The 16TH Biennial Conference of Association for Health Information and Libraries in Africa (AHILA) held at the Otunba Subomi Conference Centre, University of Ibadan, Nigeria,

October 14-18, 2019

Report Submitted to:

World Health Organization (WHO) Afro Region, Congo Brazzaville and WHO Nigeria

November 8, 2019
Contents

Acknowledgements ........................................................................................................ 3
Executive Summary ....................................................................................................... 4
Pre conference Workshops .......................................................................................... 6
Conference Preamble ..................................................................................................... 15
  Day 1: Opening Ceremony and Plenary sessions ..................................................... 16
  Day 2: Plenary sessions and abstracts driven paper presentations ................. 23
  Day 3: Plenary session and General Assembly .................................................... 35
Appendixes: Names and contact details of delegates .............................................. 39
Acknowledgements

On behalf of the 16 AHILA Conference Local Organizing Committee, the AHILA Nigeria Chapter and the entire AHILA family we thank most sincerely our partners, collaborators, organizations and institutions for their support that enabled us to host a successful conference.

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We are very grateful to the World Health organization (WHO) for sponsoring the interpretation services provided by two French and two Portuguese interpreters during the conference. As well as sponsoring one Key speaker and ensuring that librarians from WHO country offices across Africa attended the conference. Our appreciation and gratitude goes to the Regional Director for Africa Dr. Rebecca Moeti for approving all our request for support to host the AHILA conference. Words are not enough to express our gratitude to you for making this conference a unique and successful event. To Pascal Mouhouelo, our dear colleague in WHO Afro Library, Congo Brazzaville, we appreciate you for your kind support, dedication and commitment to AHILA.

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To the keynote and plenary speakers, we say “thank you” for a job well done and to the delegates we thank you very much for attending the conference.
Our sincere thanks goes to the AHILA elders namely Professor Maria Musoke for her suggestions, advice, and for working tirelessly with Mrs Nancy Kamau in revising the AHILA constitution. We are grateful to both of you for serving as our organizational memory, directing us on the path to thread in order for AHILA to continue to meet the set objectives.

**Executive Summary**

The 16th Biennial International Conference of the Association for Health Information and Libraries in Africa (AHILA) was held between 15th to 17th October 2019 in the Otunba Subomi Conference Centre, was held at the University of Ibadan, Nigeria. One hundred and nine (109) delegates attended the conference, including 72 Nigerians and 37 international delegates from other 22 countries in Africa, Europe and the United States of America. The theme of the conference was “Achieving health lives and well-being in Africa through access to and use of information”. The conference consisted of three hands-on training workshops which took place on the 14th October 2019, 2 keynote lectures, 9 plenary sessions, abstract-driven presentations, and the AHILA General Assembly. The Scientific Committee received 46 abstracts, 38 (83%) were accepted, and 30 (79%) were presented at the conference.

Professor Idowu Olayinka, the Vice Chancellor of University of Ibadan, declared the conference opened and 7 dignitaries gave goodwill messages during the opening ceremony of the conference. On the last day of the conference, 17th October 2019, the AHILA General Assembly was held and new officers were elected to serve as term of two years. New executive members were elected as shown below:

1. President: Dr. Grace Ajuwon
2. 1st Vice President: Ms. Cecile Coulibaly
3. 2nd Vice President: Mr. James Kimani
4. Secretary General: Dr. Haruna Hussein
5. Assistant Secretary General: Dr. Stella Anasi
6. Treasurer: Mr. Alfred Marsatain Masiteng
7. Executive Members: Mr Richard Ssenono; Mr. Abdrahemene Anne and Mercy Monde.

The newly amended constitution was also presented and ratified during the assembly.
The seven resolutions adopted at the conference were that:

1) AHLA should support ongoing initiative towards the development of a curriculum for Health Sciences librarianship at different levels (Diploma, Bachelor, Master, PhD) to harmonize the education of health information professionals in Africa.

2) AHLA should initiate development of short training course and other continuing education programmes in health sciences librarianship to upgrade the knowledge and skills of serving medical librarians and other health information professionals.

3) AHILA to encourage and support development of curriculum for health information professionals in Africa that is relevant in the 21st Century. AHILA should promote the use of 21st century learning framework for development of the curriculum and training.

4) Hands-one skill building workshop should continue to be a key component of all AHILA conferences.

5) Health sciences librarians should take leadership in conducting systematic reviews; they can constitute a team, formulate appropriate research questions, conduct the research and publish from the review.

6) Health sciences librarians should improve their knowledge and skills on ICT in order to improve service delivery to their clients.

