

Knowledge Synthesis and Translation Workshop

**and premiere of the Yukon First Nations Health
Promotion Spring School '07 Report and DVD**

Final Report



Arctic Health Research Network-Yukon

In partnership with

National Collaborating Centre for Aboriginal Health

May, 2008

Executive Summary

The Arctic Health Research Network-Yukon (AHRN-YT) co-hosted a workshop with the National Collaborating Centre for Aboriginal Health (NCCAH) to share information and ideas about Knowledge Synthesis and Translation (KST), and to premiere a report which the NCCAH contributed funds to produce.

Thirty-five participants were invited, including practitioners, policy makers, program developers, researchers and community-based organizations. The workshop included presentations by AHRN-YT and NCCAH, which are included in the appendices, as well as discussions about KST, which are summarized.

The workshop was well received, with recommendations for next steps including both topics and processes. The importance of accessible and relevant health knowledge/information at the community level, and information exchanges between communities, practitioners, and organizations/researchers, were highlighted.

Report produced by Jody Butler Walker & Norma Kassi, AHRN-YT. Funded by the Tri-Territorial Health Access Fund and the National Collaborating Centre for Aboriginal Health.

Table of Contents

Introduction.....	3
Participants.....	3
Agenda.....	5
AHRN-YT presentation.....	5
YFN Health Promotion Spring School '07 – overview.....	5
NCCAH presentation.....	6
Discussion – NCCAH.....	8
Sharing of YFN Health Promotion Spring School 07 Report.....	8
General Discussion.....	9
Evaluation.....	9
Next Steps.....	10
Conclusion.....	11
Appendices	
Appendix A: AHRN-YT PowerPoint presentation.....	12
Appendix B: NCCAH PowerPoint presentation	16
Appendix C: the 6 National Collaborating Centres.....	19
Appendix D: KST Backgrounder for policy and planners.....	25
Appendix E: Evaluation Summary	

Introduction

This Report summarizes a workshop that took place in Whitehorse on April 10th, 2008. The purposes of this workshop were:

- 1) to bring together practitioners, policy makers, decision makers and other health professionals to learn about the National Collaborating Centre for Aboriginal Health (NCCAH);
- 2) to share in the premiere of a knowledge translation product ***Yukon First Nations Health Promotion Spring School '07 Report and DVD***, which the NCCAH contributed funds towards the production and printing of; and
- 3) to identify next steps for Knowledge Synthesis and Translation activities in the Yukon.

The timing of this workshop coincided with a meeting of the Council of Yukon First Nations Health & Social Commission, which consist of the Directors of Health & Social from First Nations communities in the Yukon. On the afternoon of April 10th the ***Yukon First Nations Health Promotion Spring School '07 Report and DVD*** was distributed to the Commissioners, and information provided about the NCCAH.

Participants

Ginette Thomas, Managing Director, National Collaborating Centre for Aboriginal Health (NCCAH), U of Northern B.C., Prince George, B.C.

Norma Kassi, Arctic Health Research Network-Yukon

Jennifer Eskes, Dietician, Whitehorse General Hospital

Kimberly Hunter, Dietician, Whitehorse General Hospital

Jocylene Gautier, Alcohol and Drug Services, YTG

Jan Horton, Health and Social Services, YTG

Joanne Fairlie, ADM, Health and Social Services, YTG

Dr. Paula Pasquali, Health and Social Services, YTG

Gaye Hanson, Hanson and Associates

Larry Whitfield, Manager, Alcohol and Drug Services, YTG

Glenna Tetlich, Kwanlin Dun Wellness Program,
Whitehorse

Patricia St. James, WGH Nutrition Services, AHRN Board
Member

Laura Salmon, First Nations Health Program, Whitehorse
General Hospital

Shannon Duke, Consultant, Diabetes Nurse Educator
Sarah Sage, Child Development Centre
Alayne Squair, Child Development Centre
Dr. Valoree Walker, Social Economy Research Network of
Northern Canada, Yukon College
Dan Anton, Public Health and Safety, Yukon College
Debbie Abbott, Consultant
Michelle Kolla, Skookum Jim Friendship Centre
Kim-Mia Pronovost, Health Canada
Roberta Hartman, Health Canada
Val Pike, WGH and President, Yukon Public Health
Association
Pam Evans, Flying Fingers Business Services (Minutes)

