

## FROM A FACE-TO-FACE TO AN E-LEARNING COURSE

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In order to educate physicians in clinical management of HIV infection the Institute of Tropical Medicine in Antwerp (ITMA) organizes every summer the Short Course on Antiretroviral Therapy (SCART), a three week training on HIV/AIDS care for medical doctors working in resource-poor countries. As a result of limitation in training capacity and lack of scholarships only 45 physicians can be admitted to the course every year and therefore many applications have to be refused. In response to the high need for training of health care workers in resource poor settings and to the request of continuing medical education from the former SCART participants this short course will be launched as a distance learning education program (eSCART).

A Learning Management System is used to offer the content and to track and manage the students. The content is built on the didactical approach of problem based learning with clinical cases, tutorials, additional readings and self-assessments. A workload of 4 study hours per week has been calculated, effectively converting the current 3-week face-to-face course to a 5-month e-learning training.

During this year's face to face SCART two modules of the online course (natural evolution and drug interactions) could be tested and were evaluated by questionnaire by 41 course participants. Both modules started with case-related questions, but the tutorials were offered in quite a different way (visual-audio based versus text based). The assessment showed very similar scores regarding the teaching methodology, the balance between theory and practice, the lectures and the case-studies, with all scores being  $\geq 4$  on a scale from 1 (poor) to 5 (excellent). Although over 90% of the students stated to use computers daily and 88% to use the internet daily, technical support from a tutor to navigate through the module was needed by 46% of the students for one module and by 64% for the other module. Time needed to complete the modules was very different among the students. One important lesson learned from this first test of our online modules is the high importance of starting an online course with comprehensive training in using and navigating through the learning management system. Further, there was a request for the possibility of printing the course material. Shorter sequences of case-related questions and lectures seem to be preferred by the majority of the students.

Overall it can be stated that these first results of the evaluation of our online modules are encouraging, showing a high acceptance and allowing students to get trained at their own pace. E-learning is offering training independent from a location and a fixed time schedule and is therefore universally accessible.

Keywords: distance education, e-learning, HIV/AIDS, resource-poor settings