7) It was noted that some papers and general writing by authors at the AHILA 2019 conference lacked scholarship. It was suggested that workshop on research and academic writing should be organized during the next AHILA congress.
Monday October 14, 2019

AHILA Pre-Conference Workshop,

A one-day pre-conference workshop was held on Tuesday October 15, 2019 at the Otunba Subomi Conference Center, University of Ibadan, Nigeria. Three parallel sessions were held. The titles of each of the sessions are:

1. How to Conduct Systematic Review.
2. Synchronous Online Teaching- Keeping Virtual Classroom Students Engaged and Cochrane Library and Search Strategy, and
3. How to Write and Present Abstract at an International Conference.

A summary of the process of the workshop are provided below:

Workshop 1: How to Conduct Systematic Review

Members of the Network of African Medical Librarians (NAML) facilitated the workshop. The facilitators were:

- Ms. Christine Wamunyima Kanyengo (University Liberian, University of Zambia)
- Dr. Alison Kinengyere (Library and Information Science Specialist and Head of Sir Albert Cook Medical Library, University of Makarere, Uganda)
- Mr. Richard Ssenono (Deputy Head of Information Services, Infectious Diseases Institute, University of Makarere, Uganda)
- Dr. Rehema Chanda-Mallya (Research Information Scientist/Lecturer at Muhimbili University of Health and Allied Sciences, Tanzania)
- Mrs. Nancy Kumau (Deputy University Librarian, Kenyan Methodist University)
- Mr. Abdrahamane Anne (University of Science Bamako, Mali)
- Mr. Masimba Muzinga (University of Zimbabwe).

A total of 15 delegates attended the workshop whose objectives were to expose the participants to introduction of systematic reviews. The contents covered during the workshop are definitions,
relevance of systematic reviews, and hierarchy of evidence, differences between traditional reviews and systematic reviews and quality of reviews. Systematic reviews were noted to be distinct with the use of protocols, well documented scientific methods and high quality evidence that are being involved. It was also emphasized that systematic reviews unlike traditional reviews require generating research questions that need to be answered.

There were hands-on sessions where participants were taken through the processes of title registration and protocol developments. The use of International Prospective Register of Systematic Reviews (PROSPERO) was particularly discussed. Title registration was considered to be essential for making users of health evidence to know things that are going on or being done. It was also noted as being necessary for avoiding duplication of systematic reviews by different teams of authors. The development of protocol was emphasized to be helpful for stimulating authors to anticipate potential methodological challenges as well as useful for minimizing potentials for reporting bias.

There was a training session on assessing the quality of systematic reviews using AMSTARS2. Samples of an AMSTARS2 tool and copies of a systematic review publication were provided to participants for brief practical assessment. It was emphasized that AMSTARS2 is one of the tools being used for assessing the quality of systematic review to know if the right procedures have been used. It was noted that title of the systematic review should bring out the elements of PICO (Population, Intervention, Comparator group and Outcome). The use of PRISMA flowchart to improve the reporting of systematic review and meta-analysis were discussed. There were discussions on risk of bias and how to avoid or minimize biases. Different procedures for dealing with biases were highlighted. For instance, participants were informed that they could use the inter-coder reliability feature of NVIVO software to avoid biases.

There was a training session on roles of Librarians in systematic review process. There were discussions on the various roles of Librarians in systematic review process that which included: formulating of PICO; design and running of search strategies; ensuring that search methods are being done in line with standards; giving advice to authors on use of search methods; and
supporting the use of systematic reviews software. It was emphasized that in order to minimize data bias, at least three different databases should be used for systematic reviews.

Participants were taken through an extensive session on search strategies. Participants were taken through the definition of search strategy, importance of search strategy and various forms of search strategies. It was emphasized that it is very important to have a structured way of following things in the conduct of systematic review. It was noted that research questions should be used to drive search strategy. The need to follow the PICO model in systematic review was stressed. The scope of review, use of synonyms, relevance of databases and use of boolean operators were discussed as essential details that need to be considered in achieving good and productive data search. There were vivid explanations on how to make use of keywords, controlled vocabulary, alternative terms, truncation and wildcards for conducting literature search. Emphasis was laid on the need to evaluate, validate and verify the results to ensure a comprehensive search. In addition, there was a practical demonstration session about how to use Pubmed, MeSH and clinical trial databases. Before the workshop was ended there was awareness creation on Network of African Medical Librarians Association (NAML) and their aspiration to extend the membership of the association to young vibrant and committed people in various institutions across African countries.