Facilitator

Jody Butler Walker, Arctic Health Research Network-Yukon

Regrets

Lori Duncan, Health & Social Director, Council of Yukon
First Nations (CYFN)
Dr. Brendan Hanley, Medical Health Officer
Violet Van Hees, Health & Social Services, YTG
Maureen Johnstone, Health Canada
Kurt Dieckmann Yukon Workers' Compensation
Health and Safety Board
Irene Szabla, Child Development Centre
Caroline Sparks, Consultant
Ron Pearson, Yukon Public Health Association
Dr. Andrew Kaegi
Prema Ladchumanopaskeran, Victoria Faulkner Women's
Centre
Shannon Ryan, genetics consultant

**Arctic Health Research Network - Yukon
and the
National Collaborating Centre for Aboriginal Health
Knowledge Synthesis and Translation Workshop**

**High Country Inn, Whitehorse, Yukon
Thursday, April 10, 2008
10:00 a.m. to 12:00**

Agenda

1. Welcome and Introductions
 2. AHRN-YT Overview
 3. Yukon First Nations' Health Promotion Spring School '07 DVD
 4. NCCAH Presentation
 5. Sharing of YFN Health Promotion Spring School '07 Report.
 6. Group Discussion- Dissemination Strategies for KST Materials
 7. Evaluation
 8. Next Steps
-

Workshop summary by agenda item:

- 1) The workshop opened with a prayer by Norma Kassi, and was followed by a round table of introductions.
- 2) To provide a context for the rest of the workshop, an overview of AHRN-YT was presented on a PowerPoint presentation, which is attached in Appendix A. This presentation described the history of the development of AHRN-YT, its mission, governance structure, recent activities, funding sources, and future plans. Please contact either Jody (668-3393) or Norma (668-4442) for more information about AHRN-YT.

3) Jody gave background information to provide context prior to showing the DVD from the Yukon First Nations Health Promotion Spring School 2007 training course ('Spring School'). Briefly, this context included that the 'Spring School' training course was developed at the request of the Council of Yukon First Nations (CYFN) Health & Social Commission following a presentation of the course outline by Dr. Suzanne Jackson in October 2006. Dr. Jackson is the Director of the Health Promotion Center at the University of Toronto, and has taught similar programs elsewhere in the world, which focus on building capacity for promoting health at the community level. A planning group was established to develop and deliver the course, including participant recruitment and logistics, with representation from CYFN, Yukon College, YTG Health, U of Toronto and AHRN-YT. The planning group worked under the guidance of the CYFN Health & Social Commission.

The DVD of 'Spring School' was shown, however due to a technical problem with the computer was not shown in its entirety. Participants will receive the DVD as part of the Spring School report, and so will be able to view the entire DVD at a later date.

Copies of the ***Yukon First Nations Health Promotion Spring School 2007 Report and DVD*** were distributed to workshop participants. Not all participants received a copy, as the print run was incomplete at that time, and the duplication of the DVD was still taking place. These materials were subsequently distributed to all participants with this workshop report, including those invited but not able to attend the workshop.

4) A presentation was given by Ms. Ginette Thomas, the Managing Director from the National Collaborating Centre for Aboriginal Health. The presentation is attached in Appendix B, and the following summarizes her presentation:

- NCCAH is heading into its third year as of April 1, 2008, and is located in Prince George, BC.
- It is one of six National Collaborating Centres (NCC) funded by the Public Health Agency of Canada, which were created in May, 2004. Dr. David Naylor headed an inquiry after the SARS outbreak, resulting in the 'Naylor Report', which recommended the creation of the Public Health Agency of Canada and a pan-Canadian public health network, hence the NCCs.
- Overall goals of the National Collaborating Centres are to get existing knowledge to people who need it; identifying gaps in public health knowledge; and facilitating links between networks of regional, national, international expertise and practice (conferences, meetings, etc.). Information about these NCCs are included in Appendix C.

