



Key Information Processing Partners for Progress in Health Literacy and Practice in Karnataka

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ABSTRACT

Medical librarianship comprises working on general literacy, informational literacy, and patient education initiatives. These will make librarians and community libraries excellent at gathering resources to further and update health literacy research and practice. The role of the National Medical Library is to develop resources, programs, and collaborative partnerships with medical librarians to serve the health information needs of the community. This article gives an overview of Karnataka's government health initiatives and literacy efforts. The study identifies different schemes of Karnataka health projects through programs in diverse communities, focusing on service to the special community populations that may suffer from health disparities in Karnataka. The study extends to describing the 'libraries' and librarians' responses to continuously evolving contexts and mediums and meeting community requirements. It also observed the enablers of success, limitations of the existing data, and directions for future research.

Keywords: Health Literacy, Medical Librarian, Community Education, Medical Libraries

1. Introduction

Health informatics is applying computers and information sciences to improve and advance the healthcare industry. Health informatics also involves the access to and retrieval of information and the protection of healthcare information from a variety of sources. 'Medical universities and institutions investments in library infrastructure, resources, physical facilities, and information technology. This plays a significant role in addressing the information needs of health professionals by facilitating access to information literacy training and electronic resources ⁽¹⁾. Medical library infrastructure, collections, and user services are the most essential investments of all medical universities and institutions.

'As technology advances and health care expands, public health is an essential vital component, assisting providers and government agencies in adapting to changing and preparing for new and unexpected threats such as antibiotic-resistant infections and chemical and biological attacks. Such an attack would require immediate detection and analysis of the agent for public health officials to address the threat and respond appropriately to prevent widespread human harm ^(2,3,4). 'In order to support informed and capable leadership and to assist in preventing system failures, health informatics training is also crucial. For public health informaticians to create and apply information technology that respects privacy and confidentiality, they must be knowledgeable in both fields. Among the most significant contributions that libraries and librarians can make to the research and use of health literacy are specific training and duties ^(5,6,7).

2. The Functions of the National Medical Library of India

The NML aims to provide wide and efficient library and information services to health science professionals in India. (The functions of the NML seek to provide comprehensive and efficient library and information services to health science professionals in India.) Building library collection and management is one of the NLM's biggest assets. NLM has an extensive collection of books, reports, serials, back volumes of journals, and computer databases. This greatest biomedical and health resource is used by specialists and professionals nationwide. The continuous price rises by the publications. The shrinking budgets of medical libraries in India have increased the dependence on digital resources of NMLs, all teaching medical professionals, for their research and academic work, in spite of this greater demand for its services. 'NML has such great content, which contains 1.30 lakh books, over 5 lakh journals of back volumes, and about 12,000 government guidelines, reports, and pamphlets. The NML library procures about 1,600 medical journals annually and contains many old books and periodicals. The ICMR library at Kasauli has recently been added to the NML library. It has an extensive collection of video cassettes, compact discs, and rare books.

2.1. MEDLARS

'NML has been providing this service via MEDLINE CD-ROM. The biomedical information sources available for free on the Internet, namely PubMed, PubMed Central, etc., were also accessed to meet the requirements of our users. Recently, the NML is developing a workstation containing 5-6 more terminals fitted with CD writers so that users can download full-text e-journals onto their writable CDs.⁸

2.2. National Medical Library: 'Dte.GHS & MOHFW established the 'National Medical Library Electronic Resources in Medicine (NML-ERMED) Consortium'

to provide national electronic information resources in the medical profession for quality healthcare. Its members include 70 state and federally financed government institutions, including all AIIMS. The members are split into Level I and Level II based on the number of end users at various institutes. Members are not obliged to pay a membership fee, and as part of the NML-ERMED consortium initiative, the MOHFW has given funds to purchase electronic publications. The NML manages the consortium and serves as its headquarters. 'The consortium is led by B. Srinivas, Director of NML, and works to provide access to member institutions. The consortium will be expanded and updated regularly, and relevant and valuable content recommendations are encouraged. At present, high-quality online e-journals (242) have been acquired from five major publishers, such as

- BM-British Medical Journal
- CUP-Cambridge University Press
- Lippincott Williams & Wilkins
- OUP- Oxford University Press
- John Wiley

2.3. Students and Research Perspective

NML enables access to high-impact factor-quality journals faster and more efficiently than print. It is also more economical and more efficient than print. Users have no restrictions on reading, downloading, and printing articles. Enhanced discoverability through the powerful browser and search functionality, multiple users can access 24/7/365 days through static IP-based services and increased productivity and innovation through digital format efficiencies.

