

Information Needs and Seeking Behavior of Medical Officers Attached to Rural Hospitals (D H Type - C) in Sri Lanka

Dilhani M.P.P
Library
Postgraduate Institute of Medicine
University of Colombo

Senevirathe, W
Library
Open University of Sri Lanka

Abeyseena, C.
Faculty of Medicine
University of Kelaniya

Introduction

Medical Officers need to update their knowledge with diagnosis of diseases current treatment modalities, guidelines on management etc. in order to provide a better service to the intended communities. Due to geographical and infrastructure, based barriers, the rural medical officers are at a disadvantage when compared with the urban medical officers in Sri Lanka and they do not have adequate access to information and have unmet needs on clinical problems and day to day medical practice. Mendis, (2006).Therefore, information is a prerequisite for medical officers as it creates opportunities to share the world-wide knowledge in their daily practice and for their career advancement.The present study attempts to identify the information needs, perceived barriers and challenges of medical officers attached to “D H Type -C” (rural) hospitals in Sri Lanka.It is evident that medical officers who provide health services to rural communities require range of medical information in time with the quality and quantity for their professional and educational development as well. If these medical officers' information needs are not analyzed in depth, it is not possible to plan and provide necessary information to meet the information needs of the medical professionals. Due to this situation lack of medical information highly affects to patient care adversely. It is also evident that medical officers who provide health services to the rural communities require obtaining information for their carrier development as well.

Objectives

Objectives of the study is to explore the accessibility of medical information for medical officers attached to rural (D H Type – C) hospitals in Sri Lanka and to identify the barriers if any, encountered by MOsattached to rural (D H Type- C) hospitals.

Literatuew Review

This study focuses on the following four models particularly, Wilson's Model of Information Seeking (2000), Leckie et al. (1996) general model of the Information-Seeking of Professionals, Shaughnessy et al.(1994) providing for doctors' information needs model and Can MedsFramework formulatedby Royal college of Physicians in Canada (1996). According to the findings of the survey done by Amararachchi et al (2012), health statistics have revealed that there is a scarcity of specialist doctors serve in the rural and remote areas. The survey done by Pakenham-Walsh (2009) reveals a gross lack of knowledge about the basics on how to diagnose and manage common diseases; after going right across the health workforce and often associated with suboptimal, ineffective and dangerous health care practices. A study done by Dorsch (2000) also confirmed that the information needs of rural health professionals differ from those of other health professionals. Andualem et al. (2013) revealed that it was due to limited access to formal information resources like internet, journals, library service, and in-service training. Health Professionals in Bahir Dar, Ethiopia, are in a greater disadvantage in obtaining major health information resources.

Methodology

This study is carried out as a descriptive study and the research approach is inductive. There are 290 Divisional Type C hospitals located in rural areas in Sri Lankaand there are 572 medical officers attached to the rural hospitals. Cluster sampling method has been used for this study. To achieve the required sample size few clusters called. Namely; Western Province (73 MOs), Southern Province (49 MOs), North Western Province (76 MOs) and Sabaragamuwa Province (54 MOs) wasselected.In these Provinces each Medical Officers attached to the Divisional Type C hospitalshave been selected for the study. There are 252 medical officers who are attached to the Divisional Type C were hospitals selected for the study. A questionnaire and interviews were used as data collection instruments.The questionnaire was structured to clearly identify the important variables relating to the objectives of this study. The survey included variables such as Medical Information Needs (MIN), Medical Information Sources (MIS) and Barriers to use Medical Information (BMI). A questionnaire with close ended questions administered to the Medical Officers was included in the sample. Also interviews (over the phone) were conducted in order to get clarifications about some questions.Data were analyzed using Microsoft Excel 2016 and SPSS (version 22) software packages.

Findings

Out of Two hundred and fifty two (252), two hundred and forty medical officers 95 Percent responded (240). More importantly, 97(40.4%) respondents were females while 143 or (59.6%) were male. This means that the study included more males than females. The findings showed that most of the respondents had more than one reason for using information sought for. When analyzing theareas of information patient records and disease information ranked as very high and drugs and diagnosis information ranked as high. The information needs regarding Diet and Nutrition, medical statistics andMedico legal information has been indicated as 15 Percent very high, 23 Percent high and 55 Percent to some extent. This study revealed formal and informal ways of sourcing for

information by the respondents. Though there is not any availability of a in a library service and the distance from the specialists and consultants 140 (58.3%) of the respondents relied on Textbooks, Colleagues, Specialists and consultants in hospitals, 160 (56.7%) made use of, Internet and Professional News Letters and technical reports conference and research papers were relied on by 90 (37.5%) respondents, while (17.9%) 43 respondents are not satisfied with Drug companies presentations. In addition, 126 and 46 respondents preferred Abstracts/ Indexes and Newspapers/ Magazine. From the study it was further discovered that Textbooks, Colleagues, Specialists and Consultants in hospitals, Internet were still major source of information. Though MOs stated that Journals and Textbooks are very reliable and authoritative due to dearth of above sources directly caused to depend on the internet hence it is easy to access. In addition, the respondents further confirmed that they made use of informal sources of information such as discussion with peers and colleagues, conferences/ exhibition/ workshops/ seminars, This finding is in concordance with that of Amararachchi et al (2014) Chinweetal (2011) Curran et al (2006) Cynthia et al (2015). To obtain data on the barrier, the respondents encountered in the use of information resources, when the need arose, 64 (26.66%) of the respondents indicated they had no problems while the remaining 176 (33.33%) stated what they had problems. Also, MOs in order to meet their information needs, encountered a number of barriers. The barriers that were identified and analyzed into four main themes: personal barriers 33 Percent, paper related barriers 23 Percent, electronic based barriers 33 Percent and channel related barriers 11 Percent.

Conclusion

Information is a critical factor that affects the provision of health care for patients, conducting research and educate in health professionals and not only in a developing country but also in the world in general. According to the study it is quite obvious that the information resources and services provided for the use of respondents in the studied medical libraries were inadequate. Therefore this study suggests that health information and services by the authorities in Sri Lanka should pay more attention to develop the medical information retrieval for the Medical Officers who provide their service for the rural community. It was also gathered that Medical Officers are not in a position to access required resources in the intended format and due to lack of time and lack of telecommunication infrastructure. Therefore, efficiency of medical officers in retrieving information within their limited time is a serious factor that had affected them in the information access. They also do not have access to formal information system established when serving the patients daily. They had to depend on medical information through their seniors or colleagues and have to reach them over the telephone to obtain the same. It is also observed that though ICT equipment, internet connection provide by the Ministry of Health in Sri Lanka it was very difficult to access to the medical information due to geographical location of some hospitals.

Keywords: Information Need; Medical Information; Medical Officers; Information Barriers; Sri Lanka

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