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Emerging Issues in the Collaborative Roles of the Librarian and the Medical Personnel towards the Provision of Healthy Information for Hospital Patients in Nigeria

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Abstract

Every field of study needs the other to survive and fully realize her set objectives and goals. This obviously is the brain behind the synergy of the librarian and the medical personnel. In this backdrop, the researchers identified the need for the collaborative roles of the librarian and the medical personnel towards the provision of healthy information for patients in Nigerian hospitals. For the librarian, the hospital patient is categorized under the disadvantaged groups owing to the critical nature of their information needs. And for the medical personnel, nothing can be more engaging than saving lives. The hospital patient therefore needs special attention. Information is no doubt power, but then, some of these pieces of information are very destructive and harmful especially for the vulnerable and sometimes helpless bedridden patients in hospitals. This paper therefore examines the rationale behind the joint roles of the librarian and the medical personnel and how their synergy will enhance efficiency and productivity in their respective service delivery. In addition, the paper examines whether the hospitals and their complementary libraries are actually existent and functional; whether medical personnel and librarians can actually agree; whether the human, material and other resources needed are available; whether there are good, usable and accessible ICT infrastructure; and then the implications of these. At the end, it is believed that the collaboration will result to efficient and equitable dissemination of authoritative information for not only the hospital patient, but also others in quest for healthy information.

Keywords: *librarian, medical personnel, hospital, patients, information*

Introduction:

Information is a very essential commodity. All categories of people need it to survive. In its great importance, information can not only save one from contracting or being infected with a certain sickness, it can go a long way to restoring, curing and offering other therapeutic options for individuals. Information can acquit a prisoner and of course enlighten the uninformed. Information, no doubt is a major asset of any nation. But then, in this era of information explosion where it has become somewhat impossible to measure and control the number of information at our disposal, the special effort of the librarian is required to sieve out the healthy tablets of these pieces of information. The availability of well sieved information in the health and medical sector and its prompt dissemination is a determinant for either life or death. This obviously is where the librarian's role comes into play. Libraries today, including most hospital based patients' libraries are involved only peripherally in providing patient-health information (Roth, 1978)

Most times, information is spread without regard to its impact and consequences especially in such critical and sensitive area as the medical and health sector. Provision of quality harmless information is not exclusive of hospital patients and medical practitioners. There are several others, specially disadvantaged as regards quality and prompt information: the rural dwellers, the prison inmates, the blind, the handicapped, the barrack dwellers, and others. This paper however will focus on hospital patients and medical practitioners. New research developments and innovations come up daily thereby challenging Nigerian medical practitioners and health workers who have insufficient information, are somewhat distant and not involved in the innovations and research breakthroughs.

The librarian therefore is expected to join the medical personnel in a collaborative way to give adequate and reliable information to their clients - the patients. Information is not only power but also life. Constantly, there is need for urgent dissemination of information to both medical personnel and their patients regarding constant perennial (or outbreak of) sicknesses in both urban and rural areas. Adequate and strategic information on the prevention and cure for such recurring sicknesses as malaria, fever, measles, chicken-pox, cancer, poliomyelitis, tuberculosis and very recently the ebola virus is no doubt very essential. The worry therefore is to determine whether there is adequate reliable and dependable health information on these. That must be the reason why Godbolt et al (2010) observed that health messages (information) even at the government level are often confused and unreliable. And so, the librarian

must work alongside medical personnel in the provision of unbiased information for himself and the patients. How many Nigerians really know the causes, symptoms and prevention for this recently popular and very deadly ebola virus?

Overview of health and medical libraries

In ancient Egypt, a college of physicians existed in eleventh century BC. Similar ones were also found at Athens in the first century BC. The modern hospital library drew its origin from the colonial America. Through the help of Benjamin Franklin, the first medical library was founded in 1762, (Lett, 2003). By 1800, many notable medical libraries have sprouted in the United States. In 18th century AD in Nigeria, the role and character of hospitals has undergone noticeable changes. The medical and health libraries had shifted from its colonial/missionary church-support library to a more independent entity. The Central Medical Library founded in 1945 is the oldest medical library in Nigeria (Belleh, 1975). But then, prior to the formation of such strategic health body as Nigerian Institute of Medical Research (NIMR) in 1977, other medical institutes from the colonial masters in the 1920's has been in existence. Such institutes as The Rockefeller Foundation, Yellow Fever Commission to West of Africa flourished. The NIMR however remained the only institute concerned with research into human medicine in Nigeria until the establishment of the National Institute for Pharmaceutical Research and Development in Abuja.

