLE, IN THE MORNING SESSION. THE AFTERNOON SESSION STARTED WITH A PRACTICAL EXERCISE ON APPROPRIATE TITLES FOLLOWED BY ANOTHER PRACTICAL SESSION ON WRITING THE ABSTRACTS. THE DAY ENDED WITH THE PARTICIPANTS WORKING ON THEIR RESPECTIVE TOPICS FOR GIVING A TITLE AND DEVELOPING AN ABSTRACT.

THE SECOND DAY STARTED WITH SESSION ON WRITING INTRODUCTION AND LITERATURE REVIEW. THIS IS FOLLOWED BY A SESSION ON WRITING METHODS SECTION IN THE MORNING. AFTERNOON SESSION FOCUSED ON WRITING RESULTS SECTION, THAT ALSO COVERED VARIOUS WAYS OF PRESENTING DATA IN SCIENTIFIC ARTICLES.

THE THIRD DAY FOCUSED ON WRITING THE DISCUSSION SECTION OF THE PAPER FOLLOWED BY TWO SUPPORTING TOPICS ON RESPONDING TO REVIEWER'S COMMENTS AND ADDING REFERENCES AND CITATIONS. AT THE END OF THE TECHNICAL SESSIONS, THE PARTICIPANTS SUBMITTED DRAFT ABSTRACTS DEVELOPED BY THEM ON THEIR CHOSEN TOPICS. A FOLLOW UP PLAN WAS ALSO DISCUSSED AND AGREED UPON.

THE TRAINING ENDED WITH A VALEDICTORY FUNCTION WHERE DR JOSEPH D WILLIAMS, DIRECTOR PROJECTS, VHS GRACED AS THE CHIEF GUEST AND DR RASANJALEE HETTIARACHCHI, DIRECTOR, NSACP WAS THE SPECIAL GUEST. CERTIFICATES WERE DISTRIBUTED TO THE PARTICIPANTS. THE WORKSHOP ENDED WITH VOTE OF THANKS.

1. INTRODUCTION

National STD/AIDS Control Programme (NSACP), Sri Lanka: National STD/AIDS Control Programme (NSACP), Govt., of Sri Lanka is a comprehensive program aimed at prevention and control of STDs & HIV/AIDS being implemented by the Ministry of Health, Nutrition & Indigenous Medicine in all the provinces of Sri Lanka.



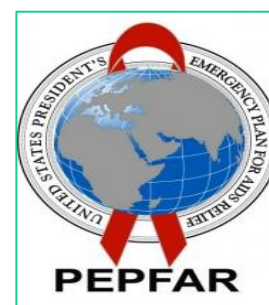
The key functions of NSACP includes: Preventive services; Diagnosis treatment and care services for HIV; Strategic Information Management; and Health Systems Strengthening. The country is currently implementing its National Strategic Plan (NSP) 2018-2022 for HIV/AIDS control. NSP 2018-22 aims at ending AIDS in Sri Lanka by 2025. NSACP networks with 31 full time, 20 branch STD Clinics and 21 ART centres.



Strategic Information Management Unit (SIMU): The Strategic Information Management (SIM) System is the key system that is responsible for providing information and evidence to guide the country in its health policy and planning, resource allocation, program management, service delivery and accountability. The monitoring and evaluation of the STD/HIV treatment & care and Laboratory services of NSACP is currently carried out using a manual paper-based system. Currently, SIMU-NSACP is in the process of developing an automated Electronic Information Management System (EIMS) which will provide timely information for efficient patient management and monitoring of HIV care and ART Program.

Some of the **unique strengths of Strategic Information (SI) system** includes: National HIV Monitoring & Evaluation Plan 2017-22 that outlines the broad vision, objectives, approaches and tools used in the program; standardized forms and formats specific to each field for feeding EIMS; redesigned the website for transparency and dissemination; bringing out comprehensive annual report; long-standing, dynamic leadership of SIM unit with strong institutional memory as a great asset to NSACP; good time series data on HIV prevalence through HIV Sentinel Surveillance and IBBS; system well-positioned to be evolved into a strong HIV case reporting system; and replacing the paper-based system with an EIMS for efficient patient management and monitoring of HIV care & ART program.

PEPFAR/India: The U.S. President's Emergency Plan for AIDS Relief (PEPFAR) provides strategic, targeted support to strengthen the quality and impact of India's strong government-led response to HIV/AIDS. India's epidemic is concentrated among key populations, which include sex workers and their clients, men who have sex with men, transgender individuals, people who inject drugs, and mobile populations. The PEPFAR/India provides Technical Assistance (TA) to the Government of India (GoI) and its partners, to maximize impact on the HIV epidemic in India, by strengthening capacity in critical program areas within GoI, the private sector, and with civil society partners. PEPFAR/India has two implementing agencies in India: Centers for Disease Control and Prevention (CDC) and U.S. Agency for International Development (USAID).



CDC/DGHT-India: The U.S. Centers for Disease Control and Prevention's Division of Global HIV and Tuberculosis (DGHT) Program in India has focused its efforts on preventing new infections, increasing access to services for persons living with HIV and tuberculosis (TB), supporting a single monitoring and evaluation system, and strengthening the work of civil society organizations. DGHT provides TA on a broad range of issues, including prevention of HIV (including parent to child transmission), addressing care and treatment needs of key affected populations - people who inject drugs, men who have sex with men, commercial sex workers, trans-gender individuals, addressing comorbidities of TB and HIV, strengthening laboratory systems, blood safety, and strategic information.



The Voluntary Health Services – Cooperative Agreement (CoAg.) implementing partner of CDC for providing TA on SI:

Voluntary Health Services (VHS) was established in 1958 by Dr K S Sanjivi, an eminent physician, and visionary leader. Today, VHS is a 465 bedded multi-specialty tertiary teaching hospital guided by the philosophy of “*unto the last*”. VHS is registered as a non-profit society under the Indian Registration of Societies Act, 1860. Since 1995, VHS with 60 years of committed service has been at the forefront of managing comprehensive community health and STI/HIV prevention programs. VHS has wide range experience in implementing innovative HIV/AIDS prevention, care and support programs, building the capacity of Civil Society Organizations (CSOs), training of Health Care Providers (HCPs), strengthening Strategic Information (SI), providing Technical Assistance (TA), facilitating knowledge transfer, etc. Over 25 years, VHS has been the nodal agency for implementing HIV/AIDS prevention, care, support and treatment programs in Tamil Nadu, partnering closely with the Government of India (GoI), National AIDS Control Organization (NACO), State AIDS Control Societies (SACS), line departments and other key stakeholders.



VHS has implemented several large, multi-site and multi-layered donor-funded programs including the USAID supported AIDS Prevention and Control (APAC) project; Bill and Melinda Gates Foundation (BMGF) supported Tamil Nadu AIDS Initiative (TAI) and GFATM supported Multi-country South Asia-Diversity in Action (MSA-DIVA) project. Currently, managing Centers for Disease Control and Prevention (CDC), Department of Health and Human Services, United States Government supported Technical Assistance to NACP IV. VHS has been involved in knowledge sharing initiatives both within the country and internationally. Through the USAID supported South-To-South HIV/AIDS Resource Exchange (SHARE) project, VHS provided TA to 12 selected sub-Saharan African nations and promoted bi-directional knowledge transfer of high-impact policies, practices and innovations for strengthening the HIV/AIDS program and improving health outcomes.

CDC support on Technical Assistance to NSACP on Strategic Information: The PEPFAR is a United States Governmental initiative to address the global HIV/AIDS epidemic. PEPFAR and CCDC is providing support to NSACP through its' Cooperative Agreement implementing partner The Voluntary Health Services (VHS) through its VHS-CDC Project. Overall goal is to enhance the contribution of Strategic Information (SI) towards the National HIV/AIDS response in Sri Lanka by facilitating Technical Assistance (TA) and cooperation on identified priority areas. Key strategies on TA to

NSACP being adopted will include Evidence-based TA; Horizontal exposure & vertical expertise; Bottom up strategy; and Comprehensive in outlook.

VHS-CDC Project and NSACP jointly facilitated the exploratory visits, inter-agency visits, interactions with senior officials at Ministry & NSACP, key stakeholders and facilitated field visits. Through this process, CDC, VHS-CDC Project and NSACP jointly identified the specific areas of TA on SI. For facilitating Technical Cooperation Initiatives, Letter of Intent (LoI) was signed between Ministry of Health, Nutrition and Indigenous Medicine, Govt. of Sri Lanka and CDC/DGHT-India during February 2018.

NSACP and VHS-CDC Project jointly held discussions and identified TA areas for support and developed a comprehensive technical assistance plan on the following four broad areas:

1. Enhance SIM Unit capacity to utilize electronic and manual program data for decision making;
2. Improve capacity of SIM Unit to carryout management, analysis, documentation, and dissemination of summary program data reports;
3. Improve capacity of SIM Unit to conduct and disseminate results of operational research; and
4. Consultation with stakeholders on monitoring and documentation of accomplishments and sustainability plans.

As part of this TA initiatives, VHS-CDC Project is providing capacity building initiatives, system strengthening, documentation and dissemination. In accordance with the capacity building initiatives, the project is organizing a series of training programs which includes:

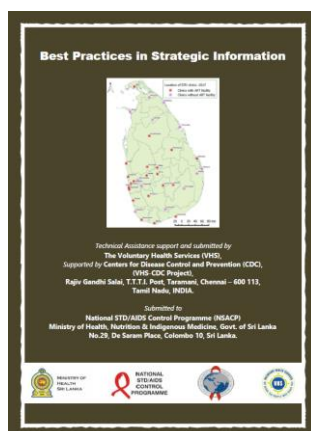
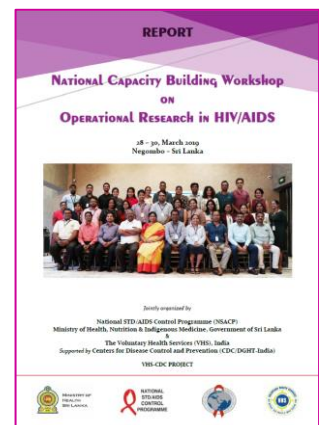
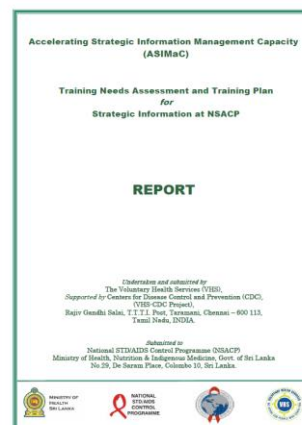
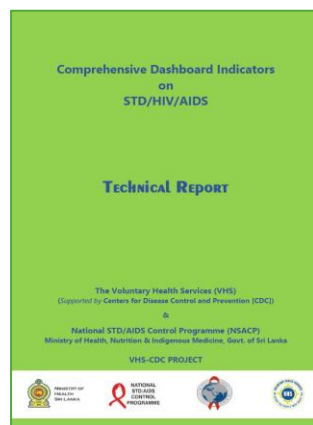
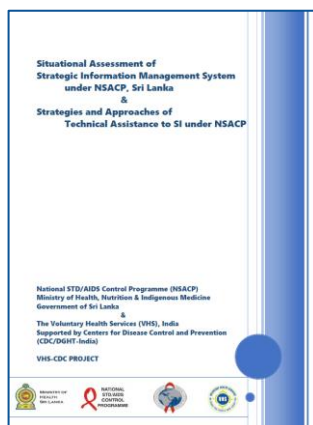
- ◆ Training on operational research methodology (qualitative & quantitative).
- ◆ Training on DHIS2 for data analysis and effective program planning (to align with national and international requirements).
- ◆ Training on DHIS2 for STD clinic staff.
- ◆ Enhance capacity to write abstracts for presentation at international conferences.
- ◆ National training programs on data management and epidemiologic analysis for SIM and local reporting units.

Considering the overall capacity plans evolved, VHS-CDC Project has organized “**National Training on Scientific Writing in HIV/AIDS**” for SIMU team in NSACP.

2. NATIONAL TRAINING ON SCIENTIFIC WRITING IN HIV/AIDS – AN OVERVIEW

VHS-CDC Project with the support of CDC/DGHT-India in collaboration with NSACP, MoH-GoSL has undertaken the capacity building activities such as: Training Need Assessment study and training plan, training on Operational Research, exposure visits, sharing of best practices and other related initiatives. As a part of this, the strategic technical support initiatives developed and shared the following products for dissemination:

1. Situation Assessment of SIMS & Strategies and Approaches of TA to SI under NSACP
2. Comprehensive Dashboard Indicators on HIV/AIDS
3. Training Needs Assessment and Training Plan for SI team
4. Documentation of Best Practices in Strategic Information under NSACP – Best Practices Book
5. Book of Abstracts on Best Practices
6. Best Practices Series (7 best practices)
7. Report on National Capacity Building on Operational Research in HIV/AIDS



3. TRAINING PROGRAM – AN OVERVIEW

3.1. About Training

VHS-CDC Project with the support of CDC/DGHT-India and NSACP, MoH-GoSL jointly organized a National Training on Scientific Writing in HIV/AIDS and capacitated SI team in NSACP from 25-27, May 2019 at Seascope hall, The Blue Water Hotel, Wadduwa, Sri Lanka.

Objectives: To build the capacity of SI team on scientific writing by using existing data and study findings with the ultimate goal of improving the dissemination of research and enhanced knowledge sharing.

Training Approaches:

- ◆ Three days of active learning.
- ◆ Learning by doing approach.
- ◆ Brief Presentations, Discussions, Interactive Sessions, Group Works & Presentations by the Participants.
- ◆ Continuous, session-by-session hands-on practice on one selected case study.
- ◆ Identification of priority topics relevant to the current HIV/AIDS programme in Sri Lanka.
- ◆ Real time development of abstracts & article sections on identified topics, during the workshop.
- ◆ Experienced facilitators to guide and hand hold the participants.
- ◆ Residential programme, to ensure complete focus.

3.2. Participants

VHS-CDC Project has organized a three-day training program. In consultation with SIMU, based on the criteria, SIMU-NSACP has identified and nominated the participants for undergoing the training program. In this training on Scientific Writing, 17 participants have undergone the training program and VHS-CDC Project capacitated them on Scientific Writing. The participants represented from SIMU, NSACP, Peripheral STD clinics and Ministry of Health. The category of participants in the training program includes: Director-NSACP, Consultant-Venereologists, Medical Officer/ Planning, Medical Officer/ Medical Informatics, Senior Registrar-Venereologists, Senior Strategic Information Officer, Consultant-Epidemiologists and Regional Director-Health Services (MoH).

The criteria adopted for selection of participants will include but not limited to:

- ◆ At present, the person should directly work in SIMU, NSACP, Peripheral STD clinics and Ministry of Health.
- ◆ Plans to continue to work in the same position.
- ◆ Interest in undertaking writing of abstracts/ scientific papers.
- ◆ Person who has already contributed in development of abstracts and requires additional knowledge and skills.
- ◆ Person who manages the data and willing to use the data for programmatic decision making.

- ◆ Directly or indirectly involved in research, documentation, data management, dissemination, etc.
- ◆ Agreeing to participate in the training and complete follow-up actions as evolved in the training program.
- ◆ Willing to learn through training and mentorship.