- For knowledge translation we use K - Knowledge, S - Synthesis (of information), T - Translation (areas of interest), and E - Exchange (distribution, production of video, group meetings, newsletters, fact sheets).
- NCCAH KSTE priority areas are child and youth health; aboriginal health policy syntheses; knowledge interfaces; social determinants of health (fact sheets, working papers); energizing public health priorities (environmental health, HIV/AIDS).
- In February, 2007 we held a dialogue circle to identify linkages. We have a twenty minute DVD of the dialogue circle from February, 2007. We have papers on indigenous determinants of health, information on FASD. Through the University of Ottawa we held a web symposium on FASD and prevalence, knowledge gaps. We want to expand that web symposium format to other areas.
- As well, we have a brochure on environmental health working with nine partners, including Health Canada. We have a database of environmental health researchers and their projects. We identified 115 researchers and a couple of hundred projects over five to six years. I brought papers, fact sheets, booklets, 10 DVDs and can send more. We partnered with BC on fact sheets and FNEHIN (First Nations Environmental Health Innovation Network) on a brochure. There is also our Update on Activities report for 2006-2007. Copies are at the back, and I'll leave copies with Jody & Norma at the AHRN-YT office.
- In 2008/09, we will be building on existing collaborations and developing new partnerships, focusing on key KSTE priority directions, and developing products that have an impact on practice.

We have a website that should be ready by April 15, 2008. Contacts for us include:

Holly Nathan
 Communications 250-900-5986
nathan@unbc.ca

Email:
nccah@unbc.ca

bciniti@unbc.ca

fnehin@unbc.ca

Website: www.nccah.ca

Discussion following Ginette's presentation:

Norma thanked Ginette for coming to Whitehorse and for partnering with us on completing the Spring School report.

- Norma noted that what happens in her community is the doctor comes once a month, takes blood or whatever, comes back in a month and says you have e.g. high cholesterol, take these pills. What we need is research on Metabolic Syndrome and H. Pylori - we need knowledge translation, on high blood pressure. People want to know what caused it? What can I do to help the disease go away? Every once in a while I'd go home and clear out the medicine cabinet, too many pills.

For knowledge, the nursing station should have information, answers on what caused this, what lifestyle, what can I change based on the diseases of high priority, on what's needing attention in our communities, for example, H. Pylori. We aren't clinical health practitioners in our office. It would be wonderful to get pictures, information for the community on cancer, diabetes, heart disease. That's the focus I'd like to see happen.

- Gaye Hanson described that she thinks of push/pull when it comes to knowledge translation. We need to be sensitive in building aboriginal health research, of it being a two way process, so you can push information, but if you don't get the feedback that it fits, is timely, is the right kind of information to support decision making then we just don't know if we did the right thing.

Jody noted that in a tri-territorial health project (funded by the Tri-Territorial Health Access Fund) we highlight that KT is two way. As part of our KT work on this project during fiscal year 07-08, we produced a Backgrounder of KT for program planners and policy makers, which is included in Appendix D, as well as a longer literature review, which we'll be pleased to email upon request.

5. Sharing of YFN Health Promotion Spring School '07 Report

For this workshop we asked for copies of the Spring School '07 report to share with you, however we didn't have enough for all participants at the workshop. Copies will be sent to those that didn't receive one, and DVD's will be sent to those that did receive the report, as they are still being pressed.

We were short the number of copies needed for all participants because when we gave Chief Ruth Massie her copy on April 9th, she asked for 14

more copies right away. She subsequently took these copies with her, and distributed them the next day at the Assembly of First Nations' Chiefs Committee on Health meeting in Vancouver, which made the Report available to key First Nations leaders in health across Canada.

6. Group Discussion - Dissemination Strategies for KST Materials

Jody noted that AHRN-YT is working on a website. On dissemination of information, are there ways people have found where information was provided at the right time? How do we move information? Is there a more systematic way? We are often reminded that visual representation is important, and not to focus only on written reports.

Ginette described that reach and impact are ways to look at dissemination strategies. Who did you pass the information on to? What impact did the information have?

Joanne Fairlie indicated that she thought the Spring School Report was a good product, and that it could be useful in generating other funding on these important issues, pan-territorially or territorially.

Jody described that the Tri-Territorial project (TTHAF) has allowed us to learn from each other in the other Territories, and that is a type of KT. The AFN Chiefs Committee on Health may have some ideas for projects to build on the Spring School report, as may those at the International Network of Circumpolar Health Researchers' conference in Tromso, Norway in May (www.inchr.ca).

At Norma's request, Shannon Duke updated participants about recent activities she's been involved with that stemmed from Spring School '07. There has been information and fact sheets going to communities in response to requests for more about diabetes. Three communities have held workshops about diabetes, and the Spring School participant from Skookum Jim Friendship Centre drafted a proposal about diabetes in urban aboriginals that was subsequently funded for 3 years.

Jody noted that it is very gratifying to see these actions in such a short time.