The nature and role of medical libraries

The medical library is categorized under special libraries as a result of its special nature basically considering the kinds of clientele it serves. Its major role is to provide information and knowledge resources which are vital and critical to the parent institution, the clientele and other users as a fulfillment of the major objectives of the organization. The nature of information resources found in medical libraries should be carefully selected and therefore should pay enough attention to the nature of patients it is poised to serve. It is therefore the onus of the librarian to use his professional skills and mastery in information selection/acquisition, retrieval, packaging and repackaging as well as dissemination to provide quality information pieces for the medical personnel, the patients and other medical library users in search for healthy information.

As a special kind of library, the nature of information materials found in hospital libraries differ in a number of ways from information found in other conventional libraries. This is obviously as a result of the special posture of her clients. To avert some provocative pieces of information which may worsen the

health of a patient, information resources found in hospital/medical centre libraries are carefully sieved and disseminated.

The medical library roles as identified by Walzen, Stott and Sutton (2000) can only be achieved with the joint efforts of the librarian and the medical personnel. These roles include

- Provision of current information to users in a quick and cost effective manner
- Provision of balanced perspective on medical issues
- Provision of alternatives to formal learning in form of material support for continuing medical education
- Provision of value services which improves information delivery
- Dissemination of health information and promotion of healthy lifestyles
- Satisfying the health information needs of the community
- Locating and assisting in the development of relevant information or materials
- Pairing information outreach with other activities in which the populations already engaged e.g. workshops, conferences, community events, etc and
- Integrating health information into ongoing programmes of the target population in the community, thereby empowering members of the health community.

The librarian vis-à-vis medical libraries

The library may not directly heal a sick person, neither will it give back life to the dead but then, there are significant ways in which the library (through the librarian) can add value and meaning to the health of a patient and career of a medical personnel. As earlier established, the medical/hospital library assists in the actualization of the goals and objectives of the parent institution, but this can only be fully realized through the synergy of the librarian and the medical personnel whose roles are clearly complementary. If the cardinal role of a medical centre or a hospital is to provide optimal health care services for her patients and staff, this crucial objective can only be realized with the aid of not only a functional medical library, but also one undoubtedly functional.

It is no doubt a formidable task and so, the fulfillment of the established backdrop will raise several questions: Are these hospitals and their complementary libraries actually existent and functional? Can the medical personnel and the librarian actually agree? Are there enough resources to work with? Are there good, usable and accessible ICT infrastructure? Have the Nigerian health and medical sector come to live to its expectations? What are

the implications? In the course of this discourse, these questions will be attended to one after another.

Are these hospitals and their complementary libraries actually existent and functional?

Belleh (1975) in his foremost research observed that there are only seven medical libraries in Nigeria (veterinary medical libraries excluded). There was a significant sprouting of medical and hospital libraries after Nigeria's independence in 1960. With the establishment of universities and other institutions of higher learning and research, medical centers, teaching hospitals and other health institutions, a complementary library becomes very necessary. If we had this to say of medical and hospital libraries in that early period with limited human and material resources (no mention of ICTs), the question today is no longer whether they exist but how effective and functional they are. From all ramifications, Nigeria cannot be categorized as a poor country, only that her wealth has been perennially grossly mismanaged. And this fact has adversely affected all other aspects of her as a country (even her citizen's state of mind and attitude). This has at the other hand added to numerous other factors that has stunted the expected exponential growth and functionality of Nigeria's health and medical sector.