Overall, the classification of the participants will include:

Category	No. of participants
Organization represented:	
NSACP	2
SIMU	4
MoH	1
Peripheral STD Clinics (Consultant-Venereologist, Senior Registrar and Registrar)	10
Gender:	
Female	8
Male	9
Total	17 participants

The *list of participants* undergone training is given below:

S. No.	Name, Designation and Address of the participant	Contact number & Email ID
1	Dr R Hettiarachchi, Director NSACP.	Mobile: 0718147182
		Email : hlasanjalee@yahoo.com
2	Dr K A M Ariyaratne, Consultant-Venereologist, Rajagiriya.	Mobile: 0777078443
		Email : ariyaratne1@gmail.com
3	Dr S Muraliharan, Medical Officer/ Planning, 3, Joseph Ln, Col4.	Mobile: 0772920371
		Email : ymsmurali@yahoo.com
4	Dr Lahiru Rajakaruna, Medical Officer/ Medical Informatics, Malabe.	Mobile: 0777854477
		Email : lahirurajakaruna@gmail.com
5	Dr Anuruddha Karunaratne, Senior Registrar/ Venereologist, Nugegoda.	Mobile: 0773320102
		Email : anruddha@gmail.com
6	Dr Piyumi Perera, Senior Registrar/ Venereologist, Rajagiriya.	Mobile: 0772352785
		Email : piyumipp@gmail.com
7	Mr Lakshan Fernando, Senior Strategic Information officer, Colombo.	Mobile: 0777475778
		Email : lakshanlsf@gmail.com
8	Dr Thanuja Peiris, Senior Registrar	Mobile: 0718126728
		Email : peiristhanuja@gmail.com
9	Dr Chandrika Jayakody, Consultant Venereologist, Ganemulla.	Mobile: 0718258509
		Email : wcksovis@gmail.com
10	Dr W S Chamani Dileka, Senior Registrar/ Venereologist, Nugegoda.	Mobile: 0772647431
		Email : chamdileka@gmail.com

S. No.	Name, Designation and Address of the participant	Contact number & Email ID
11	Dr Damindu Thanthree, Senior Registrar/ Venereologist, Biyagama.	Mobile: 0713216647
		Email : damindu_jalath@yahoo.com
12	Dr S Beneragama, Consultant Epidemiologist, Borelasgamua.	Mobile: 0714447520
		Email : sbeneragama@hotmail.com
13	Dr D O C de Alwis, Consultant Venereologist, Maharagama.	Mobile: 0715928696
		Email : okavas@hotmail.co.uk
14	Dr M K S H Jayasena, Acting Consultant Venereologist, Pannipitiya.	Mobile: 0714477585
		Email : shanikajayasena@gmail.com
15	Dr Vino Dharmakulasinghe, Consultant Venereologist.	Mobile: 0773850900
		Email : vinodharmakulasinghe@gmail.com
16	Dr Iresh Jayaweera, Senior Registrar.	Mobile: 0773557123
		Email : ireshlj@yahoo.com
17	Dr U I Ratnayake, Regional Director, Kalutara District.	Mobile: 0718147181
		Email : isaacuster@gmail.com



3.3. Facilitators & Coordination Team

VHS-CDC Project has undertaken strategic and systematic efforts in identifying resource persons for facilitating and coordination of the entire training program. Considering this, VHS has undertaken efforts such as: secondary review, referral, use of VHS database of consultants, google search and other aspects.

The criteria considered in selecting the facilitators may include but not limited to:

- ◆ Minimum 15 years of experience in designing and conducting the training programs at national level / international level.
- ◆ Experience of the consultants in conducting training on Scientific Writing.
- ◆ Ability of the consultant in developing the resource materials in accordance with the training needs.
- ◆ Understanding of the country epidemic situation and systems in NSACP.
- ◆ Credibility of the trainers with acceptability among the stakeholders.
- ◆ Understanding and ability to coordinate between the facilitators.
- ◆ Willingness to adopt participatory and innovative methodologies including providing hands-on training.
- ◆ And other aspects.

The project has undertaken systematic, coordinated efforts in identifying, prioritizing and finalizing the facilitators and co-facilitators for conducting the training program.

Facilitators: VHS-CDC Project under the leadership of Director Projects Dr Joseph D Williams with the technical team had series of meeting in identifying, prioritizing and finalizing the core team of faculties considering the need for enhancing knowledge and skills on Scientific Writing among the officials at SIMU-NSACP and Peripheral STD Clinics. The facilitators identified by the VHS-CDC Project as independent consultants for conducting the training are:








*Dr Niranjan Saggurti
Consultant,
VHS-CDC Project*



*Dr Yujwal Raj,
Technical Advisor (SI),
VHS-CDC Project*

VHS-CDC Project developed Terms of Reference (ToR), facilitated concalls and conducted coordination meetings. This has contributed for effective team building in planning and conducting the training programs.

Co-facilitators: In addition to the facilitators, VHS-CDC Project has identified and engaged the co-facilitators for the following purpose:

-  *To share the relevant experiences about the technical collaboration initiatives, country scenario, context, requirements, training needs, etc.*
-  *To serve as a complementing resource team during the training, in providing clarifications, facilitating interactions, providing hands-on training to the groups during the practical/ group exercise, etc.*
-  *To provide feedback to the facilitators on day-to-day basis and contribute for systematic planning for next day sessions.*
-  *To extend support in evolving follow-up plans.*
-  *To serve as a prompter by posing questions to enable the participants to get better clarity and thorough understanding.*



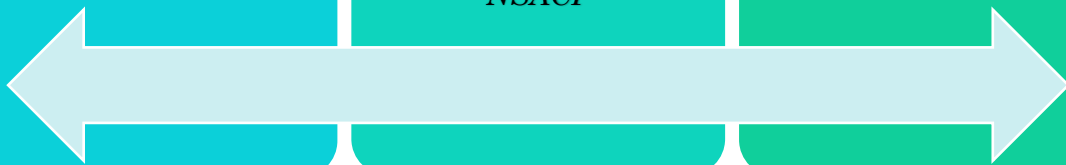
*Dr Joseph D Williams,
Director Projects,
VHS*





*Dr KAM Ariyaratne,
Consultant-Venereologist
& Coordinator-SIMU,
NSACP*



*Dr T Ilanchezhian,
Sr. Technical Advisor,
VHS-CDC Project*

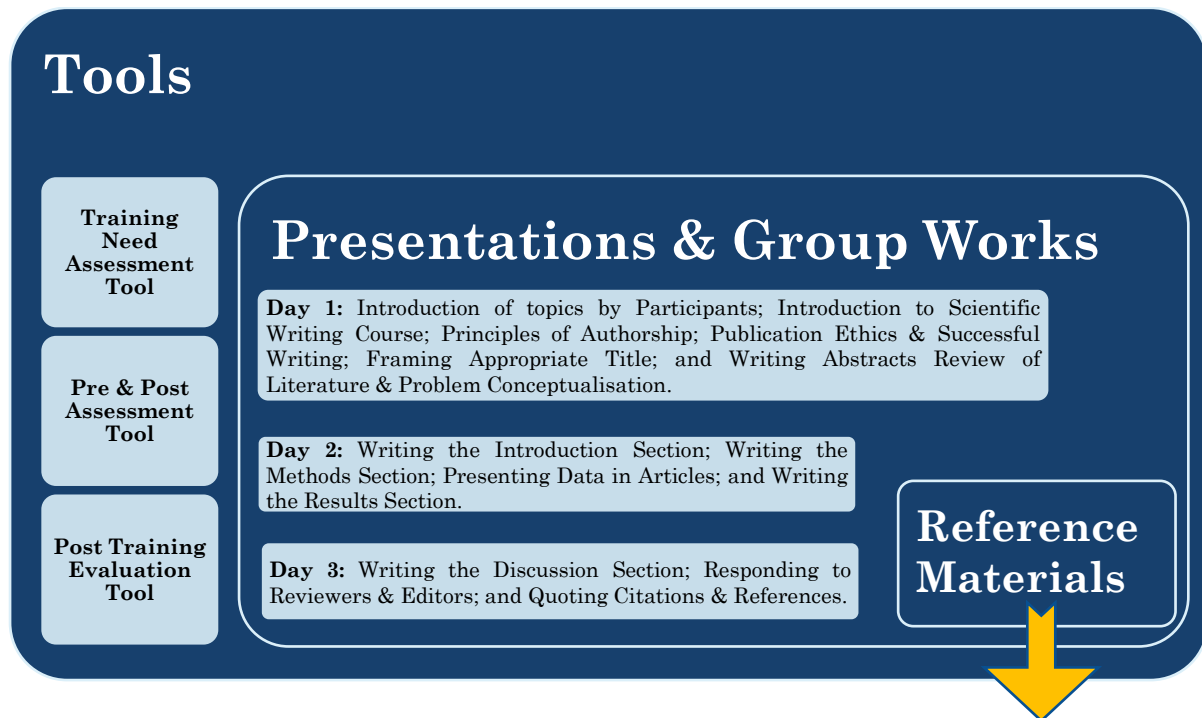


Training Coordination Team (TCT): VHS-CDC Project had a consultation with SIMU-NSACP for planning, conducting, coordinating and ensuring follow-up for the training program. The project has evolved clear cut roles and responsibilities of each stakeholders at every stage of conducting the training program. The project has formed TCT, considering the following needs and requirements:

TCT role / Purpose	<ul style="list-style-type: none"> ◆ Identifying training needs. ◆ Confirmation of participants. ◆ Developing profile of the participants. ◆ Briefing the experts and consultants. ◆ Contribute for logistics planning, resource materials development and distribution. ◆ Support in registration. ◆ Ensuring time management during the training program. ◆ Providing feedback to the experts. ◆ Overall contribute for successful conduct of the training in coordination with organizers, trainers & participants. 	
Team		<ul style="list-style-type: none"> ☞ Dr Ariyaratne Manathunge, Consultant-Venereologist & Coordinator-SIMU ☞ Dr S Muraliharan, MO/ Planning ☞ Dr Piyumi Perera, SR/ Venereologist
		<ul style="list-style-type: none"> ☞ Dr Joseph D Williams, Director Projects ☞ Mr Kamalakar Bysani, Finance Controller ☞ Dr T Ilanchezhian, Sr. Technical Advisor ☞ Mr Sathyaraju, Associate Manager-Finance
Periodicity	<ul style="list-style-type: none"> ◆ The TCT met on the previous day evening for planning the training program. ◆ The TCT met everyday evening for reviewing and providing feedback. ◆ The TCT had final meeting on completion of the training program and provided feedback. 	
Methodologies	<ul style="list-style-type: none"> ◆ The TCT team had formal meetings during the training days and through virtual mode for systematic planning, suggestions and experiences. 	

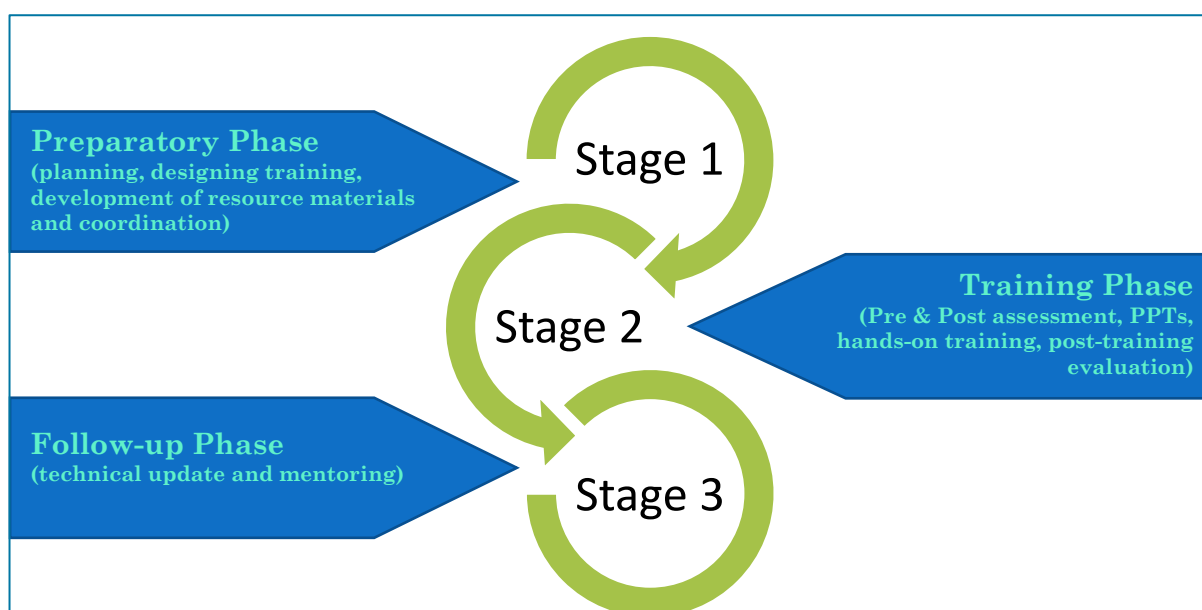
3.4. Resource Materials

VHS-CDC Project has taken utmost efforts and developed the resource materials with pilot study and pre-testing.



Collected, analysed, prioritized the reference materials for additional reading for the participants which includes presentations, reference books, case studies, sample abstracts, sample papers, poster presentations and other resource materials. The project has made efforts to share through e-group and pen drive to each participant for further reading. This has helped in providing additional reading materials.

3.5. Planning and management of the training program



The project with the support and coordination of SIMU-NSACP undertaken systematic and strategic efforts for planning, conducting and undertaken follow-up plans. The specific activities undertaken during every stage of the training program will include but not limited to:

Stage 1- Preparatory Phase: Some of the key activities undertaken during the preparatory phase will include:

- 💧 Planning:
 - ✖ Planning meeting with SIMU and NSACP.
 - ✖ Development of brief outline based on the needs and expectations.
 - ✖ Discussions with the key stakeholders.
 - ✖ Training Need Assessment.
- 💧 Participants:
 - ✖ Development of criteria for participants.
 - ✖ Communication to the participants and coordination with the Training Coordinator.
 - ✖ Finalization of participants and development of their profile.
- 💧 Resource team:
 - ✖ The project evolved criteria, identified resource persons, prioritized and finalized the team.
 - ✖ Developed ToR and initiated contract signing for engaging the resource team in designing and conducting the training.
- 💧 Pre-production:
 - ✖ Identified the training needs and evolved plans.
 - ✖ Finalized agenda based on the training needs.
 - ✖ Development of tools, presentations, resource materials, reference materials, etc.
 - ✖ Suggestions and feedback on the materials developed and finalization of the resource kit.
 - ✖ Evolved plans for dissemination.
- 💧 Resource kit:
 - ✖ Developed resource kit with tools, presentations and reference materials.
 - ✖ Copied in the pen drive for ready reference.
- 💧 Coordination:
 - ✖ Formed E-group and WhatsApp group for effective communication and coordination.
 - ✖ Shared communication with participants and SIMU at regular intervals including curtain raiser for creating hype on the program.
- 💧 Logistics planning:
 - ✖ Development of accommodation, travel plan, ticket booking, hall arrangements and other logistics support.
 - ✖ Finalization of the food menu and other requirements.
 - ✖ Systematic planning and efforts for arranging the hall with the cluster seating, sound system, communication aids, wi-fi and other needful infrastructure for creating enabling environment for conducting the training program.
- 💧 Branding:
 - ✖ Undertaken efforts for branding the display and other related materials including banner, certificates, presentations, etc.

- ◆ Planning for stationeries:
 - ✦ The project undertaken efforts for stationery and resource materials development (i.e., bag, scribbling pad, pen, folder, communication aids, design and printing of certificates, etc.).
- ◆ Budget and financial planning:
 - ✦ Based on the planning meeting, developed budget for planning and conducting the training program considering various aspects such as resource materials, consultants, hall, accommodation, stationeries, resource kit, travel and other aspects.
- ◆ Training Coordination Committee Meeting (TCT):
 - ✦ Undertaken efforts for systematic planning and coordination of the training program by forming TCT and conducted interactions through virtual and formal meeting.

The project has undertaken systematic efforts in planning the entire training program for enhancing the capacities of SI team and for successful conduct of the training program.

Stage 2- Training Phase: Some of the key activities undertaken during the training phase will include:

- ◆ Before Training:
 - ✦ Issue of welcome letter.
 - ✦ Allocation of rooms.
 - ✦ Registration.
 - ✦ Provided resource materials/ resource kit.
- ◆ During Training:
 - ✦ Inaugural
 - ✦ Training guidelines
 - ✦ Training sessions
 - ✦ Group formation
 - ✦ Feedback sessions
 - ✦ Recap
 - ✦ Group work/ hands-on training including peer review and review by facilitators and co-facilitators.
 - ✦ Development of abstracts supported with peer review and mentoring support.
 - ✦ Training evaluation
 - ✦ Follow-up plans

Stage 3- Follow-up Phase: Some of the key activities proposed / undertaken as a part of the follow-up phase will include:

- ◆ Updating and finalizing the abstracts based on the suggestions and inputs provided.
- ◆ Sharing additional resource materials for further enhancing the knowledge.
- ◆ Experience sharing between the scientific writers through e-groups.
- ◆ Execution of follow-up plans.
- ◆ Documentation of report.