3. Health Management Information System (HMIS) Web Portal States are asked to ensure that the following things are available to begin reporting data on the Health Management Information System (HMIS) using the Integrated Health Information Platform (IHIP). Benefits: A) Update Health Facility Master: B) Examination of User IDs & Passwords: C) Creation of User Profiles: D) Creation of Health Facility Directory

3.1. Karnataka State Health Projects: In India, health is a state-level topic, and the Ministry of Health and Family Welfare (MoHFW) serves as a liaison between state health departments, the Planning Commission, and the Central Council of Health. In addition, it carries out a number of national initiatives and implements items on the concurrent and priority lists.

3.1.1. Major Health Project Program Initiatives by the Karnataka Government

a) JANANI SURAKSHA YOJANE (JSY): JSY aims to enhance institutional deliveries of BPL and SC/ST households and decrease maternal and infant death rates. Along with maternity services like four antenatal visits and referrals, this program offers cash help for deliveries in hospitals and at home. For institutional deliveries, cash aid to the mother in rural regions is Rs. 700 per case, whereas in urban areas, it is Rs. 600 per case. A cash support grant of Rs. 500 is also available for women who choose to give birth at home. If government-run hospitals or health institutions do not have specialists on staff, the institution may employ them to handle issues.

b) AROGYA KAVACHA 108: The Karnataka Health and Family Welfare Department partnered with GVK EMRI to form an MOU and "Private Public Partnership" to launch the "Arogya Kavacha" 108 Emergency Service on November 1, 2008, in the state. The goal of "108" is to save lives by providing comprehensive "Emergency Response Service" to those experiencing medical, police, or fire situations through the use of a single, integrated number, "108." Our company operates around the clock, 365 days a year, and we have a fleet of 711 completely equipped ambulances. The ambulances are driven by a certified driver (Pilot) and an Emergency Medical Technician (EMT). The entire state of Karnataka, or all 30 Districts, is covered by this service.

c) JANANI SURAKSHA VAHINI: In 2009–10, the NHM launched the Janani Suraksha Vahini Program to provide pregnant women and unwell newborns/infants with free referral transportation between the facilities 24 hours a day, seven days a week. One CHC, TH, and DH ambulance was selected to serve as the JSV Ambulance. Currently, 180 JSV ambulances are available. According to the KTPP Act, District Health Societies contract with Manpower Agencies to provide drivers. Each vehicle has 3 drivers, 1 employed and 2 contracted, who perform 8-hour shifts.

d) NAGU-MAGU: Postpartum women and newborns are dropped off at their homes from government health facilities. On February 5, 2014, 200 drop-back automobiles known as "Nagu-Magu" were officially launched. One Nagu-Magu vehicle is stationed at each Taluka

Level Hospital and the District Hospital. According to the KTPP Act, District Health Societies contract with Manpower Agencies to provide drivers for Nagu-Magu vehicles.

e) The AROGYA VANI- the Karnataka government started 104:104 program to provide the underprivileged population with complete health care. Patients who live in isolated rural areas and are unable to get in touch with medical staff at hospitals can now do so via Arogya Sahayavani - "104" is a toll-free number where individuals can get information on services offered in public health facilities, counseling, eye bank and blood bank directory services, counseling for minor ailments, and grievance redressal (including services related to epidemics, corruption, hygiene, drugs and diagnostics, ASHA grievances, etc.).

f) VATSALYAVANI: On December 21, 2015, then-Chief Minister Shri Siddaramaiah unveiled "Vatsalya Vani," a three-way phone conferencing structure for the Mother-Child tracking system in Karnataka. Arogya Sahayavani-104 implements this program.

g) SUVARNA AROGYA SURAKSHA TRUST (SAST): The Department of Health and Family Welfare founded SAST in 2009 to efficiently and effectively implement government health projects.

h) ABARK: 'Ayushman Bharat-Arogya Karnataka' Scheme: The Karnataka government has long been a leader in the state's efforts to provide healthcare to its citizens. The first of these schemes, the Yeshasvini scheme, was launched in 2003. Subsequently, in 2009, the Department of Health and Family Welfare formed the Suvarna Arogya Suraksha Trust (SAST), which is registered under the Indian Trust Act of 1882. The vision is to guarantee "Health for All" by offering top-notch tertiary care to the whole populace. Mission: The Program seeks to enhance BPL households' access to high-quality tertiary medical care for illness treatment and to advance overall health.

i) RAKSHAKA VANI: The Government of Karnataka is keen to address the issue of early neonatal and childhood mortality. To accomplish this, the state has implemented several programs to increase institutional births, offering various obstetric services to women in government hospitals through a public-private partnership. The state government has also launched a program named "RakshakaVani" for pregnant women and infants at risk. This program ensures every pregnant woman and infant in Karnataka can access basic obstetric and neonatal services.