Medical and health libraries no doubt abound in Nigeria. Often, a library is attached to each of them, but then in Nigeria, a library is usually a dump site for unusable dusty books with little or no supervision and patronage. Without awareness and sensitization, these libraries are as good as they do not exist. Here comes the big question, if a hospital or medical centre library intended to aid in the realization of her parent institution's set goals and objectives is not functional, what is the fate of a medical personnel? What will then become of the daily quest for current and updated information needed for everyday research and disease control? The non-functionality of these libraries has not only retarded research and development but also is very critical to health. Every health sector is concerned with the matter of life and death and when all incentives needed to save lives is not in place, then that institution is questionable and condemnable. If a medical centre library is not functional, it is because a librarian has not been assigned to man it. If a librarian is therefore stationed to run the information department of a medical institution with the medical personnel constantly feeding him with health information tablets, information flow, utilization, research development and output in that institution will have no match.

Can the medical personnel and the librarian actually agree?

The Nigerian librarian is yet to enjoy that complacency and prestige in her profession like the medical doctor who he is poised to collaborate with. The Nigerian public at the other hand are yet to understand and come to terms with the librarian's numerous roles. Some patients may even find it embarrassing and unprofessional to see a librarian around medical and health centers. They will continue to wonder in both ignorance and confusion the actual duty of the librarian. But then, the hospital librarian's role is numerous; it ranges from hospital library manager, information specialist, database manager, webmaster, clinical medical librarian, chief information officer, and so on. These roles are quite sensitive and the medical personnel will also admit of his narrow knowledge and conversance in the aforementioned areas if he is not jack of all trades. Again, there comes the need for collaboration since no one is a compendium of all knowledge, and since no one exists comfortably or performs maximally in isolation. This information, worthy of mention is not for the hospital inmates alone, it is also for the consumption of the medical personnel himself who is constantly in research so as to meet up with her colleague's new research developments in other parts of the world.

Case for role or function crash

The problem often posed by this collaboration is role/function crash. One may wonder how there will be role crash if the librarian understands that his role for example does not include drug prescription or administration; and if the medical personnel understands that the organization of the hospitals database, books, serials, pamphlets, handbills and posters is the onus of the librarian. If roles are clearly and vertically spelt out and defined, the crash therefore between the librarian and the medical practitioner will be maximally reduced. Is the librarian really courageous and adventurous enough to face the possible challenges and shortfalls in this collaboration? And will the medical doctor disregard how high he has been placed in the semi-literate vulnerable society and come to terms with the reality of the processes involved in saving lives. Will the medical practitioner and the librarian actually agree in the manipulation of machines and computers, in their diverse knowledge, experience and skills and in the spectacular way of handling the patient considering their different individual needs, temperament and differences? If there are two professionals that can easily agree, it is the librarian and the medical personnel. Even outside

the hospital or medical centre environment, their roles are quite similar in a number of ways;

Table: The librarians' and the medical personnel's similar roles

	The Librarian/Library	The Medical Personnel/Centre
1.	A library is structured according to departments with subject based specialists	A hospital/medical centre is also departmentalized with clear cut personnel in their specialty
2.	The librarian offers referral services to clients whose information needs are not within his (librarian) ambient	There is no known medical personnel that handles all human ailment
3.	Before offering services, the librarian first identifies the need(s) of the clientele before offering services/solutions	The medical personnel conducts tests and diagnosis before prescription and administration of drugs
4.	Such special information packages as Selective Dissemination of Information and Current Awareness Services are for the benefit of clients	Outbreak of sicknesses and other current health preventive measures are constantly brought to the knowledge of the patients (typical is the ebola virus outbreak)
5.	The librarian also administers counseling roles to his clients	It is a medical personnel's routine to counsel and advise his patients on various health issues
6.	Each library clientele has a library card which must be presented on entering the library	Each patient is also provided with a card prior to consulting a medical personnel
7.	The librarian has diagnostic functions evident in his information provision and dissemination for questing clienteles	One of the major functions of the medical personnel is to diagnose and cure ailments.
8.	There is a remarkable evidence of systematic organization of information resources	Resources are neatly and carefully organized for ease of retrieval
9.	There is this clemency and quietude maintained at the library	The hospital also enjoys a quiet atmosphere
10.	The librarian is always guided by	Ranganathan's laws can be applied in

<p>five laws proposed by Ranganathan:</p> <ol style="list-style-type: none"> i. Books are for use ii. Every reader, his book iii. Every book, its reader iv. Save the time of the reader v. The library is a growing organism 	<p>the medical sector:</p> <ol style="list-style-type: none"> i. Drugs are for use ii. Every patient, his drug and information iii. Every drug and information, its patient iv. Save the life of the patient v. The hospital is a life-saving organism
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Are there enough resources to work with?