7. Evaluation

Evaluation sheets were distributed, and are summarized in Appendix E. Overall, the workshop was well received, with participants noting they appreciated the opportunity to come together with others from a wide

representation of perspectives and programs to share information. There were also favorable responses to the ***Yukon First Nations Health Promotion Spring School 2007 Report and DVD***, with participants noting that it was easy to read, the colors were effective, and they liked hearing about the impact of the 'Spring School' training in the communities.

The factor of time was the most frequently noted response to what participants didn't like about the workshop and what would have made it better. This included more time for discussion, not enough time overall, and more time to discuss next steps. It was noted that handouts of the powerpoint presentations would have been useful – they are included in Appendix A, and we will incorporate this feedback into our future presentations.

8. Next Steps (from Evaluation)

There was a range of responses to the question **“Is Knowledge Synthesis and Translation (KST) an area that you'd like to see more work about in the Yukon? If so, focusing on what aspects?”**

Of the 14 respondents to this question, 98% (n=13) indicated that they would like to see continued KST activities in the Yukon.

Specific **topics** included:

- substance abuse prevention
- nutrition.
- Anything that will lead to family Health - Child - Parent relationships
- ways to connect with youth
- Information for health care providers.

Specific **processes** included:

- there is much to be said for 2-way flow of information/knowledge and for facilitating processes to enable [KT]
- How to translate this information to grass roots people and how to extract traditional knowledge
- it is important that info that is out there is made into user friendly material and gets out to people who can make use of it
- delivery of understandable health care information on a local level
- Whole continuum (like Norma said), academic - orgs - community level/individuals
- research - practitioner - community members

Specific **processes** included (cont'd):

- ways to make research more inclusive of communities and more relevant to them
- interested in feedback
- More symposiums for professionals
- more collaboration on useful tools for professionals and clients
- Making info accessible to community members (visuals and literature that is straight forward)
- Is there a way to break up the report into smaller chunks to stimulate discussion at community level?

The workshop closed with a prayer by Norma Kassi.

Conclusion

The workshop provided an opportunity for those involved with various aspects of health to come together to learn about and discuss 'Knowledge Synthesis and Translation', and to share in the distribution of a KST tool – *the Yukon First Nations Health Promotion Spring School '07 Report*.

There was interest expressed in continuing KST activities in the Yukon, and recommendations were made about the content of these activities, as well as ways these activities can be developed and implemented.

The Arctic Health Research Network-Yukon will seek opportunities for partners and funding to act on these recommendations, and will continue to work with the NCCAH and others on the development and evaluation of KST tools.

Appendix A – Arctic Health Research Network –Yukon Powerpoint Presentation

**Appendix B – National Collaborating Centre for Aboriginal Health
Powerpoint Presentation**

Appendix C

Backgrounder

Knowledge Translation and Evidence-Informed Decision-Making

What is Knowledge translation?

It is estimated that 40% of patients are not receiving care compatible with the best available evidence and that 20% of care is not warranted or even potentially harmful.

Such estimates reflect the lag and difficulty in incorporating research evidence into practice, also referred to as the *know-do gap*. Knowledge translation (KT) is a process that addresses this gap by actively moving research evidence to practice using strategic approaches and tools. Its objective is to improve health and health care outcomes through evidence-informed decision-making.

Why is it important in evidence-informed policy and planning?

To address the *know-do gap*, health researchers are encouraged to produce policy and practice-relevant research findings. At the same time, just as healthcare professionals practice evidence-based healthcare, policy-makers and program planners are encouraged to practice evidence-informed management, which includes making the best use of health research knowledge to improve the quality and efficiency of health services.

Naturally, decision-makers must balance the strength of research evidence with other political and organizational considerations. However, to evaluate strength, research evidence must be easily accessible, intelligible, compatible with the work context, and credible.

The most effective KT strategies and tools are those that can overcome the barriers to knowledge uptake and translate research evidence in relevant, timely, and meaningful formats tailored specifically for policy and planning audiences. Research evidence then has a better chance of informing policy and planning.

How can it be done?

There are few definitive answers as to how to promote the effective use of research evidence. The fields of knowledge translation and evidence-informed decision-making are in their infancy. However there are promising practices and tools available to decision-makers.

Systematic Reviews for Policy –Policy-relevant systematic reviews are a tool that can address a broad array of questions asked by public health professionals. They are meant to be efficient and concise, more substantive than single studies, and adapted to the knowledge culture of decision-makers (e.g. see Vignette 1).