3.6. Innovative approaches

Some of the innovative approaches in conducting the training program will include:

CRITERIA FOR SELECTION	TRAINING NEED ASSESSMENT	NEED BASED AGENDA	
PRE-EVALUATION	RESOURCE KIT	E-GROUP	WHATSAPP GROUP
ADDITIONAL RESOURCE MATERIALS		PRESENTATIONS	
HANDS-ON EXPERIENCE	PARTICIPATORY METHODOLOGY	SIMULATION GAMES	
PRIORITIZATION OF TITLES FOR ABSTRACTS		PEER & FACILITATORS REVIEW	
DEVELOPED KNOWLEDGE AND SKILLS		RECAP	FOLLOW-UP PLANS
POST-TRAINING EVALUATION		POST-ASSESSMENT	FEEDBACK
COORDINATION AMONG STAKEHOLDERS		COORDINATION COMMITTEE MEETINGS	
FACILITATORS MEETINGS		FOLLOW-UP COMMUNICATIONS	

3.7. Coordination between the stakeholders

The key stakeholders involved in the training program will include: VHS-CDC Project / facilitators, CDC and NSACP (including SIMU & Training Coordinator). VHS-CDC Project developed a concept note along with role of key stakeholders, presented with the key stakeholders in the planning meeting and finalized the overall training plan, execution plan and follow-up plans.



The coordination between VHS-CDC Project and NSACP-SIMU at every stage of the planning and execution of the program has helped in ensuring systems in technical delivery, logistics coordination and overall achievement of the objectives of the training. This training has demonstrated the success through greater engagement of each stakeholder at every stage of the program.

3.8. Abstracts developed

This training has helped the participants to identify the prioritization of the problem/statements. From identified areas, each participant has selected the topic which is of their interest considering various parameters. The list of abstracts developed on the titles are:

Outcomes from disaggregated HIV care cascade analysis in Sri Lanka
<i>- Dr K A M Ariyaratne, Consultant Venereologist</i>
Characteristics of HIV confirmed cases reported to NSACP in Sri Lanka during 2017-2018
<i>- Dr S Beneragama, Consultant Epidemiologist</i>
Is Sri Lanka ready for Elimination of Mother to Child Transmission of HIV and Syphilis?
<i>- Dr S Muraliharan, Medical Officer/ Planning - Dr Lahiru Rajakaruna, Medical Officer/ Medical Informatics - Mr Lakshan Fernando, Senior Strategic Information officer</i>
Sexual Health of HIV related myths among university entrants, Colombo
<i>- Dr Iresh Jayaweera, Senior Registrar</i>
Provision of prevention of Mother To Child Transmission of HIV services by public health midwives in Sri Lanka
<i>- Dr Vino Dharmakulasinghe, Consultant Venereologist</i>
Perceptions of lawyers regarding key populations at risk for HIV and related laws in Sri Lanka
<i>- Dr Piyumi Perera, Senior Registrar/ Venereologist</i>
Knowledge and practices on Post-Exposure prophylaxis for HIV and Hepatitis B among dental surgeons in Colombo, Sri Lanka
<i>- Dr Anuruddha Karunaratne, Senior Registrar/ Venereologist</i>
Sexual Risk Behaviour among HIV positive attendees of central HIV clinic, Colombo, Sri Lanka
<i>- Dr D O C de Alwis, Consultant Venereologist</i>
Sexual health and related vulnerabilities among male to female transgender populations in Western Province of Sri Lanka
<i>- Dr Damindu Thanthreee, Senior Registrar/ Venereologist</i>
Patient satisfaction of services provided by doctors at HIV clinic – NSACP
<i>- Dr Thanuja Peiris, Senior Registrar</i>
Management of Syphilis among genitourinary medicine clinic attendees in Norwich, England
<i>- Dr M K S H Jayasena, Acting Consultant Venereologist</i>

3.9. Outcomes

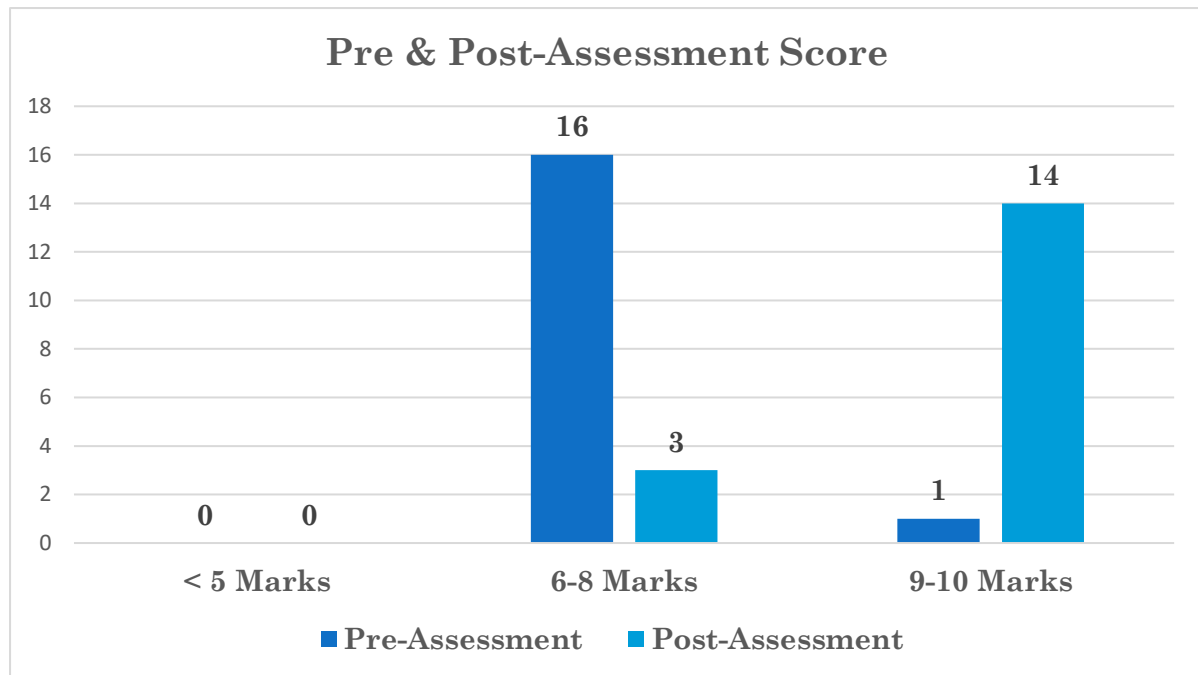
Some of the **key outcomes** of the training program will include:

- **Built the knowledge & skills of NSACP Program Managers in the formulation of an argument, conceptualization of a problem, research design, methodology, results and their interpretation.**
- **Made participants understand the purpose and content of each element of a journal article.**
- **Helped the participants navigate through the process of writing an article leading to publication in national and international journals.**
- **Developed draft journal articles of acceptable standards on the identified topics of programmatic relevance.**
- **Evolved plan for follow up and development and submission of journal articles to peer-reviewed journals (supported with mentorship plan).**

3.10. Training evaluation and effectiveness

3.10.1. Pre & Post-Training Assessment Analysis

As a part of the training, pre & post assessment was conducted with the participants. Overall, 17 participants undergone the training program and all participants submitted the pre & post-training assessment forms. The overall comparison on the pre & post assessment is given below:



In the pre-assessment, overall 94% (16) respondents have fallen in the category of scoring 6-8 marks against the overall scoring of 10 marks and 5.82% (only 1) respondent has fallen in the category of scoring between 9 and 10.

In the post-assessment, overall 82% (14) respondents has moved to the category of scoring 9-10 marks (moved from 6-8 scoring in pre-assessment) against the overall scoring of 10 marks and 17% (only 3) respondents has fallen in the category of scoring 6-8.

Overall, more than 82% of the respondent has scored highest marks and above. This shows the training has created effectiveness in providing needful knowledge and skills among the participants.

3.10.2. Training Evaluation - Analysis

	5	4	3	2	1	Total	Total of (4 & 5)	Overall %
	Exemplary	Very Good	Good	Average	No Comments			
Course content								
I understood the learning objectives well.	12	5				17	17	100.00
The course content met my expectations & was in line with the learning objectives.	9	8				17	17	100.00
I found the course material (slides, handouts, exercises, etc.) useful & easy to follow.	13	4				17	17	100.00
Training received was adequate for my position/ experience.	7	10				17	17	100.00
The course will directly or indirectly improve the performance of my duties.	13	4				17	17	100.00
I am clear about where to find answers to questions that I have about Scientific Writing.	7	8	2			17	15	88.24
Structure & process of training								
The training sessions are well structured & appropriately scheduled.	12	5				17	17	100.00
Instructional methods used during training are effective.	10	7				17	17	100.00
Participation and interaction were encouraged during the sessions.	13	4				17	17	100.00
The speed/ pace at which the training was conducted was appropriate.	7	8	1	1		17	15	88.24

	5	4	3	2	1	Total	Total of (4 & 5)	Overall %
	Exemplary	Very Good	Good	Average	No Comments			
I was comfortable with the length of the sessions & length of the workshop.	7	10				17	17	100.00
Group works/ hands-on exercises are well structured with clear instructions.	6	11				17	17	100.00
Guidance & mentoring support was adequately provided during group works/ exercises.	10	7				17	17	100.00
Adequate chance was given for participants to ask questions and resolve doubts.	11	6				17	17	100.00
There was ample opportunity to practice the skills I am supposed to learn.	7	7	3			17	14	82.35
I received adequate feedback from the facilitators during the practice sessions.	9	7	1			17	16	94.12
Trainers & Mentors – Knowledge & Delivery Style								
The facilitators were knowledgeable on the subject matter.	14	3				17	17	100.00
The facilitators explained the concepts clearly and in an understandable way.	12	5				17	17	100.00
The facilitators effectively handled the questions that were asked.	12	5				17	17	100.00
The examples & experiences quoted by the trainers were relevant & apt to my situation.	11	6				17	17	100.00
I was well engaged during the sessions/ The sessions were kept alive, interesting & interactive.	10	7				17	17	100.00

	5	4	3	2	1	Total	Total of (4 & 5)	Overall %
	Exemplary	Very Good	Good	Average	No Comments			
How would you rate their facilitation skills overall, on a scale of 5?	12	4	1			17	16	94.12
Facility & Amenities								
The venue and seating arrangement were comfortable and suitable for the training.	11	6				17	17	100.00
The environment was free from distractions and conducive to learning.	14	3				17	17	100.00
The audio-visual set up was good and clear.	10	7				17	17	100.00
The quality of food was good.	10	5	2			17	15	88.24
Overall								
How will you rate the training, overall, on a scale of 5?	11	6				17	17	100.00
I am satisfied with the training course.	13	4				17	17	100.00
I will recommend this course to others.	13	4				17	17	100.00

Overall training evaluation has conducted in 5 areas with 29 questions by applying 5-point scale. The above table reveals the effectiveness of the training program and evaluation of the training program in the perspectives of the participants. Overall in 24 categories of evaluation covering all the 5 areas, (79%) 23 questions/ evaluation criteria has scored 100% in all aspects (this shows all aspects are Exemplary and Very Good).

3.11. Feedback of Participants

It was a very successful program with valuable content regarding the Scientific Writing. Facilitators were really competent on their work and I really appreciate your support on this workshop. Thank you.

*- Dr Lahiru Rajakaruna
Medical Officer/ Medical Informatics*

The three-day training program on Scientific Writing in HIV/AIDS is the best workshop I have attended on the topics. It definitely built my capacity on Scientific Writing and boosted the morale to engage in more research and publications. The facilitators were very competent trainers with great communication skills. Thank you, VHS-CDC Project.

*- Dr Anuruddha Karunaratne
Senior Registrar/ Venereologist*

It was well planned, structured and conducted smoothly. Facilitators were knowledgeable in their areas and conducted the training in a suitable way to the participants and helped in understanding difficult concepts. The study material and exercises also enhanced the training. This training encouraged us to develop journal activities in a scientific manner.

*- Dr Piyumi Perera
Senior Registrar/ Venereologist*

The training program was a successful one. The trainers were well equipped and organized. Context/ methodology/ learning way were excellently planned. Thank you VHS team.

*- Mr Lakshan Fernando
Senior Strategic Information officer*

It is a comprehensive training program on Scientific Writing. It brushes-up our existing knowledge and improve the gaps. It promoted me to initiate research of interest and writing. It is really useful.

*- Dr Chandrika Jayakody
Consultant Venereologist*

It was a well-organized and conducted on time basis. The facilitators were knowledgeable on the subject and guided us. Hands-on exercises were very good and it helps us to utilize the knowledge for the workshop. The venue also very good for the workshop.

*- Dr Damindu Thanthree
Senior Registrar/ Venereologist*

The three-day Scientific Writing workshop gave us an opportunity to revisit our knowledge and skills. We acquired during our post-graduate training long time back. As we engage in more responsibilities currently as trainers, researchers, service providers, etc., this training will enable us to perform those roles in more efficient manner.

*- Dr S Beneragama
Consultant Epidemiologist*

I feel very fortunate to be a participant of this training program of “Scientific Writing” organized by NSACP and VHS-India. This is very important to me (and I hope to all my fellow participants) to become a complete professional by encouraging to share my experience with others and possibly with international community. Finally, I was not a good writer but sure will be in the future. Thank you VHS-CDC team for the dedication for improvement of Srilankan professionals (Venereologists).

*- Dr D O C de Alwis
Consultant Venereologist, President of SLCoSHH*

Overall training program was good. As a Consultant-Venereologist, this knowledge will help to write more scientific evidence from Sri Lanka. Please keep up on your relationship between NSACP and VHS-CDC Project. Learning should not be restricted to only for three days, please continue your mentor-student relationship via email up to the level of acceptance of our articles to a proper journal.

*- Dr Vino Dharmakulasinghe
Consultant Venereologist*

This program was well organized. The knowledge gained will be utilized for future publications to make them high quality and to publish in high index journals. Thank you, VHS-CDC Project team.

*- Dr Iresh Jayaweera
Senior Registrar*

Overall the training program is excellent. It was conducted in a very methodical manner so that a difficult concept explained in a very simple manner. The course is very useful to my work as lot of information that we have couldn't share because of poor knowledge of this particular subject. However, now I have much better confidence to write an article.

*- Dr U I Ratnayake
Regional Director*

3.12. Recommendations and suggestions

- ✘ Each participant will continue to initiate efforts for developing skills in scientific writing including developing abstracts and papers.
- ✘ The participants will further improve the draft abstracts developed in the workshop & finalize the same in coordination with SIMU-NSACP.
- ✘ The e-group on scientific writing will be effectively utilized by the team for exchanging experiences, sharing technical update, sharing resource materials, identifying opportunities for submission of abstracts and presentation of papers, etc.
- ✘ The scientific writers developed through this training will contract the facilitators/ mentors for any additional technical update, clarifications, guidance and other strategic supports.
- ✘ The team trained on operational research and scientific writing may be networked and they can be further involved for effective data management, interpretation, presentation, etc.
- ✘ SIM Unit will continue to provide ongoing TA and undertake review mechanism as a part of the ongoing activities with the trained personnel as and when required.

4. TRAINING PROCEEDINGS

4.1. Proceedings of Day 1 – (25th May 2019)

4.1.1. Registration

Registration of Participants: VHS-CDC Project and NSACP jointly has undertaken the registration process between 0800 – 0900 hrs in the training centre. The participants have registered in the registration format. Participants were also provided with resource kit including bag, pad, pen, agenda, reference materials, etc. In addition to the registration and resource kit, each participant was provided with Welcome Note along with a brief on the logistic support as a part of the training program. Overall, 17 participants were registered for the training program and data management.



Registration of facilitators and coordination team: Along with the registration of participants, separate registration for facilitators and coordination team has also been undertaken.

4.1.2. Inaugural Function

VHS-CDC Project and NSACP has jointly organized a brief inaugural function between 0915 – 1000 hrs. Dr T Ilanchezhian, Senior Technical Advisor, VHS-CDC Project has provided brief outline on the organizers of the training program.



Dr Ariyaratne, Consultant-Venereologist has delivered a welcome address. During the welcome address, he has mentioned that, VHS-CDC Project is providing strategic TA to NSACP in close coordination with SIMU team. He also mentioned that, VHS-CDC Project has organized training on Operational Research. As a follow-up of this, training on Scientific Writing is being organized. Further, he welcomed the guests, facilitators, coordination team from VHS-CDC Project and NSACP and participants. He also requested all participants to benefit through this training program considering the importance of Scientific Writing for dissemination.



Dr T Ilanchezhian requested all participants to introduce themselves with name, designation, number of years of experience, previous experience in scientific writing, etc. Based on this, all the participants and facilitators introduced themselves in the training program. This introduction has helped in:

- ◆ Knowing each other and areas of expertise.
- ◆ Created enabling environment for discussions, posing questions and share experiences.
- ◆ Preparing them for same level and enabling everyone to treat equally.

