



International Federation of  
Library Associations and Institutions

# Public Access to Health Information





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# Sharing experiences – and partnership possibilities



# What do we mean by 'experiences'?

- Let's take a Case Study from Malawi
  - An NGO organised a malaria prevention programme in a lakeside region of Malawi
  - The programme included free distribution of mosquito nets
  - The NGO reported excellent take up of the programme
  - In particular, large numbers of nets were requested.



# Reviewing experience

- Assessment of the programme showed a disappointing effect on rates of infection
- Further investigation showed many nets were being used for fishing in the lake
- In addition to low impact on malaria infection rates, the fine-mesh nets were catching immature fish
- This was contributing to the fishing-out of the lake.



# What lessons can be learned from this experience?

- Lessons might include:
  - Need for awareness of the existing knowledge base and local people's perceptions of their needs
  - How to prepare a programme that will have the desired effect and minimal unpredicted effects
  - Need for management and assessment of programmes



# Some specific lessons

- There had been insufficient consultation with the community and its leaders
- The whole context of people's lives had been ignored
- There was insufficient ongoing supervision/reporting
- The programme was generally top-down, non-participatory
- Partnership possibilities had not been taken up.





# Partnerships for health information

- There are so many opportunities for libraries to get involved with health information work (despite all the agencies and NGOs already involved).
- The best type of involvement is through partnerships, where libraries can offer:
  - Existing skills and materials
  - Connections with the community.
- A case study from the USA suggests how this can work.



# A case study from the USA

- Johns Hopkins Medical Library had a partnership for several years with the East Baltimore Women's Clinic
- It is possible to draw a number of conclusions from this case study about how partnerships including a library work best.
- These conclusions suggest some principles we could call the Five Ps.







# The Five Ps

- Partnerships (clinical staff, health NGOs, patients, etc)
- Participation (of the whole community)
- Presence (of librarians)
- Protocols (clear agreements on the role of the library)
- Privacy (for individuals)





# Partnership

- The health problems dealt with were addressed more effectively by the clinic/library partnership than by either alone
- Partnerships that include NGOs and community groups are even stronger
- When the problem is information (as the basis of prevention) partnership is at its most effective
- Including the library in a partnership (as an established information provider) is very effective.



# Presence (of librarians)

- The Baltimore project found that the presence of librarians (in the clinic or other health centre) helped make information work more effective
- The community seemed to accept a Librarian as a helpful source of information that was important to their health and well-being (whether in response to specific queries or general dissemination).



# Protocols

- Involving librarians in health information raises questions
- What can librarians do?
  - Providing enquirers with information prepared by experts
  - Offering the library as a base for information campaigns
- What can't they do?
  - Dealing with individual health problems
- Clear protocols are needed before the library can be included in a partnership.



# Privacy

- The Baltimore project found that it was essential that the library offered individuals the same privacy as they would expect from a clinic or hospital
- The library profession usually includes statements about user privacy in its Codes of Ethics
- This principle needs to be very strongly embedded in any partnership that includes libraries.



# Experiences

- This session has drawn on two case studies so as to learn from sharing experiences.
- Have the participants at this workshop any relevant stories or experiences that reinforce or expand the points we have been discussing?
- Now would be a good time to share these