Health information resources can come in several ways and forms. In a more general sense, these resources can be human, machine, text or print (books, journals, newspapers, magazines, pamphlets, fliers/handbills etc), internet or World Wide Web (www) resources. Health care facilities (especially information resources in the form of pamphlets) were ab-initio the cardinal information materials found in hospitals. They were originally provided by early missionaries and this kicked off, nay concentrated in some areas depending on the choices and activities of these early missionaries. The Roman Catholic Mission (RCM) for example concentrated and built more hospitals in the South-Eastern and Mid-Western Nigeria because of their conquest and prosperity in the area. In these areas by implication, medical resources flourished, and invariably these missionaries had started grooming native personnel to execute same medical services, hence the two roles of selecting and organizing these medical information resources and administering of drugs.

Also, British colonial government started official services with the erection of several clinics, health centers and hospitals in Calabar, Lagos and other coastal centers in the 1870's (Bobalola, 2012). It is however clear and evident that the resources needed for the efficient health care delivery in Nigeria, though available to a reasonable degree is not accessible, reachable and usable. Or put in a better way, these resources do not actually flow down to the people they are meant for. There should not be the question of whether or not the human resources are available because the number of medical personnel being turned out by our various higher institutions yearly is not just high but alarming. And since it has been established that the human resource is available, the next question will be whether they are living up to expectations in their assignments such as; patients' care and relationships (inter-personal skills), prescriptions and administration of drugs (professional skills), use of tools/machines (technical skills, especially in this digitally aggressive information age), to mention only these few.

Resources in texts and prints can 'heal' a patient before a medical personnel administers drugs or a librarian provides a very useful information. Bibliotherapy is no longer a new subject. Patients constantly got healed by mere looking at/reading health information or other books (motivational, spiritual, or simply by the choice of a TV program on air at that moment). But then, are these resources readily available in Nigeria? It is not enough for the medical personnel to provide health information on some perennial or outbreak of sicknesses, the efforts of the librarian to effectively disseminate them and ensure that those tablets of information reaches to the ailing clientele is very fundamental. Despite the increase in use of electronic information resources in developed countries, access to published biomedical journals is a major problem for researchers and scientists in lower income countries, especially in sub-Saharan African (Ajuwon and Olorunsaye, 2009). An African may choose to remain in the dark or even opt for a bottle of beer than pay to have any piece of information.

Hospital posters, handbills and fliers in its importance play significant roles in patient's lives. Information is power and so, confessions has been heard and recorded of patients and how access to some pieces of information (usually displayed at hospitals strategic points), come to change the rest of their health lives. The role of these posters, fliers and bills cannot be over emphasized. And since a sick person may not have the energy, the appetite or the time to visit the library, it is with the collaborative efforts of the librarian and the medical personnel that all categories of patients can have access to information even as they lie on their individual beds. The therapeutic effects of carefully chosen Audio-Visual resources cannot be over-emphasized.

According to Mommodu (2002), information provision and resources for hospital patients in Nigeria is in a state of quagmire. The situation is worse in rural areas. Further research carried out by Aboyade (1984) and Aina (1991) point to the fact that the resources for the efficient library and information services to hospital patients are yet to be fully met. The traditional/conventional way of passing information is still posing a challenging hand while others are getting seriously digitized and sophisticated. Now, in this sophistication, the problem becomes more complex - the varied nature of patients with their attendant individual problems and information needs; and the sophistication of the available information have taken several formats for the codification and consequent simplification of the librarian and the medical personnel. Their role and function has therefore been doubled

Are there good, usable and accessible ICT infrastructure?