Further to the introduction, lighting of lamp was held by the following officials:

- ☞ Dr Rasanjalee Hettiarachchi, Director, NSACP;
- ☞ Dr U I Ratnayake, Regional Director, Kalutara District;
- ☞ Dr Ariyaratne Manathunge, Consultant-Venereologist & Coordinator-SIMU-NSACP.
- ☞ Mr Kamalakar Bysani, Finance Controller, VHS-CDC Project;
- ☞ Dr T Ilanchezhian, Senior Technical Advisor, VHS-CDC Project;
- ☞ Dr Niranjan Saggurti, Consultant, VHS-CDC Project;
- ☞ Dr Yujwal Raj, Technical Advisor (SI), VHS-CDC Project; and
- ☞ Mr S Sathyaraju, Associate Manager-Finance, VHS-CDC Project.



Left to Right (front row): Dr Rasanjalee Hettiarachchi, Director, NSACP; Dr U I Ratnayake, Regional Director, Kalutara District; Mr Kamalakar Bysani, Finance Controller, VHS-CDC Project; and Dr Ariyaratne Manathunge, Consultant-Venereologist & Coordinator-SIMU-NSACP.

Left to Right (back row): Dr Niranjan Saggurti, Consultant, VHS-CDC Project; and Dr Yujwal Raj, Technical Advisor (SI), VHS-CDC Project.

Dr T Ilanchezhian introduced the facilitators Dr Niranjan Saggurti and Dr Yujwal Raj.

Dr Yujwal Raj made a brief presentation on brief overview on the national training on scientific writing along with Dr Niranjan. During the presentation, he presented covering the aspects such as: objectives, outcomes, facilitators, training approach, day wise session overview, ground rules for training, guidance for identifying titles for abstract development, things we expect from participant s, role of mentors and facilitators.

During the session, he has shared the session overview for each day as detailed below:



This overview has helped the participants to understand overall plan on the training program and understanding the process associated with the training agenda.

Furthering, Dr Yujwal has also facilitated participatory methods in evolving ground rules for the training. Some of the ground rules evolved and agreed upon for successful conduct of the training will include:

- ◆ Timely reporting
- ◆ Active Participation in the sessions
- ◆ Mobile on the silent mode
- ◆ Contribute productively to the team works
- ◆ Feel free to seek clarifications

- ◆ Avoid arguments & side talks
- ◆ Respect others' point of views
- ◆ Handover the group work papers to the facilitators
- ◆ Consistent effort to develop the draft articles by the end of the workshop
- ◆ Interact with the facilitators informally during the breaks
- ◆ Any Other???

Overall, this session has helped in introducing the training program, enabling the participants to understand the training process and other details.



Dr T Ilanchezhian introduced Dr Rasanjalee Hettiarachchi, Director, NSACP. He also briefly shared the support extended by the Director in facilitating the TA to NSACP on SI.

Also thanked the Director for the support extended in providing the foreword for the 13 publications developed by VHS-CDC Project in partnership with NSACP based on the working relationship.

Dr Rasanjalee Hettiarachchi, Director, NSACP has delivered the inaugural address. In her speech, she mentioned the following:

"Appreciate the initiatives of VHS-CDC Project and CDC support in providing TA to NSACP on SI"

"NSACP has demonstrated various innovations and managing data"

"We need to take efforts for scientific writing for dissemination at national and global level"

"This training will be very much useful for NSACP and the team for converting our experiences into abstracts papers for effective dissemination"

"Let us all benefit through this important and meaningful training program conducted by VHS-CDC Project"

"Appreciate and thank Dr Ariyaratne and SIMU team for the effort undertaken in utilizing VHS-CDC Project for conducting this training"

"Let us continue to develop knowledge and skills on writing"

"Thanks to strategic initiative undertaken by VHS-CDC team with the support of CDC"

Dr T Ilanchezhian mentioned that, the mentor for this TA to NSACP on SI is Dr Joseph D Williams, Director Projects – VHS. He has extended strategic guidance, support and contributed for planning, execution of the training, identification of the location, deputing team and all other overall leadership support. He will join on the final day of the training program. We express hearty welcome to all the participants on behalf of the Director.



Dr T Ilanchezhian introduced Mr Kamalakar Bysani, Finance Controller of VHS-CDC Project. Mr Kamalakar delivered special address in the inaugural representing VHS-CDC Project. During his speech, he mentioned that:

- ◆ The Voluntary Health Services' Project Management Unit is managing projects for over 23 years and contributed for HIV/AIDS prevention initiatives at state, national and international level.
- ◆ The technical collaboration with NSACP is a very good initiative and support received from NSACP is also highly appreciable.

- ◆ VHS-CDC Project is committed for effective delivery of planned activities within India and outside India.
- ◆ This training on scientific writing is very much need of the hour and appreciate the SIMU and NSACP team for capitalizing this TA initiatives for capacity building of the SIMU team.
- ◆ VHS-CDC Project in consultation with SIMU has identified international experts for conducting this training for ensuring best results. Kindly make use of this opportunity.
- ◆ VHS-CDC Project team will extend all possible support for successful completion of the training program and fulfilling your requirements for effective learning. Once again, appreciate this initiative.

Dr T Ilanchezhian made logistics announcements with the information on accommodation arrangements, systems evolved for exchange of resource materials through e-group and WhatsApp groups, training timings and other training related arrangements made. As a part of the inaugural session, Dr T Ilanchezhian proposed vote of thanks.

Pre-assessment: VHS-CDC Project has developed a Pre-Assessment Tool for conducting the pre-assessment with all the participant. The tool has 10 questions with objective type of answers to enable the participants to respond. The filled in pre-assessment tools were collected for analysing in comparison with post-assessment.

4.1.3. Session wise reports on day 1

Title	
• <i>Introduction on topics by participants</i>	
Methodology	Time
• Interactive session	1000 - 1045 hrs
Facilitators	
<ul style="list-style-type: none"> • Dr Yujwal Raj, Technical Advisor (SI), VHS-CDC Project • Dr Ariyaratne Manathunge, Consultant-Venereologist, NSACP • Dr Niranjana Saggurti, Consultant, VHS-CDC Project 	



Dr Yujwal Raj lead a session on “Introduce topic on which the participant intends to develop a scientific paper”.

As a part of it, he has requested each participant to share the title in which, wish to develop a Scientific Paper. In addition, he has informed the following:

- ◆ The title may be on Surveillance, Research, Data, etc.
- ◆ Evolve a title but not necessarily it should be very perfect.
- ◆ Each one is requested to suggest a title.
- ◆ The title should be complete and in full-fledged form.
- ◆ Do not suggest titles which is of – half-way in conducting the study and mid-way.

In continuation of the clarifications to the participants, each participant shared their interested, prioritized topics for developing abstract as a part of this training program. The list of study titles suggested by the team are:

1. Sri Lankan preparedness for elimination of Mother-To-Child Transmission
2. Knowledge among doctors about Post-Exposure Prophylaxis
3. Sexual health knowledge and myths among first year university students
4. Impact of EIMS compared to paper-based system on NSACP program performance
5. IBBS 2017-18 (condom use among MSM)
6. Testing and treatment cascade of HIV program in Sri Lanka
7. Current HIV related risk behaviours among PLHIV attending HIV clinics in Colombo
8. Sexual health issues among transgenders in Western Province
9. Perceptions of lawyers on KP related laws
10. KAP of public health midwives on PMTCT services
11. Audit of management of Syphilis in a GUM clinic in Norwich
12. Contact tracing of bacterial STIs in STD clinics in Sri Lanka
13. Perception of school teachers on sexual education in schools
14. Epidemiological analysis of reported HIV cases in last 2 years

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14. Epidemiological analysis of reported HIV cases in last two years.

This exercise has enabled the participant to prioritize the interested topic and setting a tone for initiating the training program.

Title	
• <i>Introduction to Scientific Writing Course</i>	
Methodology	Time
• Presentation & Facilitated Discussion	1045 - 1115 hrs
Facilitators	
• Dr Niranjan Saggurti, Consultant, VHS-CDC Project • Dr Yujwal Raj, Technical Advisor (SI), VHS-CDC Project	

Dr Niranjan handled a session on course introduction through a PPT presentation followed by facilitated discussion. During the presentation, he has highlighted the following:

- ◆ Course Objectives:
 - ✗ To introduce a logical formula that can be used for writing an article about an intervention study
 - ✗ To bring together principles of good science and good writing
- ◆ What is a Research Paper?
 - ✗ The researcher says what she was going to do
 - ✗ Why it was important
 - ✗ How she did it
 - ✗ What happened when she did it
 - ✗ The implications of what happened
- ◆ Why Publish in Refereed Journals?
 - ✗ Disseminates knowledge
 - ✗ Validates the quality of the study
 - ✗ Demonstrates the skills of the researcher
 - ✗ Often is required for employment or promotion



In continuation of this, he has presented a sample paper on Telephone Helpline which has been developed in six pages. He has requested each participant to refer the paper and suggested to review the same. In continuation of this, interactive session was held about the paper.

The discussions and suggestions emerged during the interactions are:

- ◆ The Telephone Helpline paper has all information, published in local journal with wonderful content. If it is submitted to review team, this will not be accepted.
- ◆ At the end of the day, as a part of this exercise, we can re-write the same abstract in a more meaningful manner by adopting the criteria, guidelines, etc.
- ◆ While writing papers, kindly consider that every data can be presented. Don't have intentions that, my data will not be useful. The data highlights on reasons on failure will also be useful.
- ◆ Writing article is a process.
- ◆ If paper need to be accepted as No.1, the aspects such as: word, sentences, sequential presentation, perfect order, planning for effective preparation and presentation.
- ◆ He also mentioned that, if an article is published first time at international level, it is more credit to the individual, identity for the individual and great opportunity to share learnings from one geography to the other.

Hands-on experience on reviewing and editing the elaborative sample abstract on helpline was held. The participants reviewed the entire abstract and identified the strengths, areas for improvement and information to be deleted to make it more comprehensive abstract. Further, a common session was held to consolidate the suggestions and edited the paper on helpline by integrating all the individual suggestions by projecting in the screen. Through this process, a comprehensive abstract has been developed in a crispy manner with minimal words by focusing on the key aspects in accordance with the guidelines. This process helped the participants to understand process in developing the abstract and also how to effectively develop the abstract (based on the sample case study).

This session has enabled the participants to understand how the abstracts should not be and what are all aspects should be taken into account for developing abstracts.

How to choose a Journal: Dr Niranan has facilitated a session on “how to choose a journal” and highlighted the following as a part of the session.

- ◆ How to choose a Journal?
 - ✗ Determine your audience
 - ✗ Consider publication alternatives
 - International journals
 - Local journals
 - E-publishing
 - ✗ Always do some form of local publication
 - ✗ Peer-reviewed journals are best
 - ✗ Check your paper's bibliography for journals that publish similar studies
 - ✗ Get the opinions of colleagues
 - ✗ Read “Instruction to Contributors” in journals you are considering
 - ✗ Follow the journal's guidelines for article organization, length, and reference style
 - ✗ “Top” journals have higher rejection rates (80% or more)
- ◆ The Impact Score
 - ✗ Review the impact score of various journals
 - ✗ Aim to publish your paper in high impact journals
 - ✗ Maintain the standards of the paper to match the high impact factor

- ◆ Conference Publication vs Journal Publication
 - ✗ Check the guidelines of the conference secretariat before submitting
 - ✗ Some allow publishing in journals subsequently, some don't
 - ✗ Choose the content and format that should go for conference
 - ✗ Ensure the best & high impact findings get included in the journal article
- ◆ Other Considerations
 - ✗ Paid vs Free journals
 - ✗ Cost considerations
 - ✗ Discounts/ Concessions
 - ✗ Paper vs e-journals
 - ✗ Local, easy to publish vs Reputed, difficult to publish
 - ✗ Timeframe from submission to publishing

In continuation of the presentation, he highlighted the following:

- ◆ Top journals have higher rate of rejection. Lancet use to accept only 5% of the abstracts or articles received.
- ◆ Impact factors determines the contribution of the journal in influencing the policy.
- ◆ Consider impact factor while choosing the presentation.
- ◆ Lot of annexures can be included in the articles published.
- ◆ Review high impact journal and low impact journals and plan accordingly.
- ◆ Impact factors are decided by the committee constituted for this purpose.
- ◆ The journal with impact factors can be obtained through google.
- ◆ If an article published in an organizational website, the same abstract should not be submitted again.
- ◆ Prioritize and be clear what do you want to publish and where you want to publish.
- ◆ Paper journals are reduced day by day and e-journals are emerging and improving.
- ◆ If articles are published in high impact journals, the value for the article, findings and authors will improve.
- ◆ Generally, all journals will take long time for accepting or rejecting the abstracts considering the difficulties in finding the right reviewer and the process associated with.

Overall, consider the history of the journal, credibility, impact factors, review system and other aspects for submitting the abstracts.

Tea Break: 1115 – 1130 hrs

Title	
• <i>Principles of Authorship</i>	
Methodology	Time
• Presentation & Discussion	1130 - 1200 hrs
Facilitators	
• Dr Yujwal Raj, Technical Advisor (SI), VHS-CDC Project • Dr Niranjana Saggurthi, Consultant, VHS-CDC Project	

Dr Yujwal Raj facilitated an interactive presentation cum discussions on “Principles of Authorship”. During the presentation and discussions, the following information emerged:

- ◆ Authors included in the papers should fulfill any of the two criteria:
 - ✗ Conception and design of the research
 - ✗ Data collection and/or basic data coding
 - ✗ Analysis and interpretation of data
 - ✗ Drafting the article or revising it critically for important intellectual content

No one who fulfils these criteria excluded from authorship credit.

- ◆ The value of different positions within the authorship order (including first and last author spots) will vary according to the target journal/disciplinary field. Different positions may reflect a leading contribution to a specific paper and/or to the project overall.
- ◆ The person who is identified as having made the major contribution to the paper is entitled to take first choice of authorship position.
- ◆ If all the authors feel that they have contributed equally to the paper, this can be indicated in a footnote.
- ◆ The author is also responsible for public while taking the credit.
- ◆ The plagiarism will lead to complications and the same need to be avoided at every stage.
- ◆ Primary author and corresponding author both get the credits.
- ◆ Sequential of authorship is decided at the beginning of the study.
- ◆ Persons contributions for the study is very critical for including in authorship.
- ◆ Some of the journals permits maximum of nine authors, but in many journals, there is no restrictions in the number of authorships.
- ◆ The Lead author should usually be the corresponding author. This decision needs to be agreed. The corresponding author is responsible for ensuring that all authors have approved the final manuscript.

Title	
• <i>Publication Ethics & Successful Writing</i>	
Methodology	Time
• Presentation & Discussion	1200 - 1245 hrs
Facilitators	
• Dr Niranjan Saggurti, Consultant, VHS-CDC Project • Dr Yujwal Raj, Technical Advisor (SI), VHS-CDC Project	

Dr Niranjan made a presentation on “Publication Ethics” and covered the aspects such as publication misconduct, redundant publication, conflicts of interest, factors that can facilitate successful writing, barriers, principles of effective writing and other details:

- ◆ Publication Misconduct:
 - ✗ **Intention** to cause others to regard as true that which is not true
 - ✗ **Major:** Plagiarism, fabrication and falsification of data
 - ✗ **Minor:** Redundant publication and failure to declare conflict of interest
- ◆ Redundant Publication:
 - ✗ Submit article to only one journal at a time
 - ✗ Do not submit same published article with only minor changes for multiple publication
 - ✗ If article previously published in foreign language mention at time of submission
- ◆ Conflicts of Interest:
 - ✗ Conflicts of interest are factors which may influence author’s judgment. Conflicts may be personal, financial, or political.
 - ✗ Conflicts of interest should be disclosed when paper is submitted.
- ◆ Factors that can facilitate successful writing:
 - ✗ Aspiration to write and sharing of knowledge
 - ✗ Designated time for writing (usually out of office hours)
 - ✗ Concentration
 - ✗ Pro-active in seeking guidance and asking for help
 - ✗ Exchange ideas, share data and collaborate
 - ✗ Focus on significance and prioritize
 - ✗ Document innovation
 - ✗ Patience and dedication
 - ✗ Attitude to complete the writing
- ◆ Barriers (try to avoid):
 - ✗ Taking up too much analyses and too many ideas at a time
 - ✗ Thinking of “Oops! this didn’t work and giving up”
 - ✗ Always saying it to self: “Let me do this Tomorrow”
 - ✗ Trying to do it within crowded office
 - ✗ Not enough analyses or no consultation on presentation of ideas
 - ✗ Several other commitments
 - ✗ Frequent calls on cell phones, responding emails
- ◆ Principles of effective writing:
 - ✗ Brief, Clear, Simple, Efficient and Specific

Title	
• <i>Framing an Appropriate Title</i>	
Methodology	Time
• Presentation & Discussion	1245 - 1315 hrs
Facilitators	
• Dr Yujwal Raj, Technical Advisor (SI), VHS-CDC Project • Dr Niranjana Saggurti, Consultant, VHS-CDC Project	

Dr Yujwal Raj has facilitated a session on “Framing and Appropriate Title in Scientific Writing” supported with presentation, exercise and interactions. Dr Yujwal has informed that:

- ◆ A good title clearly describes the contents of the paper in the fewest possible words.
- ◆ Common title faults
 - ✗ Too short
 - ✗ Too long
 - ✗ Ambiguous or inappropriate for a journal article
 - ✗ Poor syntax or careless grammar
 - ✗ Use of abbreviations or jargon
- ◆ Title should not have more conjunctions
- ◆ Do not impose judgements in the title
- ◆ Do not use words loosely
- ◆ Title should not be too short or too broader
- ◆ Formula for writing the title:
 - Include the independent and dependent variables in your title:
“The effect of X on Y”
 - or
 - Include the relationship between variables that you are trying to explain:
“The relationship between X and Y”

As a part of the presentation, Dr Yujwal presented the following examples on common title faults:

“Study on School Achievement Between Boys and Girls in Maryland”
“Effect of Positive Masculinities on ANC Use in Indonesia”
“Youth, Sex, and HIV”

“An Innovative Intervention Model to Address the Sexual and Reproductive Health of Unmarried Adolescent Girls and Boys in the Chaco Region of Bolivia”
“Model and its Replicability: Methodological Issues and Knowledge Gaps”

Participants in the training program reviewed each title and provided suggestions on each title covering the positive and negative aspects. Further, they have also evolved the appropriate titles through the process of improving, modifying, etc.