j) MENSTRUAL HYGIENE PROGRAM: A 2008 National Family Health Survey revealed that only 58% of Indian women between the ages of 15 and 24 utilize sanitary napkins or tampons. This figure reflects the rural population and contributes to the high prevalence of reproductive tract infections among adolescent girls and women. The first health program targeting rural girls aged 10 to 19 years was started by the Ministry of Health and Family Welfare in 2011 as part of the National Rural Health Mission. This program aims to raise awareness of menstruation hygiene and offer high-quality sanitary napkins at an affordable price.

k) NAGARIKA SAHAYAVANI: With the intention of assisting the populace and providing them with support services. The program seeks to help Karnataka's residents with their issues and complaints. This program offers information about government schemes, programs, and services available in various departments and authorities, guidance for availing benefits, assistance with grievance redressal and queries about various services the state government provides.

4. Role of Karnataka State Public Libraries and Medical Librarians

Public libraries collaborating with medical librarians can provide more services and more effectively for their communities. The main key concepts are

4.1. Medical collections and management: Medical librarians can help establish print medical literature (Pamphlets, Infographics, Post Presentations) related to health problems and how to overcome them. This will ensure that the community has access to updated, reliable, authentic sources.

4.2. Human Library (Information Literacy through programmers): Medical librarians design and implement programs to benefit large groups of community members. First and foremost, they talk with Doctors, including healthcare providers, on how to access good quality healthcare, such as evidence-based medicine, clinical research, or health literacy.

4.3. Collaborative with Medical Institutions and Services: Public libraries may collaborate with Medical Institutions, local hospitals, and clinics so that patients can be well-informed about their conditions. This collaboration can include conducting programs and referral services—medical service through mobile library access to digital sources.

4.4. Access digital resources: not only medical libraries but even public libraries can expand their services through digital health resources, including online databases, e-books, and e-journals. Medical librarians can provide training on how to use them effectively.

4.5 Support for clinical, medical research, and evidence-based practice: Medical librarians can assist healthcare professionals in their research by providing access to scientific literature, helping with literature searches, and offering guidance on evidence-based practice.

5. Future challenges

‘Even with all its achievements, the National Medical Library faces some problems that must be addressed in the future. Some of them are the necessity for modernization, increasing demand for electronic resources and training health care professionals to use digital ones effectively. If we modify this by strategic modernization, expanding digital access, providing user training and fostering greater collaboration it will continue to serve as India’s leading medical library supporting healthcare workers and researchers in the country.

6. Conclusion

‘Boundaries are disappearing between the sources and types of and uses for health information managed by informaticians and librarians. These information changes have impacted the definitions of each professional domain. Evolving definitions reflect both disciplines’ increasingly overlapping research agendas ⁽⁶⁾. Professionals in these disciplines are increasingly functioning collaboratively as the National Medical Library of India has made significant contributions to health informatics and the provision of medical information services. Its extensive collection, innovative services, and dedication to the needs of health professionals have made it a valuable resource in the healthcare industry. By addressing future challenges and continuing to modernize and expand its services, the National Medical Library can ensure that it remains a vital institution for years.

References

- [1] Whitney, W., Keselman, A., Humphreys, B. (2017). Libraries and librarians: Key partners for progress in health literacy research and practice. *Studies in Health Technology and Informatics*, 240, 415–432.
- [2] Nursing License Map. (2020, April 22). What is healthcare informatics? Retrieved from <https://nursinglicensemap.com/resources/health-certificate-courses/what-is-healthcare-informatics/>
- [3] Geda, F. A. (2021). The roles of medical library in information seeking behavior of health care professionals: A review of the literature. *Journal of Hospital Librarianship*, 21(4), 405–416. <https://doi.org/10.1080/15323269.2021.1982263>
- [4] Haque, S. N., Dixon, B. E., Grannis, S. J. (2016). Public Health Informatics. In *Clinical Informatics Study Guide* (pp. 501–520). Springer International Publishing.
- [5] Murphy, J. (2010). Health science librarianship’s legacy to health informatics. *Health Information and Libraries Journal*, 27(1), 75–79. <https://doi.org/10.1111/j.1471->

1842.2010.00882.x

[6] Perry, G. J., Roderer, N. K., Assar, S. (2005). A current perspective on medical informatics and health sciences librarianship. *Journal of the Medical Library Association: JMLA*, 93(2), 199–205.

[7] Bond, C. S. (2015). Innovation in Health Informatics: much is underpinned by eHealth and better information for patients. *Journal of Innovation in Health Informatics*, 22(4), 374–376. <https://doi.org/10.14236/jhi.v22i4.183>

[8] NML-ERMED Consortium. (2024). Ermed.In. Retrieved July 1, 2024, from <https://www.irmed.in/>