CHAPTER: 3

THE REVIEW OF
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03.1 The availability of published literature on the Health Sciences Libraries and Information Services in the State of Karnataka is extremely limited and rare.

Since a major endeavor such as the development and the management of a Health Sciences Library Network has to be based on some principles, it becomes necessary to study those systems that have proved beneficial, sound, useful and are working elsewhere. With this important factor, literature covering the Health Sciences Library Networks from the developed nations—mainly the United States of America [US] is reviewed. The United States leads in this experimentation and it is helpful to take a good critical look at the working of the network of health sciences libraries, the problems faced and solutions sought. Any planning of health sciences library network must be based on principles tried and guidelines followed for successful organization and operation.

A library, specially in the health sciences, must play a teaching role to provide user instruction in identifying and using information resources which has been overwhelmingly documented [2, 3, 34, 85, 157, 164, 233, 238, 250-251, 328, 339, 374, 408-409]. Several forms of user education have been advocated for the benefits of health sciences library users.
and encourage life-long or continuing education for health sciences library staff [61, 80, 93, 125, 128, 130, 162, 200, 223, 273, 315, 324, 346, 364, 375-377].

03. 2 The Health Sciences Libraries and Their Role:

The libraries are the cathedrals of learning and the foundations of educational processes. These are however, lacking in performance [82]. The developed, developing and the third world nations are increasingly becoming aware of the value of scientific, biomedical and technical information, its storage, retrieval and dissemination. The role of libraries in health care institutions must be evaluated in response to the health information needs and requirements of clinicians and the medical or health educators and health professionals.

The exposure to clinical literature will prepare physicians to put into practice the latest advances in diagnostic and therapeutic modalities thereby improving the quality of care in health care institutions.

The users of these libraries are professionals and the most scarce commodity with them is time. They do not have enough time to visit regularly a health sciences library with variety of reading materials providing them information. The librarians being professionals have an obligation to market their services so that the users will pay attention to what
they are missing in their busy schedules. Several concepts of marketing library services have been presented which will advocate library’s and librarians’ case for attracting users to their libraries [72, 119, 162, 266, 411].

03. 3 The Health Sciences Libraries in India:

To become a powerful nation in every sphere of activities, India should have most organized library base and other information resources. The infrastructure of scientific and technical information built over the several decades in the nation is not adequate [16].

Without a comprehensive survey it is difficult to get a true picture of the state of art of health sciences libraries in India [89]. The improvements in health sciences libraries attached to the teaching institutions and district hospitals are very slow [289-290, 292, 294, 295]. The libraries in India have sprung in a haphazard manner [311], and have been wedded to the primitive style of services [68]. It is concluded that the libraries in the nation are at least 50 years behind than those in the developed countries [29] and unfortunately observation of 1967 still holds good [7, 106, 263, 404]. The biomedical education without libraries can not succeed. The role of health sciences libraries in relation to biomedical and health education is well documented [294].
The education for health sciences librarianship in the nation is lacking. The National Medical Library, New Delhi [NML] has, from 1981-1983 trained for a five-week period a total of 64 selected senior professionals in the management of health sciences literature and libraries [28] which certainly is inadequate, though has a little. With such a vast educational institutions in the state in the biomedical and health sciences, there is a need for qualified health sciences librarians. It therefore essential that university based library and information science schools offer graduate courses leading to this speciality. The suitable syllabus for health sciences librarianship have been suggested [261, 293], which are extremely important for proper development of manpower resources and planning [312]. Postgraduate education for health sciences librarians is approachable through internship, certificate program and continuing education involving Regional Health Sciences Libraries, National Medical Library, and University Library Schools [165].

The situation in the state is poorer if not similar to that in the nation. The pathetic, awkward and slow improvements in libraries depict a terrible state of affairs. While some libraries of privately managed institutions have better libraries and offer better services, there is lot more
desired to be done to set right the libraries and their working conditions.

The libraries in the State suffer because of lack of funds. The purchasing of books and subscription to periodicals is defective as every one feels that this is an end-of-the year task. As a result of this practice, entire budget allotted in libraries in not utilized. The collection development of periodical volumes can be successfully augmented with the help of the two Internationally known periodical exchange programs in libraries. The methods of availing the assistance of these exchange programs have been documented, as experienced in one of the health sciences libraries in Bangalore, Karnataka [296]. There are suggestions for the better utilization of limited budget [295]. Application of new technologies is lacking. It is beyond imagination to foresee in a near future any library having computer application. The present status of libraries reflect undoubtedly a view that these are poorly maintained, managed and are not providing effective document and information delivery system to needy professionals [290]. The review literature reveals inclement deficiencies in libraries of Karnataka service and resources wise.
03. 4 The Network:  

"Networking" is a generic term applicable to various situations. In libraries it means sharing resources among one another. The concept of network is not new but has become an essence of today’s libraries and information centers. Several publications discuss all aspects of network development, management, problems and solutions [54, 63-64, 83, 95, 214, 219, 248-49, 252-253, 289-290, 292, 305-306, 312, 353]. The network are essential because the environment in which the libraries functioned in the past have disappeared [304]. For an active networking capabilities, one must consider not sharing of resources but rather sharing of dependency [18]. Cooperation among libraries is a mechanisms that takes hard work, money, staff time and imaginative leadership [127]. The individual library operation can be preserved and intellectual interests of participating libraries can be protected in network environment. The networks are the results of an urgent need faced by libraries, as their collection is insufficient to meet the rightful demands for health information from professionals. These have become the essence of the operation of modern day libraries to meet the complex and diversified challenges from users for varied types of health information. These are regarded as the inevitable solutions to cope with complex situations [311].
At first the networks were an outgrowth of technical services and ILL and are similar to union catalogs whose beginning date from around the turn of the century such as Library of Congress’s [LC] National Union Catalog. But the modern networks began in mid 1970’s.

The network offer a structure for local and regional experimentation which can be adopted for a national system [94]. It makes a strong case for a research study in the India similar to one by Harold Bloomquist in the US in the early 1960s. His study [32] was an eye opener and showed poor conditions of medical school libraries lacking the most basic services revolutionized the health sciences libraries in the US. It recommended and the US National Library of Medicine accepted Federal funding to improve libraries, collection, status, needs, facilities and services etc. Such a study will clearly give ample reasons and justifications to both the government, the managements and the National Medical Library New Delhi to do what is required. The Shankaran committee was appointed in 1979 which completed the survey of NML, New Delhi and submitted a detailed report, findings and recommendations to the Government of India in 1981 which is yet to be accepted [342]. A recent study concludes that health sciences libraries in India are not up to the standards [106]. There are studies after studies, papers after papers describing the horrible
state of affairs in health sciences libraries in the nation. These remain only in journals and in the minds of those who describe the situation. There has nothing been done to either improve or at least look into the working of these learned institutions. Perhaps the Shankaran Committee gives some kind of first hand information on libraries and government machinery will have to take action to set right the discrepancies. The study is now ten year old and further deterioration could be noticed if an investigation is carried out now. It is not surprising that the government has kept mum of the findings of the study, for it does not view libraries as important mechanisms for health and biomedical education.

The literature reviewed on Indian and in particular on the Karnataka Health Sciences Libraries undoubtedly indicate chronic inadequacies in collection, financial resources, technical and administrative support personnel [25-27, 103, 106]. It becomes therefore extremely important that literature available on the health sciences libraries especially in the USA is taken as guidelines. The US is looked up as the leader in this specialization therefore the literature must be further reviewed for application of appropriate theories for the network development in a developing nation with limited resources and in a State with a strong network of medical and allied health education institutes.