Lunch Break: 1315 – 1400 hrs

Title	
• <i>Framing an Appropriate Title for the Scientific Article</i>	
Methodology	Time
• Practical Exercise	1400 - 1430 hrs
Facilitators	
<ul style="list-style-type: none"> • Dr Yujwal Raj, Technical Advisor (SI), VHS-CDC Project • Dr Ariyaratne Manathunge, Consultant-Venereologist, NSACP • Dr Niranjana Saggurthi, Consultant, VHS-CDC Project • Dr T Ilanchezhian <i>alias</i> Dr IC, Senior Technical Advisor, VHS-CDC Project 	

In continuation of the previous session, Dr Yujwal Raj continued the discussions on “Framing an Appropriate Title” and facilitated the exercise by providing a handout as given below:

Exercise 1 - Rewrite the titles based on the guidelines:	
1.	Short Birth Intervals Don't Kill Women
2.	Prolonged Labor in Rural Ethiopia: A Community-based Study
3.	Twenty-one Years inside the Uterus
4.	Willingness to Pay by Female Sex Workers for Female Condoms and Male Sex Workers for Male Condoms
5.	The Relationship between AIDS High Risk Behaviors and Childhood Status, Perception of Gender Orientation, and Rare Experiences/Psychology Among Chinese Gays
6.	Impacts of a Successful Quality-of-Care Intervention on Family Planning Use Six Months Later
7.	Comparison of the Men in the Group who Intended Less but Practiced More to the Men who Intended More but Practiced Less
8.	Women's Perceptions of Abortions in Egypt
9.	Effectiveness of Television Seat Belt Messages in Changing Behavior
10.	Diarrheal Diseases Among European Travelers Broken Down by Sex
11.	A Study on High Risk among Men Who Have Sex with Men
12.	The Results of an Innovative Experimental Intervention to Increase Knowledge of, Change Attitudes Towards, and Modify Pregnancy/STI/HIV Risk Behaviour by Unmarried Girls in Four Countries: Mexico, South Africa, Thailand, and Germany
13.	Writing a Paper on a Social Science Intervention: A Course on Scientific Writing for Social Scientists.
14.	Familial Obesity and the Obesity-Mortality Relationship.

As part of the exercise 1, the facilitator presented the titles of various abstracts/ scientific papers and requested the participants to review and suggest how it should be. The participants actively involved in the discussion process, provided suggestions, considering the need for developing a meaningful title. Through an interactive process, all the 14 titles were reviewed, modified and understood the negative aspects in while framing the title and how it should be avoided.

In continuation of the exercise on developing titles, exercise on reviewing, correcting and improving the abstract was held and the same was facilitated.

Exercise 2 – Titles

Read the title and abstract below. Does the title express the contents of the abstract? If not, suggest another title.

Title: “Long-Term Community Commitment Is Necessary to Enhance the Economic Participation Of Girls”

Abstract:

While adolescents in India face a rapidly changing economic environment, the choices available to unmarried girls are very different from those available to boys. Girls are much less likely than boys to remain single into their twenties, complete middle school, or generate income. Social norms limit girls’ control over their life choices and curtail their mobility within or beyond their immediate community. This study tested a pilot intervention to enhance skills and expand life choices for adolescent girls living in the slums of Allahabad. Both the girls and their parents welcomed a program providing vocational training and savings schemes. However, few girls turned their new skills into economic gain, in part due to social barriers that impede girls’ access to economic markets. Vocational training programs should combine family and community sensitization with training to enhance adolescent girls’ economic participation.

As part of the exercise 2, title and abstract were provided. Requested the participants to read the title and abstract and requested to form a meaningful title, undertake track changes in reviewing and improving the abstract content in 250 words. Each participant independently reviewed and observed the aspects to be included in the title and framed titles. Also, reviewed the abstract content along with the suggestions for making in 250 words. The participants shared the revised titles and suggestions on the abstract content in the common forum and through a process finalized the title and abstract content.

Both the exercises have provided enough opportunities to learn how to frame a title for a study. This process has enabled the participants to understand aspects to be considered and to be avoided while developing titles. This session also helped in hands-on experience on how to review, improve and perfect the abstract. Also, complemented in the process of developing abstracts. In continuation of the sessions, facilitators provided clarifications on the questions raised by the participants.

Title	
• <i>Writing Abstracts</i>	
Methodology	Time
• Presentation & Practical Exercise	1430 - 1600 hrs
Facilitators	
<ul style="list-style-type: none"> • Dr Niranjan Saggurti, Consultant, VHS-CDC Project • Dr Yujwal Raj, Technical Advisor (SI), VHS-CDC Project • Dr Ariyaratne Manathunge, Consultant-Venereologist, NSACP • Dr T Ilanchezhian <i>alias</i> Dr IC, Senior Technical Advisor, VHS-CDC Project 	

Dr Niranjan has conducted interactive session on abstracts – putting it in a paragraph. In continuation of the posing questions with the participants about the understanding on abstracts, he shared the following:

- ◆ The abstract should be:
 - ✗ A miniature version of the paper
 - ✗ Short: Less than 250 words in length
- ◆ The abstracts focus on three points such as:
 - ✗ What was the research question?
 - ✗ How did you investigate the question?
 - ✗ What did you find?
- ◆ A good abstract:
 - ✗ Describes research objectives and findings
 - ✗ Is written in past tense
 - ✗ Covers only material discussed in the paper
 - ✗ Contains no abbreviations or acronyms
 - ✗ Includes searchable keywords
- ◆ Elements of an Abstract (Standard): Objective; Methods; Results; Discussion; & Keywords
- ◆ Elements of an Abstract (Alternative): Issues; Description; Lessons learned; & Next steps
- ◆ Types of Abstracts (Two):
 - ✗ Structured: Uses headings “Objective,” “Method,” “Results,” and “Discussion”
 - ✗ Unstructured: Same elements as structured abstract, but does not use headings



ABSTRACT IS A MINIATURE VERSION OF THE PAPER

Overall, this session has helped in enabling each participant to understand how to develop an abstract considering aspects such as: elements, types, focus points and other relevant details.

Exercise: In continuation of the presentation, Dr Niranjana shared the exercise sheet with the following four exercises:

Exercises

Exercise 1: Add headings “objectives”, “methods”, etc. to this abstract

Exercise 2: Shorten this abstract to 250 words

Exercise 3: Further shorten the abstract to 150 words

Exercise 4: Write a title for the paper

Initially, the participants independently gone through the exercise and developed the headings, shorten the abstract to 250 words, further shorten the abstract to 150 words and written the title (on their own). In continuation of this, Dr Niranjana projected each abstract and facilitated interactions and finalized the headings, shorten the abstract to 250 words, further shorten the abstract to 150 words and written the title (through a consensus building). Adopted the following process in reviewing and editing:

1. Writing the abstract with objectives, methods, results and conclusion.
2. Remove/ clean the unwanted information.
3. Reduce the abstract to 250 from the existing abstract and then reduce to 150 words (brought out the miniature version of the paper) – by reducing the words make it very short and clarity.
4. Create a title for the same.

Through the process, the title has been evolved with everyone’s opinion with the facilitation and guidance of core team of facilitator is:

Feasibility of conducting HIV related Biological & Behavioural Survey among Key and Vulnerable Population in Mali, West Africa

(or)

Feasibility of concurrent HIV related Bio-Behavioural Surveys among Key and Vulnerable Population in Mali, West Africa

This process has helped them on the need and importance of writing meaningful title, how to develop abstract with minimal words without changing the context, with effective presentation for effective selling. The entire team has understood the process of developing abstracts including title, writing abstracts in a shorter form, etc.

At the conclusion, facilitator has informed that,



***CONTENT OF THE PAPER IN THE FEWEST WORD IS TITLE
(NOT TOO LONG, NOT AMBIGUOUS, NOT VAGUE, NOT TOO SHORT)***

Tea Break: 1600 – 1615 hrs

Title	
• <i>Review of Literature & Problem Conceptualisation</i>	
Methodology	Time
• Presentation & Discussion	1615 - 1730 hrs
Facilitators	
<ul style="list-style-type: none"> • Dr Yujwal Raj, Technical Advisor (SI), VHS-CDC Project • Dr Niranjana Saggurthi, Consultant, VHS-CDC Project • Dr Ariyaratne Manathunge, Consultant-Venereologist, NSACP • Dr T Ilanchezhian <i>alias</i> Dr IC, Senior Technical Advisor, VHS-CDC Project 	

Dr Yujwal Raj facilitated an interactive session on writing literature review supported with presentations, question and answer session, sharing ideas and suggestions, etc. During the presentation, he has emphasized on the need and importance of literature review as follows:

- ◆ Place each work in the context of its contribution to understanding the research problem being studied.
- ◆ Describe the relationship of each work to the others under consideration.
- ◆ Identify new ways to interpret prior research.
- ◆ Reveal any gaps that exist in the literature.
- ◆ Resolve conflicts amongst seemingly contradictory previous studies.
- ◆ Identify areas of prior scholarship to prevent duplication of effort.
- ◆ Point the way in fulfilling a need for additional research.
- ◆ **Locate your own research within the context of existing literature [very important].**

Further, he has also presented the information on: Structure of Literature Review; Critical Evaluation of Literature; Consider before writing Literature Review; Ways to Organise Literature Review; Preparing an Annotated Bibliography; Writing Literature Review; Common Mistakes to Avoid; etc.

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Structure of Literature Review

- An overview of the subject, issue, or theory under consideration, along with the objectives of the literature review,
- Division of works under review into themes or categories [e.g. works that support a particular position, those against, and those offering alternative approaches entirely],
- An explanation of how each work is similar to and how it varies from the others,
- Conclusions as to which pieces are best considered in their argument, are most convincing of their opinions, and make the greatest contribution to the understanding and development of their area of research.

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Critical Evaluation of Literature

- **Provenance** -- what are the author's credentials? Are the author's arguments supported by evidence [e.g. primary historical material, case studies, narratives, statistics, recent scientific findings]?
- **Methodology** -- were the techniques used to identify, gather, and analyze the data appropriate to addressing the research problem? Was the sample size appropriate? Were the results effectively interpreted and reported?
- **Objectivity** -- is the author's perspective even-handed or prejudicial? Is contrary data considered or is certain pertinent information ignored to prove the author's point?
- **Persuasiveness** -- which of the author's theses are most convincing or least convincing?
- **Value** -- are the author's arguments and conclusions convincing? Does the work ultimately contribute in any significant way to an understanding of the subject?

Consider before writing Lit Review

- **Clarity on**
 1. Roughly how many sources should I include?
 2. What types of sources should I review (books, journal articles, websites; scholarly versus popular sources)?
 3. Should I summarize, synthesize, or critique sources by discussing a common theme or issue?
 4. Should I evaluate the sources?
 5. Should I provide subheadings and other background information, such as definitions and/or a history?
- **Narrow the Topic**
- **Consider Whether Your Sources are Current**

Ways to Organise Lit Review

- Chronology of Events
- By Publication Chronology
- By Themes/ conceptual categories
- Methodological/ By methods used by the researcher

Preparing an Annotated Bibliography

- Name of the topic
- Complete reference. For document accessed online, provide the web link.
- Nature of study: Scientific Research/ Programmatic research
- Place of study
- Period of study
- Abstract
- Reviewer's note
- Key words

The literature review will be a synthesis of this bibliography.

Writing Lit Review

- Use Evidence
- Be Selective
- Use Quotes Sparingly
- Summarize and Synthesize
- Keep Your Own Voice
- Use Caution When Paraphrasing

Common Mistakes to Avoid

- Sources in your literature review do not clearly relate to the research problem;
- You do not take sufficient time to define and identify the most relevant sources to use in the literature review related to the research problem;
- Relies exclusively on secondary analytical sources rather than including relevant primary research studies or data;
- Uncritically accepts another researcher's findings and interpretations as valid, rather than examining critically all aspects of the research design and analysis;
- Does not describe the search procedures that were used in identifying the literature to review;
- Reports isolated statistical results rather than synthesizing them in chi-squared or meta-analytic methods; and,
- Only includes research that validates assumptions and does not consider contrary findings and alternative interpretations found in the literature.

In continuation of the presentation and discussions, Dr Yujwal has facilitated and answered to the clarifications and questions raised by the participants.

Overall this session helped the participants to understand the importance of review of literature and other aspects to be considered while undertaking review of literature for developing abstracts.

Title	
• <i>Work on Individual Papers</i>	
Methodology	Time
• Presentation & Discussion	1730 - 1830 hrs
Facilitators	
<ul style="list-style-type: none"> • Dr Yujwal Raj, Technical Advisor (SI), VHS-CDC Project • Dr Niranjana Saggurthi, Consultant, VHS-CDC Project • Dr Ariyaratne Manathunge, Consultant-Venereologist, NSACP • Dr T Ilanchezhian <i>alias</i> Dr IC, Senior Technical Advisor, VHS-CDC Project 	

In continuation of the session, core facilitator interacted with the participants and requested each individual to develop the title in which they wish to work on developing abstract. Each participant developed the title and displayed in the board. The overall titles identified will include:

Outcomes from disaggregated HIV care cascade analysis in Sri Lanka
<i>- Dr K A M Ariyaratne, Consultant Venereologist</i>
Characteristics of HIV confirmed cases reported to NSACP in Sri Lanka during 2017-2018
<i>- Dr S Beneragama, Consultant Epidemiologist</i>
Is Sri Lanka ready for Elimination of Mother to Child Transmission of HIV and Syphilis?
<i>- Dr S Muraliharan, Medical Officer/ Planning</i> <i>- Dr Lahiru Rajakaruna, Medical Officer/ Medical Informatics</i> <i>- Mr Lakshan Fernando, Senior Strategic Information officer</i>
Sexual Health of HIV related myths among university entrants, Colombo
<i>- Dr Iresh Jayaweera, Senior Registrar</i>
Provision of prevention of Mother To Child Transmission of HIV services by public health midwives in Sri Lanka
<i>- Dr Vino Dharmakulasinghe, Consultant Venereologist</i>
Perceptions of lawyers regarding key populations at risk for HIV and related laws in Sri Lanka
<i>- Dr Piyumi Perera, Senior Registrar/ Venereologist</i>
Knowledge and practices on Post-Exposure prophylaxis for HIV and Hepatitis B among dental surgeons in Colombo, Sri Lanka
<i>- Dr Anuruddha Karunaratne, Senior Registrar/ Venereologist</i>
Sexual Risk Behaviour among HIV positive attendees of central HIV clinic, Colombo, Sri Lanka
<i>- Dr D O C de Alwis, Consultant Venereologist</i>

Sexual health and related vulnerabilities among male to female transgender populations in Western Province of Sri Lanka

- Dr Damindu Thanthree, Senior Registrar/ Venereologist

Patient satisfaction of services provided by doctors at HIV clinic – NSACP

- Dr Thanuja Peiris, Senior Registrar

Management of Syphilis among genitourinary medicine clinic attendees in Norwich, England

- Dr M K S H Jayasena, Acting Consultant Venereologist

At the end of the day, participants were provided with home work for developing the abstracts on the titles identified by the respective participants, suggested to form a good title for the exercise on helpline, etc.