All aspects of human endeavor undergo transformation. The medical sector receives enough attention and patronage whenever ICT infrastructure is

mentioned. This sensitive sector cannot afford to stand aloof while others carry out their daily activities with machines. Machines are always brought and then dumped. What is the need of information if it is provided in sophisticated inaccessible and ambiguous format? What is the essence of communication when the receiver cannot give feedback only because information is difficult to digest? Is ICT meant to be complex and complicated? If ICT means information and communication technologies, then the purpose undoubtedly should like other machines (technologies) ease human efforts. Information in its great necessity should come in clear, precise and unambiguous form. The application of ICTs is meant to ease both the practitioner's and a patient's efforts and never to worsen it. The puzzling nature of these ICT infrastructures for the medical personnel, the librarian and their clients is a subject that needs serious attention. Despite the fact that we are in 21st century, with computers and other sophisticated machines at the centre and helm of man's activities, there are obviously some staff and users yet to fully understand the mechanics of ICTs.

De Gennaro (1984) was therefore apt in his observation when he pointedly noted that there is the need to evaluate medical libraries because the excellence and usefulness of a library is measured not only by the state and quality of its collection but also by the range of resources that its staff are able to deliver to users by conventional and electronic means from a growing variety of services

It is here again that the collaborative roles come in. The medical practitioners often demand good library and information services as a result of constant research and other inter-hospital cooperation he undertakes. All these can be fully realized and achieved if both the medical personnel and the librarian have all the expertise, skill and knowledge to fully man and utilize these facilities. In demystifying the puzzling roles of these machines, the synergy of the librarian and medical personnel is further justified.

Implications and conclusion

Man, at all times is expected to change and adapt with his changing society. Since the world has turned to a global village, librarians and medical personnel have continued to brace up to meet the challenges of running a modern hospital or health centre despite the numerous challenges. In London 1953, during the first International Conference of Medical Librarians, no African, let alone Nigerian were found there. What could be the cause of such apathy? Is it only a show of indifference or they were simply uninformed? The implication of this exclusion is that one's knowledge, experience and scope on a subject becomes narrow and limited and this at the other hand retards information on modern trends, new approaches and salient innovations in their field. To make up for the lost opportunities, several training programmes were initiated and

organized for the African librarian in the sixties just to get him acquainted with the global standard. But now that the rest of the world can be connected at an instant at a click of the computer button, the librarian and the medical personnel are faced with the problem of agreement, collaboration and commitment for maximum output.

There are evidently increased efforts of Nigerian Librarians to meet up with other world class medical libraries. With the Nigerian Library Association (NLA), Nigerian Medical Association (NMA) and such others like Medical Library Association (MLA), increased and concerted efforts has been on ground to empower this collaborative efforts. It is only through this collaboration that patients can boldly swallow information and health tablets authoritatively. The medical personnel not only get satisfaction but also fulfillment and the librarian justifies his profession.

References

- Adio, G., et al (2014). The effects of Medical libraries in Medical Education. Evidence from Osun State Nigeria. *Library Philosophy and Practice*, 2007.
- Applegate, R. (2001). Gender Differences in the Use of Public Library
- Belleh, G. S. (1975). Medical librarianship in Nigeria – A Review of the Literature and Comments on some Problems and Prospects. *Bulletin of Medical Library Association* 63(2). Pp 199-206
- Bobalola, Y. T, et al (2012). Information Provision to the Disadvantaged: A Proposal for Extension of Library and Information Services to Refugees in Oru camp in Ogun State Nigeria. *Global Journal of Human Social Sciences*, vol. 12. Global Journal Inc., USA.
- Lett, R. K. (2003). Hospital Libraries. in *Encyclopedia of Library and Information Science*. DOI:10.1081/E-ELIS 120008622. Pp 1208-1220
- Obidike, N. A. (2001). The Library as an Effective tool for Understanding the Health Status of Rural Communities in Nigeria. *Library Philosophy and Practice*, 2001
- Roth, B.G. (1978). Health information for patients: the hospital role. *Bulletin of medical library Association*, 66(1). Pp 14-16