Networks – Networks bring people from different fields together around a common goal or issue. They facilitate knowledge sharing and build relationships. Opportunities for live exchanges are vital to developing common understanding and inter-professional collaborations (e.g. Vignette 2).

Change Agents – Change agents are influential people that can actively, skillfully, and influentially bring relevant knowledge to the attention of their clients, thereby disseminating information and facilitating research uptake (Vignette 3).

Success Stories – Through publication of real-world success stories, valuable lessons can be taken from practice to help other planners and managers improve programs, gain organizational support, and inform the public about program benefits (e.g. Vignette 4).

Training to Build Capacity – For organizations to be receptive to research use, there needs to be conducive staffing environments, infrastructure, and processes in place. Building this ‘receptor capacity’ requires the development of leadership and capacity-building skills. Training programs for decision-makers have shown tangible improvements in health services delivery (e.g. Vignette 5).

Real-world KT strategies and tools

Vignette 1. Systematic reviews for policy

Health-evidence.ca is a website providing quality research evidence to public health decision makers through a searchable registry of systematic reviews and meta-analyses. Reviews are screened for relevance to public health and health promotion, appraised for quality, and the evidence and implications are clearly spelled out. Topics range from addiction and substance use to healthy communities and social determinants of health.

The **Cochrane Effective Practice and Organisation of Care Group** (www.epoc.cochrane.org) makes available reviews of interventions designed to improve professional practice and the delivery of effective health services (e.g. continuing education, quality assurance, informatics, financial, and organisational and regulatory interventions).

Vignette 2. An inter-professional knowledge network

The **Need to Know Team** is a CIHR-funded collaboration between the Manitoba Centre for Health Policy, rural and northern regional health authorities, and Manitoba Health, helping decision-makers learn how to use research findings at all levels of planning. Researcher-user partnerships help create new knowledge relevant to the needs and priorities of health authorities and help improve organizational capacity, effectiveness and service delivery (www.rha.cpe.umanitoba.ca).

Vignette 3. Using knowledge brokers to improve policy

Knowledge brokers were used to create a partnership between the four **Atlantic provinces and the Heart and Stroke Foundation** leading to improvement in patient care. The brokers were able to increase policy maker support for a new stroke care program by helping the partnership along, getting past obstacles (e.g. a slow start, political change, and trust issues), maintaining momentum, facilitating communication, and inciting participation.

Vignette 4. Sharing success stories

Promising Practices in Research Use is an electronic series from the Canadian Health Services Research Foundation (CHSRF) (www.chsrf.ca/promising) targeting health professionals. It highlights organizations that have invested time, effort, and resources in order to successfully increase their capacity to use research.

Insight and Action is a digest that provides summaries of evidence-based KT studies for end users on KT concepts such as networks, brokering, dissemination and research use (www.chsrf.ca/other_documents/insights_action/index_e.php).

Vignette 5. A training program in evidence-informed decision-making

The **Executive Training for Research Application (EXTRA)** is a 2-year fellowship program for health services professionals in senior leadership positions interested in evidence-informed decision-making for improving healthcare services. Its curriculum includes health research literacy, leadership training, collaborative skills, understanding the linkages between research and practice, and learning how to create, manage, and sustain an organizational culture that promotes research use. Internships help policy-makers apply their newly acquired skills to intervention projects within their own organization (www.chsrf.ca).

KT Resources for Policy and Planning

Canadian Health Services Research Foundation: Knowledge Transfer and Exchange

http://www.chsrf.ca/knowledge_transfer/index_e.php

Canadian Institutes of Health Research

<http://www.cihr-irsc.gc.ca>

Centre for Health Services and Policy Research, University of British Columbia

<http://www.chspr.ubc.ca/index.htm>

Chair on Knowledge Transfer and Innovation, Laval University

<http://kuuc.chair.ulaval.ca/english/index.php>

Cochrane Collaboration

<http://cochrane.org>

Cochrane Effective Practice and Organisation of Care Group

<http://www.epoc.cochrane.org/en/index.html>

Health-Evidence.ca

<http://health-evidence.ca/>

Health Research Transfer Network of Alberta

<http://www.ahfmr.ab.ca/rtna/>

Joint Program in Knowledge Translation, University of Toronto

<http://www.stmichaelshospital.com/research/kt.php>

Knowledge Utilization Studies Program, University of Alberta

<http://www.nursing.ualberta.ca/kusp/index.htm>

SEARCH Canada

<http://www.searchca.net/users/folder.asp>

The Need to Know Project, University of Manitoba

<http://www.rha.cpe.umanitoba.ca/info.shtml>

Appendix E – Evaluation Summary

What did you like about this workshop?