Dr T Ilanchezhian shared the logistics announcements and informed the team to plan for the recap on the second day morning.

4.2. Proceedings of Day 2 – (26th May 2019)

4.2.1. Recap

With the brief introduction and welcome note by Dr T Ilanchezhian, Dr Niranjana coordinated the recap session, requesting each participant to share what we have learnt on day 1 and share the key learnings. In continuation of this, participants shared their important topics covered and aspects of learning. Some of the learnings highlighted by the participants will include:

- ◆ How we can create an abstract with less words, without compromising the content?
- ◆ How to create a good attractive title?
- ◆ Principles of Scientific Writing.
- ◆ Learnt that, every word in Scientific Writing is critical.
- ◆ How to take efforts to attempt/ concentrate in Scientific Writing with more focused manner and acquiring the skills?
- ◆ Learnings on importance of secondary review.
- ◆ Understood the kinds of authorships.
- ◆ Things to be avoided in Scientific Writing.
- ◆ How to develop a title?
- ◆ Selection of titles for development of abstracts, etc.

In continuation of the recap, Dr Niranjana shared the following:

- ✘ **Title, Abstracts and Authorship – these three parts covered on day 1.**
- ✘ **Title is the content of the paper in the fewest words.**
- ✘ **Basically, abstracts answer in three questions:**
 - **What was the research question?**
 - **How deep you investigate/ do it?**
 - **What did you find in it (Results)?**

The above three questions need to be considered for abstract development

4.2.2. Session wise reports on day 2

Title	
• <i>Writing the Introduction Section</i>	
Methodology	Time
• Presentation & Practical Exercise	0930 - 1115 hrs
Facilitators	
<ul style="list-style-type: none"> • Dr Yujwal Raj, Technical Advisor (SI), VHS-CDC Project • Dr Niranjan Saggurti, Consultant, VHS-CDC Project • Dr Ariyaratne Manathunge, Consultant-Venereologist, NSACP • Dr T Ilanchezhian <i>alias</i> Dr IC, Senior Technical Advisor, VHS-CDC Project 	

In continuation of the recap session, Dr Yujwal Raj lead the session on “Writing the Introduction/ Discussion Section” supported with exercise. He shared the purpose of introduction as:

- ◆ Gives background or context of study
- ◆ Reviews knowledge on topic
- ◆ Justifies need for the study
- ◆ Provides information on study objectives and hypothesis

He also explained about the organization of the contents as: broad issues, immediate problem, justification for study and objectives/hypothesis of study. Dr Yujwal Raj has also explained the details on writing the background and context; study background; reviewing knowledge; what to cite; justifying need for study; general type and objective of the study; what not to include; etc.

- ◆ Writing the Background & Context:
 - ✗ Brief introduction to the subject (HIV/AIDS epidemic, prog response, intervention, etc.).
 - ✗ Narrow down to the research area.
 - ✗ Past & Current position of the issue – quote evidences from authentic publications (Papers, reports, articles, etc.).
 - ✗ Context for the study.
 - ✗ Rationale/ Justification of need for the study; How does the study contribute to the existing body of knowledge & to the ongoing efforts – **Importance, Relevance, Usefulness.**
 - ✗ Previous similar studies & their outcomes; Uniqueness of this study.
 - ✗ Referencing.
 - ✗ Brief & to the point; Not too elaborate;
- ◆ Study background:
 - ✗ Introduces the study topic
 - ✗ Start with broad issues and move to the immediate problem:
 - *Broad issue:* “Antenatal care is an essential ingredient in reducing infant mortality.”
 - *Immediate problem:* “Senegal has had an antenatal program since 2000 but no data are available to show the program’s effects.”

- ◆ Reviewing Knowledge:
 - ✘ Relevant papers should be cited throughout the introduction section:
 - “There is widespread concern that emergency contraception will lead to more risk-taking.¹⁻⁸ Small studies show no increase in risky behavior,⁹⁻¹¹ but these studies lack outcome data.”
 - Note: 1-11 represent citations in the text.*
- ◆ What to Cite?
 - ✘ *Do cite* the papers written on your specific research topic.
 - ✘ *Do not cite* well-known facts (“Maternal mortality is higher in developing countries than in Europe”) or articles not read.
- ◆ Justifying Need for Study:
 - ✘ The justification follows the general and immediate problems and a review of current knowledge that supports the need for the study:
 - “Because no studies to date have reported outcomes, we examined....”
 - “Evaluation of the results of the ANC program was necessary to develop future programs.”
- ◆ General Type and Objectives of Study:
 - ✘ *General type of study:*
 - “We conducted an experiment to determine if the helpline...”
 - “We surveyed the attitudes and practices...”
 - “We established the helpline and examined the kind of issues...”
 - ✘ *Objectives or hypotheses immediately following study type:*
 - “The objective was to determine if availability of contraception resulted in higher STI rates.”
- ◆ What not to include?
 - ✘ **Do not** include information that is not directly relevant to your study:
 - ✘ Problems other than the one being examined
 - ✘ General information about the country
 - ✘ Details of the research design

Exercise: Dr Yujwal Raj provided exercise and shared the soft copy of the exercise and requested each participant to review the entire exercise, revise the material, by eliminating elements that do not belong to the introduction.

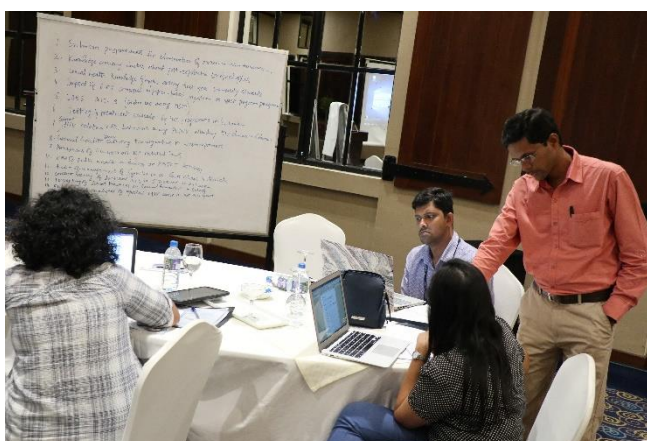
- ☞ Suggested to review the exercise in track changes or change the color of the text for elimination.
- ☞ Eliminate the content which need not be included as part of the introduction.
- ☞ Prioritize the content for introduction, etc.

After each participant reviewed as an exercise, the following activities has been undertaken:

- ☒ Projected the exercise.
- ☒ Editing was done line by line with the suggestions from participants.
- ☒ Eliminated the elements that do not belong the introduction.
- ☒ Edited the remaining content.
- ☒ Converted as an abstract by ensuring number of words, continuity, etc.

Through the process, the team has developed a model abstract by sharpening, editing, etc.

This hands-on experience has enabled the participants to review, edit and develop a comprehensive abstract with limited words without changing the context for effective dissemination.



The facilitators conducted Simulation Games along with physical exercise for energizing and ensuring active participation.

Tea Break: 1115 – 1130 hrs

Title	
• <i>Writing the Methods Section</i>	
Methodology	Time
• Presentation & Practical Exercise	1130 - 1330 hrs
Facilitators	
<ul style="list-style-type: none"> • Dr Niranjan Saggurti, Consultant, VHS-CDC Project • Dr Yujwal Raj, Technical Advisor (SI), VHS-CDC Project • Dr Ariyaratne Manathunge, Consultant-Venereologist, NSACP • Dr T Ilanchezhian <i>alias</i> Dr IC, Senior Technical Advisor, VHS-CDC Project 	

Dr Niranjan conducted a session on “Writing the Methods Section”. He posed questions on how to write methods section, what are all aspects to be covered in this section, etc. This has facilitated interactions on how to write methods section. In continuation of this, Dr Niranjan presented the slides on Writing the Methods Section. He has shared and explained the following;

- Purpose of Methods Section
 - ✗ Describes how study was designed, conducted, and analyzed
 - ✗ Allows reader to judge validity of procedures
 - ✗ Provides information to replicate study
- Methods Section Formula for an Intervention Study
 - ✗ Design, participants, including informed consent
 - ✗ Independent variables (intervention), materials, procedure, time
 - ✗ Dependent measures (outcomes)
 - ✗ Intervention monitoring

- ◆ Study Group and Design (Contents and Sequence)
 1. Participants
 2. Informed consent
 3. Design used
 - A retrospective survey was conducted
 4. Sample size, if relevant
 5. Stratification, if used
 6. Any special design considerations
- ◆ Materials and Procedure (Contents and Sequence)
 1. Interventions
 2. Information about study implementation
 3. Cases & controls
 4. Case definitions – Inclusion/ Exclusion criteria
- ◆ Dependent & Independent Measures (Contents and Sequence)
 1. Outcome variables and how measured
 2. Independent variables – how measured
 3. Categorize variables, if applicable
 4. Confounding variables, if any, considered
 5. Other computed variables, critical for analysis and results
- ◆ Intervention Monitoring
 - ✗ In the field, a problem is poor implementation of the intervention
 - ✗ Section presents steps taken to monitor implementation – Quality Control Measures
 - ✗ First part of Results Section discusses degree of implementation

Further, Dr Niranjana has informed that: Do not include the background information; examples of materials used in study and results in the methods section. In continuation of this, he highlighted that, the methods section in general:

- ◆ **Be precise:** Specify the exact number of days and hours of training, for example
- ◆ **Be concise:** Use short simple sentences. Can use standard jargon such as “randomized block design” and acronyms like “ANOVA”

Dr Niranjana provided clarifications to the participants pertaining to writing the methods section.

Exercise: Dr Niranjana provided exercise on writing the methods section and provided the following steps to be followed:

- ϕ Each participant is requested to go through the examples provided in the exercise.
- ϕ Requested to place them in the correct sub-section based on the information.
- ϕ The sub-section in the methods will need to be grouped into four categories such as study group & design, materials & procedures, dependent measures and monitoring the intervention.

Based on the suggestions provided, each participant reviewed and grouped under the sub-sections and attempted in developing methods section through the process of learning by doing.

The facilitator projected the exercise, with the involvement, interactions and grouped under each sub-section. The participants also realized the importance of writing the methods section and what information need to be included under each sub-section.



The answer key and final grouping undertaken by the participants are:

The intervention group received extra training in the use of an algorithmic family planning counselling/ recruitment tool in addition to normal refresher training. The control group received only refresher training.	Materials & procedures
The independent variable was an algorithm.	Materials & procedures
Using a coin toss, the first pair was randomly assigned to the experimental and control groups, alternating for subsequent pairs.	Study group & design
Each group was measured to determine if the nutritional status of the family changed.	Dependent measures
Eighty trained auxiliary nurse-midwives in the Kissimmee District participated in the study.	Study group & design
A pretest-posttest randomized block design was used with 40 blocks of two participants each.	Study group & design
Supervisors observed auxiliaries' use of the algorithm during home visits.	Monitoring of intervention
During home visits the auxiliaries were required to use the algorithm with each eligible woman to determine her family's nutritional status.	Materials & procedures
Six months prior to the study, all participants received a one-week course that included a two-hour module on home visiting.	Materials & procedures
Informed consent was obtained from all participants.	Study group & design
Standardized nutritional assessment forms were used to obtain the data.	Dependent measures

This presentation cum hands-on experience enabled the participants to understand how to write methods section on writing abstracts.

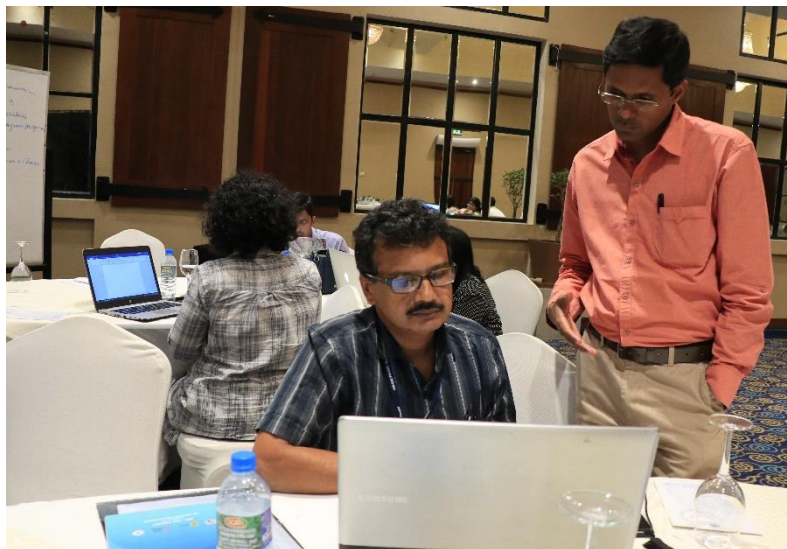
Lunch Break: 1330 – 1430 hrs

Title	
• <i>Presenting Data in Articles</i>	
Methodology	Time
• Presentation & Discussion	1430 - 1530 hrs
Facilitators	
• Dr Yujwal Raj, Technical Advisor (SI), VHS-CDC Project	

In continuation of the session on writing the methods section, Dr Yujwal Raj explained on how to present the data.

During the presentation, he has highlighted the following:

- ◆ Different ways of presenting the data will include: text, tables, figures and illustrative graphs. Data always will appear in the results section.
- ◆ If able to present in text, do not present the data in tables.
- ◆ Use the text wherever there are small amounts of data to be summarized.
- ◆ Do not repeat the data presented in table or figure in text.
- ◆ Tables are arrangements of numbers or words in columns and rows that display data or relationship.
- ◆ Parts of the table will include title, field, column headings, heading straddle rule, rows & subheads, footnotes, etc.
- ◆ Table title should be precise, eliminate unnecessary words and avoid repetition of headings of columns and rows.
- ◆ Figures and charts give visual descriptions of relationships between groups and numbers.
- ◆ Chart types will include bar chart, pie chart, staked bar chart, line graph, scatter plots, two-axis graphs.
- ◆ Common problems in charts will include: too many pie slices, bars, or segments; ambiguous labels; lack of contrasts between bars; and axes of unequal length.
- ◆ Table and graph should be self-explanatory considering many readers look at the graph than the write-up.
- ◆ Journals provides more importance to the words, so better to add charts and graphs.



- Use patterns and colours or anyone for better presentation.
- Infographics are being used in reports and documents. The journals are accepting the infographics but they are more concerned about the data, sources, etc.

In continuation of the presentation, discussions and clarifications were held.

Exercise: The facilitator shared three exercises such as:

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Presenting Data Exercise 1

- *Note:* The authors objective with the data in the table is to show how comparable the two groups are
- How many different variables are presented in the table?
- Keeping in mind, the objectives of the author, what is the best way of presenting the data?

National Training on Scientific Writing in HIV/AIDS

Exercise 2: What is graph supposed to convey? Where did study take place? What conclusions should the reader draw? Is design attractive?

Health Center "Obispo Indaburo"

Semester	IUD	Pills	Depo-Provera	Condom	Natural
1999 (Sem. 2)	10	5	2	1	1
2000 (Sem. 1)	15	5	5	2	1
2000 (Sem. 2)	15	5	5	2	1
2001 (Sem. 1)	18	5	5	2	1
2001 (Sem. 2)	12	5	5	2	1

National Training on Scientific Writing in HIV/AIDS

Exercise 3: Convert the data into text, table or figure

You have measured the number of new consultations in health facilities over 5 consecutive years from 1994 to 1998. There was an epidemic in 1994. In 1996, user fees were introduced in some of the health facilities. Taking 1995 as the baseline value (100), the new consultations in the two groups of the facilities were:

- 1996: 85 with fees; 120 without fees
- 1997: 85 with fees; 132 without fees
- 1998: 85 with fees; 138 without fees

In 1994, the year of the epidemic, consultations were 30% above baseline. Present these results as: a table, graphs and text.

Which is the most effective/appropriate means of presentation? Why?

The participants analysed the exercise and evolved plans on effective way of presentation of data. In addition, the graphs presented in the annual report was also projected, reviewed and analyse the best aspects in the graphs presented in the annual report. The exercises and the demonstration related to the presentation of data has enabled the participants to understand how data can be presented in Scientific Writing.

Title	
• <i>Writing the Results Section</i>	
Methodology	Time
• Presentation & Practical Exercise	1530 - 1700 hrs
Facilitators	
<ul style="list-style-type: none"> • Dr Niranjan Saggurti, Consultant, VHS-CDC Project • Dr Yujwal Raj, Technical Advisor (SI), VHS-CDC Project • Dr Ariyaratne Manathunge, Consultant-Venereologist, NSACP • Dr Joseph D Williams, Director Projects, VHS • Dr T Ilanchezhian <i>alias</i> Dr IC, Senior Technical Advisor, VHS-CDC Project 	

In continuation of the discussions and learnings on presentation on data in articles, Dr Niranjan conducted a session on “Writing the Results Section”. During the presentation, he highlighted the following:

- ◆ Purpose of the results section is to present the results of the study.
- ◆ In the results section, need not to include references.
- ◆ Results section is for presenting the results of the study only.
- ◆ Results section paragraph order will include: implementation of intervention data; participants’ characteristics; and substantive findings in order of research objectives and hypothesis.
- ◆ Present the data on extend to which intervention was actually implemented has planned.
- ◆ Participants characteristics will include social demographic characteristics, behavioral or practice related characteristics.
- ◆ Present the main results in the same order as hypothesis and objectives.
- ◆ Present the data that demonstrate the results of the intervention. Add reference to tables and figures.
- ◆ Interpret results in discussion section not in results section.
- ◆ Do not use words like very important, very interesting, etc., in results section.

Following the presentation, discussions were also held on the same.

In addition, participants were also encouraged to share their experiences based on the previous experience in presenting the results section in scientific papers, studies, etc.



Exercise: Handouts and soft copy of the abstract on “Addressing Sexual and Reproductive Health Needs of Adolescents: Telephone Helpline Experience” was provided to the participants to review the article, rewrite the results section according to the objective specified by considering the following:

- ☞ Is there any data on implementation?
- ☞ Is there data available on characteristics?
- ☞ Is there data available in order of objectives?

This exercise has helped the participants to understand how to write results section with practical experiences.

Title	
• <i>Work on Individual Papers</i>	
Methodology	Time
• Discussions	1700 - 1830 hrs
Facilitators	
<ul style="list-style-type: none"> • Dr Ariyaratne Manathunge, Consultant-Venereologist, NSACP • Dr Joseph D Williams, Director Projects, VHS • Dr Niranjana Saggurti, Consultant, VHS-CDC Project • Dr Yujwal Raj, Technical Advisor (SI), VHS-CDC Project • Dr T Ilanchezhian <i>alias</i> Dr IC, Senior Technical Advisor, VHS-CDC Project 	

In the first day session titled Work on Individual Papers, through a process 11 titles for development of abstracts were volunteered by the participants. In this session, the following instructions were provided to the participants as a part of the exercise:

- ◆ Each participant will be working on the title identified.
- ◆ The exercise will be for 90 minutes in which first one hour will be for development of abstracts on the title suggested. Next 30 minutes will be allocated for reviewing any of the five abstracts.
- ◆ Presentation of five abstracts by participants, review by facilitators & participants.
- ◆ Incorporating changes in the abstract and improving further.
- ◆ Based on practical exercise in reviewing & editing the abstracts, other participants will incorporate needful changes, improve further in the abstracts developed.
- ◆ All the participants will make an attempt to develop the abstract based on the guidelines provided and hands-on experiences provided.

This process of practical experience supported with the hands-on experience has enabled the participants to develop abstract through a process. This exercise has also provided confidence, knowledge and skills in developing the abstract in the topic selected. The individuals were asked to continue to work in further development of abstracts both during the training and as a follow-up of the training. Also the facilitators requested the participants to consider all the guidelines and continue to practice in developing abstracts on regular basis.

Dr T Ilanchezhian informed that recap session will be held on 3rd day morning. Requested the members to go through the soft copy of the presentations shared through e-group. Also suggested to undertake home works in further developing the abstracts.

4.3. Proceedings of Day 3 – (27th May 2019)

4.3.1. Recap

Dr T Ilanchezhian welcomed the participants and requested Dr Niranjan to facilitate the session on recap. The participants shared the following learnings based on the day 1 & 2 learnings:

- ◆ Learned about principles of authorship.
- ◆ How to frame a title and significance associated with.
- ◆ Various methods of undertaking review of literature and how to present.
- ◆ Information on authorship.
- ◆ Structured and unstructured abstracts.
- ◆ Abstract title is the miniature version of the content.
- ◆ The introduction chapter should be broad, specific problem, rationale, objectives, etc.
- ◆ Methods section should have designs, participants, ethical aspects, sampling size, etc.
- ◆ How to write results section (intervention coverage, participants characteristics, findings of the results in order or priority).
- ◆ Data presentation should be self-explanatory, number of tables according to the objectives & hypothesis, one table for characteristics, two tables for hypothesis (maximum 4 tables), create table with multiple variables.
- ◆ Abstract is a miniature version of the paper.
- ◆ Content of the paper in the fewest word is title (not too long, not ambiguous, not vague, not too short), etc.

This recap session has helped in recapping the two days of the learning, setting the tone for the 3rd day training program and providing clarity to the participants.

4.3.2. Session wise reports on day 3

Title	
• <i>Writing the Discussion Section</i>	
Methodology	Time
• Presentation & Practical Exercise	0900 - 1030 hrs
Facilitators	
<ul style="list-style-type: none"> • Dr Niranjan Saggurti, Consultant, VHS-CDC Project • Dr Yujwal Raj, Technical Advisor (SI), VHS-CDC Project • Dr Ariyaratne Manathunge, Consultant-Venereologist, NSACP • Dr Joseph D Williams, Director Projects, VHS • Dr T Ilanchezhian <i>alias</i> Dr IC, Senior Technical Advisor, VHS-CDC Project 	

Dr Niranjan has conducted a detailed presentation cum deliberations on “Writing the Discussion Section”. During the presentation, he explained the following:

- ◆ Purpose of the discussion section is to tell the reader why one should care about the results of the study
- ◆ In the discussion section, Do’s will include:
 - ✗ Be honest and state limitations
 - ✗ Discuss implications of findings
 - ✗ Explain why findings are different from literature
 - ✗ Mention if results are used/ not used by program
- ◆ In the discussion section, Don’ts will include:
 - ✗ Introduce new data or analysis
 - ✗ Make claims not strongly supported by your data
 - ✗ Discuss works in progress
- ◆ Further research is often recommended, because the author has nothing to say.

Further he also explained on formats, main conclusions, limitation, comparison with other researchers, highlighting the implications, suggest other researchers and other related details pertaining to discussion section.

National Training on Scientific Writing in HIV/AIDS	<p>Main Conclusions</p> <ul style="list-style-type: none"> • First sentence states the main conclusion(s): “The study confirmed that micro-credit recipients attending an experimental orientation were more likely to repay loans than recipients attending a standard orientation.” • Second sentence summarizes data supporting main conclusion: “The experimental group had twice the repayment rate as the control group.” 	National Training on Scientific Writing in HIV/AIDS
	<p>Comparison With Other Research</p> <p>Are findings consistent or inconsistent with other studies?</p> <p>“Unlike other studies, we found that special training was effective. This finding may be due to the fact that other studies did not randomly assign subjects.”</p>	

Exercise: In continuation of the presentation and discussions, the facilitator requested the participants to read the discussion section of the Telephone Helpline article. After reviewing the article, participants have eliminated the unwanted information in the discussion section, incorporated/ added, additional information. In addition, the participants have also reordered the sequence of the paragraphs to conform to the formula. This process has helped them to have a correct knowledge on how to write a discussion section and also gain needful skills through a process. The participants were provided with mentoring support and hands-on training in writing discussion sections. Participants were also asked to consider these experiences in developing abstracts of their own.

Title	
• <i>Responding to Reviewers and Editors</i>	
Methodology	Time
• Presentation & Discussion	1030 - 1100 hrs
Facilitators	
<ul style="list-style-type: none"> • Dr Yujwal Raj, Technical Advisor (SI), VHS-CDC Project • Dr Niranjana Saggurti, Consultant, VHS-CDC Project • Dr Ariyaratne Manathunge, Consultant-Venereologist, NSACP • Dr Joseph D Williams, Director Projects, VHS • Dr T Ilanchezhian <i>alias</i> Dr IC, Senior Technical Advisor, VHS-CDC Project • Mr Suneel Kumar Chevva, M&E Officer, VHS-CDC Project 	

Dr Yujwal Raj shared experiences on responding to reviewers and editors. As a part of sharing, he has highlighted the following:

- ◆ Before submitting a paper for publication: solicit colleagues' comments on your paper and make sure the paper conforms to the stylistic requirements of the journal.
- ◆ Role of the editor include: Decides if paper is suitable for journal and selects reviewers.
- ◆ Role of the reviewer includes: Writes a critique of the paper considering topic's importance, adequacy of methodology, strength of conclusions and even matters of style.
- ◆ Responding to Reviewers and Editors: Reviewers make one of three recommendations:
 - ✗ Accept or Accept with minor revision
 - ✗ Revise and Resubmit (major revision)
 - ✗ Reject
- ◆ Responding to Reviewers' Comments: The more responsive you can be, the greater the likelihood of publication:
 - ✗ Redo analyses
 - ✗ Change terminology
 - ✗ Add requested information

In continuation of the presentation, discussions and clarifications were held on responding to the reviewers and editors.

Exercise: Participants were provided with soft copy of the exercise: an example of reviewer’s comments. This reviewer’s comments include general comments, specific comments, along with responses for each of the review/ comments. The participants has reviewed the exercise and understood how to response to the reviewer’s comments. This exercise has helped in understanding how the reviewers are reviewing the abstracts/ papers, how to respond to the reviewer’s comments.

Tea Break: 1100 – 1115 hrs

Title	
• <i>Quoting Citations & References</i>	
Methodology	Time
• Presentation & Discussion	1115 - 1145 hrs
Facilitators	
<ul style="list-style-type: none"> • Dr Niranjan Saggurti, Consultant, VHS-CDC Project • Dr Yujwal Raj, Technical Advisor (SI), VHS-CDC Project • Dr Ariyaratne Manathunge, Consultant-Venereologist, NSACP • Dr Joseph D Williams, Director Projects, VHS • Dr T Ilanchezhian <i>alias</i> Dr IC, Senior Technical Advisor, VHS-CDC Project • Mr Suneel Kumar Chevvu, M&E Officer, VHS-CDC Project 	

In continuation of the discussions on Responding to Reviewers and Editors, Dr Niranjan handled a session on “Quoting Citations & References” with much focus on how to prepare references. The purpose of the reference section is:

- ◆ The reference section provides details about authorship and publication for materials cited in the article.
- ◆ The citations lead readers to the information you found.

The reference styles are:

- ◆ Follow citation style used by the journal
- ◆ Journals use a variety of styles
- ◆ Journals include their styles in the author’s guidelines
- ◆ Can also determine style by looking at articles in journal

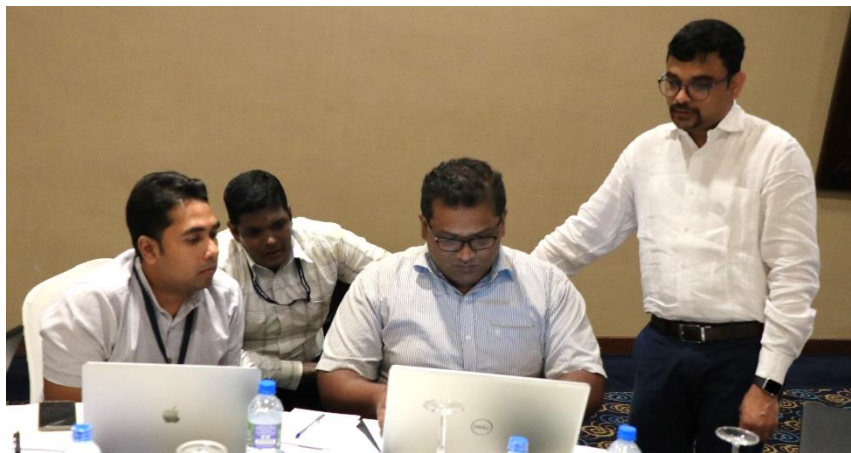
The general Citation Styles are:

- ◆ **Articles:** Buck, N. 2001. “Identifying neighborhood effects on social exclusion.” *Urban Studies*, 38, 252-260.
- ◆ **Books:** Chen, Y. K. 2004. *Economic Analysis* Englewood Cliffs, NJ: Prentice Hall.
- ◆ **Web Publications:** Khan, S. *Maternity patient expenditures in Bangladesh. Cost Effectiveness and Resource Allocation*,1. 2005. 3.1. <http://www.resource-allocation.com/content/3/1/1>

Dr Niranjan suggested to follow the citation style used or recommended by the journal. The citation varies from journals to journals. The guidelines of the respective journals may also need to be taken into account while writing reference.

Title	
• <i>Participants Remarks on the Scientific Papers</i>	
Methodology	Time
• Discussion	1145 - 1230 hrs
Facilitators	
<ul style="list-style-type: none"> • Dr Niranjana Saggurthi, Consultant, VHS-CDC Project • Dr Yujwal Raj, Technical Advisor (SI), VHS-CDC Project • Dr Ariyaratne Manathunge, Consultant-Venereologist, NSACP • Dr Joseph D Williams, Director Projects, VHS • Dr T Ilanchezhian <i>alias</i> Dr IC, Senior Technical Advisor, VHS-CDC Project • Mr Suneel Kumar Chevva, M&E Officer, VHS-CDC Project 	

During the day 1, the participants finalized the topic in which they wish to develop the abstract. On day 2, the participants were provided with exercise for developing the abstract in their respective topics. Based on the abstract developed and fine-tuned as a part of the



home work, each participant developed the pre-draft version of the abstract. Each participant was requested to make a presentation on the abstract for about 3-5 minutes each and the Facilitators and Co-Facilitators have shared the suggestions on the abstracts. Also, encouraged the peer review process to share the positive aspects and suggestions in the abstracts. In addition, the facilitators extended support in fine-tuning the sentences how it can be critically improved for effective presentation and dissemination. As a part of the review process, the following three aspects have been considered:

- ◆ Key learnings from the workshop
- ◆ Key aspects documented in their article
- ◆ Key things to work upon after the workshop

Overall, 11 participants developed their abstracts. Some of the participants jointly developed the abstract. Considering the time limits, five abstracts were presented, reviewed and provided feedback by the team.

This process has helped the participants to overall gain the knowledge, skill and confidence in developing the abstract.

Session on Next Steps: Dr Yujwal and Dr Ariyaratne facilitated session on “Next Steps” as a follow-up of the training on Scientific Writing.

The **role of SIMU** will include: providing needful guidance to each participant and motivate in developing and finalizing the abstract initiated, providing permission to use data, encouraging peer review process, providing need based mentoring and handholding to the individuals based on the needs, networking the trained team and sustaining the team, continue to encourage and use the trained team for developing abstracts on various titles, etc.

The **role of VHS-CDC Project** will include: sharing the related additional reading materials, providing strategic technical assistance to participants on need based, review and providing feedback on the abstracts submitted, conduct follow-up mentoring support meeting if required, etc.



The **role of participants** will include: completion of the abstract initiated, submitting the abstract to SIMU, obtaining feedback from the co-participants, initiating efforts in developing additional abstracts, continuing and sustaining the knowledge and skills on developing abstracts, submission of papers to the conferences, peer review journals and other opportunities. All participants agreed to submit the improved version of abstract on or before 15th Jun'19 to SIMU for submitting the consolidated abstracts with VHS-CDC.

Post-Assessment: VHS-CDC Project administered pre-assessment on the first day before commencing the training proceedings. Similarly, administered post-assessment by providing a standardized tool with each participant. Each participant has filled in and submitted the post-assessment form. The project team has analysed the pre & post-assessment (the analysis provided in the chapter Training program – An overview in the sub-section Training evaluation and effectiveness).

Post-Training Evaluation: VHS-CDC Project has administered post-training evaluation by using the 5 point-scale covering the aspects such as: course content, structure and process of training, trainers & mentors – knowledge and delivery style, facilities and amenities and overall feedback. Overall, the evaluation tool has five sections with 29 questions. Each participant was encouraged to fill in unanimously to understand the overall feedback on the training program. The same has been analysed and presented in the chapter Training program – An overview in the sub-section Post-Training evaluation and effectiveness).

4.3.3. Valedictory Function

NSACP and VHS-CDC Project jointly organized National Training on Scientific Writing in HIV/AIDS for three days. As a part of this three-day training, valedictory function was held between 1300 – 1400 hrs.