- Update on AHRN activities, more info about spring school and outcomes of that that are carrying on.
- Open discussion on next steps and the openness to include grass roots ideas and resources.
- Seeing the end product - it looks wonderful, easy to read. The colour coding is very effective.
- Ability to hear some information on what is happening on a local level.
- Info from the Spring School. Great workshop.
- Good to learn about the exciting projects - work that's being done.
- Very informative/thought provoking.
- Information on AHRN and CCAH and Centres of Excellence.
- Wide representation. Learning more about NNAH.
- Visual aids. Great job pulling it together in the time frame. Good representation. Great information. Coffee. Connection.
- Good information delivery - various media used, excellent. Good to know what other networks exist and potential for linking with these.
- Meeting others in health programs, ngs, etc. Diversity of group.
- Informative. Welcoming.
- Good way to communicate re AHRN and NCC for aboriginal health - great to have opportunity to provide feedback (participate).
- The tools, book and DVD, opening prayer, conference room
- Informative
- Focused presentations - to the point. Liked hearing about impact of Spring School in communities.

2) What did you not like about this workshop?

- Not enough time - overall.
- Very fast paced, confusing at times in terms of the purpose of the workshop, a lot of acronyms.
- NCCAH presentation not immediately relevant
- More time for discussion.
- No handouts on your powerpoint presentation (it was a good presentation - especially for those who don't know the background.)
- Too little time/too rushed.
- DVD presentation not completed.
- Technical difficulties :)
- More time to look specifically at next steps.
- Always glitches with technology.

- Would like to see more FN involvement.
- It was difficult to understand what it was about. Seemed disorganized.
- Computer glitches.

3) What would have made it better?

- Seeing all the DVD!!
- A day workshop?
- Some information ahead of time so participants could have a chance to familiarize themselves with material.
- More info on fall school.
- The technology! Might just be a matter of using it more.
- More time.
- Opportunity to review Report a little more.
- More time - over lunch with time to net work.
- Resource materials for everyone.
- A bit longer. More info on goal of, tools used by spring school.
- Preparation - clear info in invitation. Less academic communication (diverse audience). Clear intentions stated at the start of the conference. More info about collected information (and less about personal process). More FN representation - KDFN?
- More opportunity for sharing or dialogue.
- Direction/request of what you'd like us to do with info.

4) Is Knowledge Synthesis and Translation an area that you'd like to see more work about in the Yukon? If so, focusing on what aspects?

- Mixed feelings about that. Depends on area of focus. Think that there is much to be said for 2-way flow of information/knowledge and for facilitating processes to enable that.
- Yes, definitely. How to translate this information to grass roots people and how to extract traditional knowledge.
- Yes - I think it is important that info that is out there is made into user friendly material and gets out to people who can make use of it. Anything that will lead to family Health - Child - Parent relationships.
- Yes - delivery of understandable health care information on a local level.
- Yes: substance abuse prevention, nutrition.
- Information for health care providers.
- Whole continuum (like Norma said), academic - orgs - community level/individuals.
- Yes - research - practitioner - community members
- Yes, ways to make research more inclusive of communities and more relevant to them.
- Yes - interested in feedback, ways to connect with youth.

- Definitely. More symposiums for professionals and more collaboration on useful tools for professionals and clients.
- Making info accessible to community members (visuals and literature that is straight forward).
- Yes.

**4) Is Knowledge Synthesis and Translation an area that you'd like to see more work about in the Yukon? If so, focusing on what aspects?
Cont'd**

- Yes. Is there a way to break up the report into smaller chunks to stimulate discussion at community level?

5) Additional Comments

- Appreciated Norma's comment about need to make knowledge relevant at community level.
- Great work! Thanks.
- Beautiful report!
- Thanks for organizing this and sharing this information with us.
- Keep up the good work. Laura S.
- Thank you for sharing your knowledge with me and your respectful manner! I appreciate it!
- Good job Jody and Norma. Thanks for inviting me. Deb.
- Thank you!
- I would come again.
- Good job! Paula.