On behalf of NSACP, VHS-CDC Project and on behalf of Director Projects-VHS, Dr T Ilanchezian welcomed the chief guest and participants for the valedictory function. During the welcome address, he also highlighted the process involved in conducting this training program, support extended by NSACP, efforts initiated by VHS-CDC Project and team, etc.



In continuation of this, Dr Piyumi and Dr Iresh shared the feedback on behalf of the participants.



“I have participated in this three-day training program. Appreciate the VHS-CDC team for the effort undertaken in building the capacities of the SIMU team through training on Operational Research and Scientific Writing. This training on Scientific Writing was very much useful in acquiring knowledge and skills on Scientific Writing, further enhancing professional skills in Scientific Writing, motivation to integrate Scientific Writing as a part of the ongoing activities for effective dissemination at different levels. The skills imparted will be of permanent use

for continue to disseminate best practices, program achievements and other initiatives. Thanks to VHS-CDC team.”

**- Dr S Beneragama,
Consultant Epidemiologist, NSACP.**



“Training on Scientific Writing is need of the hour and contributed in further enhancing the capacities of Scientific Writing of every individual including me. This training provided knowledge, steps involved in developing Scientific Writing, importance of each elements in developing the abstracts, how to review and how to make it more impressive and attractive. Especially this has provided opportunity to gain hands-on experience from the professionals at every stage of writing. This has developed individual and group skills. Both technical sessions and hands-on training were well thought and conducted. Also appreciate the ideal venue selected for creating an enabling environment for conducive learning with motivation.

Thanks to VHS-CDC team”

**- Dr Iresh Jayaweera,
Senior Registrar, NSACP.**

On behalf of the training team, Dr Niranjana Saggurthi, Consultant, VHS-CDC Project has delivered a felicitation and thanked VHS-CDC Project for organizing such a meaningful training for the team for effective dissemination, conducting the training in a very good atmosphere, demonstrating the collaborative initiative and so on. Also, requested each of the trained Scientific Writers to continue to practice in developing abstracts, improving the required skills, utilize



the peer review process within and between the team. Also requested SIMU to extend needful mentoring to the trained team and networked them for continuous engagement in Scientific Writing.



Dr Joseph D Williams, Director Projects, VHS has delivered Introductory Note and Special Address. During the address, he has recalled the efforts and process undertaken for developing this technical collaboration initiatives between CDC and SIMU. He also briefly explained the roll of technical implementing partner - VHS-CDC Project in this technical collaboration initiatives. Further, he mentioned that, VHS-CDC Project is in the process of contributing for developing systems, capacity building, documentation, dissemination, etc. VHS-CDC Project has extended TA in undertaking Situational Assessment, Documentation of Best Practices, Dissemination of Best Practices, development of Technical Report on Dashboard, Training

Need Assessment for evolving evidence-based capacity building initiatives, etc. Also, informed that, VHS is closely working in developing a dashboard for presenting the data in infographics for easy understanding, effective dissemination and leading for programmatic decision making.



Trust that, this training was very useful and VHS-CDC has provided this training by engaging trained experts and by using the internationally accepted course materials.

Thank Dr Ariyaratne for his continued guidance and cooperation. Also thank the Director-NSACP and entire SIMU team.



Dr Rasanjalee Hettiarachchi, Director, NSACP delivered valedictory address and during her speech “I have participated and undergone this Scientific Writing process. This training was very useful for me as a leader of the organization and also for the NSACP team involved in data management. This training has been conducted at right time by identifying the real needs of the NSACP. NSACP has very good data & best practices and due to lack of Scientific Writing skills, unable to undertake continuous and systematic efforts. This training will be of useful in demonstrating Scientific Writing, dissemination at national and international forums, marketing our good works, etc.

Thanks to the trainers, VHS-CDC team, CDC and SIMU team for the efforts undertaken in successful conduct of this training program.”



Dr Rasanjalee Hettiarachchi, Director, NSACP, Dr Ariyaratne Manathunge, Consultant-Venereologist, NSACP and Dr Joseph D Williams, Director Projects, VHS jointly distributed the certificates for each one of the participants underwent training on Scientific Writing.

On behalf of VHS-CDC Project, Dr Joseph D Williams honoured the Director-NSACP, trainers and SIMU Coordinator for the cooperation extended in successful conduct of this training. Director-NSACP provided a memento to Director Projects, VHS for acknowledging the Technical Assistance and conduct of this training program.



Dr Ariyaratne has delivered vote of thanks as a part of the conclusion of the training program. Dr Ariyaratne has thanked Dr Joseph D Williams for his leadership and support in this TA initiatives. He thanked the Facilitators and Co-Facilitators for the coordinated effort in designing the training, developing training materials, conducting the training, providing hands-on experience, providing soft copy of the presentations, developing resource books and so on. This training is enhanced knowledge and skills supported with mentoring and resource kit. Thanked Dr T Ilanchezhian, Mr B Kamalakar, Mr Suneel Kumar, Mr Sathyaraju and the team

for the support. Also thanked the Coordination Team from SIMU and VHS-CDC Project team for their systematic planning and coordination. It is a joint initiative and lead to successful results for effective dissemination.



In continuation of the Valedictory function, group photo session was held.

Certificate Distribution





Honoring Moment



Photo Credit: *Dr K A M Ariyaratne, Consultant-Venereologist and Coordinator-SIMU, NSACP
Dr S Muraliharan, Medical Officer/ Planning, NSACP*

ANNEXURE

5. ANNEXURES

5.1. Agenda

OBJECTIVES: To enhance the capacity of the NSACP SI teams in principles of scientific writing & development of journal articles based on HIV/AIDS programmatic data and learnings.

OUTCOMES:

1. Built the knowledge & skills of NSACP Program Managers in the formulation of an argument, conceptualization of a problem, research design, methodology, results and their interpretation.
2. Made participants understand the purpose and content of each element of a journal article.
3. Helped the participants navigate through the process of writing an article leading to publication in national and international journals.
4. Developed draft journal articles of acceptable standards on the identified topics of programmatic relevance.
5. Evolved plan for follow up and development and submission of journal articles to peer-reviewed journals (supported with mentorship plan).

FACILITATORS:

Core Facilitators: VHS-CDC Project Consultants	Facilitators:
<ul style="list-style-type: none">☞ Dr Niranjan Saggurti, Consultant, VHS-CDC Project.☞ Dr Yujwal Raj, Technical Advisor (SI), VHS-CDC Project.	<ul style="list-style-type: none">☞ Dr Ariyaratne Manathunge, Consultant-Venereologist, NSACP.☞ Dr Joseph D Williams, Director Projects, VHS.☞ Dr T Ilanchezhian <i>alias</i> Dr IC, Senior Technical Advisor, VHS-CDC Project.

SCHEDULE

Time	Session	Session Type	Details	Facilitator
DAY 1 – 25/05/2019 (SATURDAY)				
0830 – 0915	Registration			
0915 – 1000	Welcome & Introduction		Welcome address Introduction of participants/ facilitators Objectives & Expected Outcomes of the workshop	Dr Rasanjalee Hettiarachchi, Director, NSACP Dr Ariyaratne Manathunge Dr Joseph D Williams Dr T Ilanchezhian Dr Niranjana Saggurthi Dr Yujwal Raj
1000 – 1045	Introduction of topics by Participants	Interactive session	Participants introduce their topic on which they intend to develop a scientific paper – 2 minutes per participant	Participants
1045 – 1115	Introduction to Scientific Writing Course	Presentation & Facilitated Discussion	Outline, broad plan & principles of the Training on Scientific Writing	Dr Niranjana Saggurthi
1115 – 1130	Tea Break			
1130 – 1200	Principles of Authorship	Presentation & Discussion	Guidelines; Examples; Exercise	Dr Yujwal Raj
1200 – 1245	Publication Ethics & Successful Writing	Presentation & Discussion	Ethical issues in scientific writing; Guidelines for successful scientific writing	Dr Niranjana Saggurthi
1245 – 1315	Framing an Appropriate Title	Presentation & Discussion	Qualities of a good title; Good vs bad titles; Analysis of examples	Dr Yujwal Raj
1315 – 1400	Lunch Break			
1400 – 1430	Framing an Appropriate Title for the Scientific Article	Practical Exercise	Participants work on a tentative title for their scientific paper	Dr Ariyaratne Manathunge Dr Joseph D Williams Dr Niranjana Saggurthi Dr Yujwal Raj Dr T Ilanchezhian
1430 – 1600	Writing Abstracts	Presentation & Practical Exercise	Principles of writing scientific abstracts; Practical Exercise	Dr Niranjana Saggurthi & Facilitators

Time	Session	Session Type	Details	Facilitator
1600 – 1730	Review of Literature & Problem Conceptualisation	Presentation & Discussion	Methods of Lit Review; Steps in problem conceptualisation	Dr Yujwal Raj
1730 – 1830	Work on Individual Papers	Individual/ Group Work	Participants work on their individual papers & develop the sections; Consultation with mentors	Dr Ariyaratne Manathunge Dr Joseph D Williams Dr Niranjana Saggurthi Dr Yujwal Raj Dr T Ilanchezhian
DAY 2 – 26/05/2019 (SUNDAY)				
0900 – 0930	Recap of Day 1			Dr Ariyaratne Manathunge Dr Joseph D Williams & Participants
0930 – 1115	Writing the Introduction Section	Presentation & Practical Exercise	Principles; Examples Practical Exercise	Dr Yujwal Raj & Facilitators
1115 – 1130	Tea Break			
1130 – 1330	Writing the Methods Section	Presentation & Practical Exercise	Principles; Examples Practical Exercise	Dr Niranjana Saggurthi & Dr Ariyaratne Manathunge Dr Joseph D Williams Dr Yujwal Raj Dr T Ilanchezhian
1330 – 1430	Lunch Break			
1430 – 1530	Presenting Data in Articles	Presentation & Discussion	Tables; Graphs; Maps; Info graphics; Examples	Dr Yujwal Raj
1530 – 1700	Writing the Results Section	Presentation & Practical Exercise	Principles; Examples Practical Exercise	Dr Niranjana Saggurthi & Facilitators
1700 – 1830	Work on Individual Papers	Discussions	Participants work on their individual papers & develop the sections; Consultations with Mentors	Dr Ariyaratne Manathunge Dr Joseph D Williams Dr Niranjana Saggurthi Dr Yujwal Raj Dr T Ilanchezhian

Time	Session	Session Type	Details	Facilitator
DAY 3 – 27/05/2019 (MONDAY)				
0830 – 0900	Recap of Day 2			Dr Ariyaratne Manathunge Dr Joseph D Williams & Participants
0900 – 1030	Writing the Discussion Section	Presentation & Practical Exercise	Principles; Examples Practical Exercise	Dr Niranjana Saggurti & Facilitators
1030 – 1100	Responding to Reviewers and Editors	Presentation & Discussion	Editors feedback; Corrections; Additions; Correspondence	Dr Yujwal Raj
1100 – 1115	Tea Break			
1115 – 1145	Quoting Citations & References	Presentation & Discussion	Different systems & guidelines	Dr Niranjana Saggurti
1145 – 1230	Participants Remarks on the Scientific Papers	Discussion	Participants present for 3 min each on: Key learnings from the workshop Key aspects documented in their article Key things to work upon after the workshop	Participants
1230 – 1245	Next Steps		Role of various stakeholders; Mentors & Mentoring Plan; Timelines; Abstract development;	Dr Yujwal Raj Dr T Ilanchezhian
1245 – 1300	Post-assessment and post-training evaluation			
1300 – 1330	Valedictory Function		Feedback; and Certificate Distribution.	Dr Rasanjalee Hettiarachchi, Director, NSACP Dr Ariyaratne Manathunge Dr Joseph D Williams Dr Niranjana Saggurti Dr Yujwal Raj
1330	Lunch & Departures			

5.2. Training Need Assessment Form

1. Mention the category of personnel / officials proposed to participate in the training program and their key responsibilities.

Designation / category of persons	No. of participants	Key responsibilities

2. Whether the proposed participants has undergone any of the training on data presentation or scientific writing previously? **YES / NO**

If yes, please specify.

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3. What are all the expectations from the upcoming National training on effective dissemination of Strategic Information on HIV/AIDS including effective data presentation using graphs, infographics, and scientific writing? Please specify.

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5.3. Pre & Post Assessment Forms

(To be answered by the participants before & after the training.)

1. **Which of the following are key responsibilities of authors of a scientific paper?** ()
(A) Develop Study concept & design (B) Acquisition of data (C) Analysis of data
(D) All the above
2. **Which of following is an attribute of good title for journal article?**()
(A) Too long title (B) Ambiguous title (C) Crisp & clear title
(D) Title with abbreviations
3. **Which of the following is not included in an Abstract?** ()
(A) Research objectives & questions (B) Survey of related literature
(C) Methods of analysis (D) Key results
4. **Which of the following is not included in the Introduction section of an article?** ()
(A) Background context (B) Immediate problem
(C) Justification for the study (D) General info about the country
5. **The purpose of methods section in a scientific article is** ()
(A) Describe study design (B) Describe analysis plan
(C) Enable reader to judge the validity of procedures (D) All the above
6. **Description of participants in a study, their case definitions & eligibility, is included under which section of a scientific article?** ()
(A) Introduction (B) Methods (C) Results (D) Abstract
7. **Which of following is not part of methods section of an article?** ()
(A) Independent variables (B) Sample size (C) Stratification
(D) Degree of implementation
8. **Which of the following is used to present data over time?** ()
(A) Line graph (B) Bar graph (C) Scatter plot (D) Stacked bar
9. **Which of following is better way of presenting data in a paper?** ()
(A) Text form (B) Table form (C) Graphs (D) As appropriate to the data
10. **Which of the following are not part of the conclusion section?** ()
(A) Limitations (B) Recommendations (C) Study Design (D) Main findings

5.4. Training Evaluation Form

Please rate your level of agreement with each of following statements on a scale of 1-5:

5	4	3	2	1	
Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	
					Rate
Course content					
I understood the learning objectives well.					
The course content met my expectations & was in line with the learning objectives.					
I found the course material (slides, handouts, exercises, etc.) useful & easy to follow.					
Training received was adequate for my position/ experience.					
The course will directly or indirectly improve the performance of my duties.					
I am clear about where to find answers to questions that I have about scientific writing.					
Structure & process of training					
The training sessions are well structured & appropriately scheduled.					
Instructional methods used during training are effective.					
Participation and interaction were encouraged during the sessions.					
The speed/ pace at which the training was conducted was appropriate.					
I was comfortable with the length of the sessions & length of the workshop.					
Group works/ hands-on exercises are well structured with clear instructions.					
Guidance & mentoring support was adequately provided during group works/ exercises.					
Adequate chance was given for participants to ask questions and resolve doubts.					
There was ample opportunity to practise the skills I am supposed to learn.					
I received adequate feedback from the facilitators during the practice sessions.					
Trainers & Mentors – Knowledge & Delivery Style					
The facilitators were knowledgeable on the subject matter.					
The facilitators explained the concepts clearly and in an understandable way.					
The facilitators effectively handled the questions that were asked.					
The examples & experiences quoted by the trainers were relevant & apt to my situation.					
I was well engaged during the sessions/ The sessions were kept alive, interesting & interactive.					
How would you rate their facilitation skills overall, on a scale of 5?					
Facility & Amenities					
The venue and seating arrangement was comfortable and suitable for the training.					
The environment was free from distractions and conducive to learning.					
The audio-visual set up was good and clear.					
The quality of food was good.					
Overall					
How will you rate the training, overall, on a scale of 5?					
I am satisfied with the training course.					
I will recommend this course to others.					

What did you like about the course?

List the three most important things you learnt from this training.

How can we strengthen and improve this training further?

Would you recommend including any other topics in the training course?

Any other comments.

5.5. Certificate



MINISTRY OF
HEALTH
SRI LANKA



NATIONAL
STD/AIDS
CONTROL
PROGRAMME



Certificate of Participation

This is to certify that Dr/Mr/Ms.....

from..... has successfully participated in the

“National Training on Scientific Writing in HIV/AIDS”

held from 25-27, May 2019 at Wadduwa, Sri Lanka.

Dr. Joseph D Williams

Director - Projects
VHS, Chennai

Dr. Ariyaratne Manathunge

Consultant - Venereologist
NSACP, Sri Lanka

Dr. Rasanjalee Hettiarachchi

Director
NSACP, Sri Lanka

VHS-CDC Project

The Voluntary Health Services (VHS), India
Supported by Centers for Disease Control and Prevention (CDC/DGHT-India)
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