**Comments and issues arising from the training**

- Librarians should have the skills to advice titles that are not good for systematic reviews.
- Participants should encourage their institutions to include librarians, statisticians and content experts such as epidemiologists and medical doctors in conducting systematic reviews.
- Participants were encouraged to employ the combination of online databases, grey literatures and other literature sources including conference papers and consultations with experts for comprehensive and effective search.
Participants were encouraged to make use of at least three databases for conducting systematic reviews in order to minimize database errors and ensure quality systematic reviews.

**Workshop 2: Synchronous Online Teaching- Keeping Virtual Classroom Students Engaged” and “Cochrane Library and Search Strategy.**

Mr. Thomas John Allen, a librarian at World Health Organization (WHO) Headquarters in Switzerland, facilitated the workshop. Twenty-two (22) delegates attended the workshop.

The objectives of the workshop were to:

1. dispel some of the myths of online teaching;
2. improve the learning experience and environment for their students
3. adapt instructors teaching style to an online environment

The contents of the workshop were: types of online learners, tools for online learning, strategies for engaging online learners, and role of advertisement in online learning.

The facilitator began by mentioning the four different kinds of learners which are pragmatists, theorists, reflectors and activists. The facilitator described pragmatic learners as those learners that participate in the teaching. He mentioned that “for pragmatists, getting the job done is their primary concern; they are involved in a lot of movements”. The theorists were described as categories of people that need to read, listen and understands. He further stated that they do a lot of pondering and introspection. The facilitator described activists as “individuals that are communicative and interactive”. He further described them as people that love group work. The reflectors were described as those that usually seat far away from the instructor and display ability of wanting to learn.

The facilitator gave a list of some tools that can be used in order to interact with the students which includes a software called WEBEX often used by the WHO in online teaching. He emphasized that the interactions should be done every 3 to 5 minutes to keep track of what the
online participants are doing. He noted that online students can also be in form of a video conferencing where students can see each other.

In engaging the student in an online teaching, the facilitator made mention of introduction of activities to keep the students active such as chatting which students occasionally in order to get their attention. The facilitator also explained that pop-up questions can be introduced all with a view to engaging the participants. It was noted that it is a good idea to have a second person in an online setting to handle logistics. The facilitator went further to explain that teaching session should be broken into short sessions and commercial breaks could be introduced for complex procedures.

The facilitator spoke about advertising online course or programme. The facilitator mentioned that as much as many people do not like online courses, but advertising online courses can help to promote it and make people to be aware of the benefits of online courses. He noted advertising for online courses should not be too far from when the classes will commence. He proposed that advertising should be done about two weeks to the commencement of the course. He also emphasized that close to the day the course is to commence, alert and reminders should be sent to participants even fifteen minutes to the commencement of the online course.

The teaching session was followed with a practical session where participants were divided into groups. Some participants were instructed to back a speaker and the speaker was expected to be communicating with them. The purpose of this exercise was to learn to talk to a void which is a typical representation of facilitating an on-line course. In experimenting talking to the void, the facilitator mentioned that the speaker must learn to talk about things that are of collective interest to the audience bearing it in mind not to talk about controversial issues. Thomas Allen emphasized that an online training facilitator must learn to be careful with the microphone. He enjoined that music can be played and should have water available as much as possible. He advised that an online class should not be more than 90 minutes with 60 minutes being used for active teaching and the remaining thirty (30) minutes for questions and answers.
The second component of the workshop was on Cochrane Library. The facilitator described the usefulness of the Cochrane Library which consists of over 7,000 completed reviews with 2,400 protocols in html and Pdf formats. He pointed out that Cochrane review is important because of its high methodological standards. He described Cochrane as the most reliable and objective for evidence-based researches. He said that in Cochrane reviews, two groups work simultaneously in order to eradicate duplication of work, the systematic reviews also occur every two (2) years to determine what needs to be updated and if materials are old, authors are contacted about update. He went further to explain to the participants how to access Cochrane on the internet using the ‘HINARI.

The session ended with questions and answers from the participants.

**Workshop 3: How to Write and Present Abstract at an International Conference**

Professor Ademola Ajuwon, Visiting Professor, School of Public Health, University of Witwatersrand, Johannesburg, South Africa, and Mr. Bukola Oyejide, Deputy Registrar, University of Ibadan, Manager, Journal of Medicine and Medical Sciences, facilitated the workshop.

Nineteen (19) delegates attended the workshop whose objectives were to

- List types of scholarly abstracts
- List the components of a scholarly abstract
- Describe the characteristics of each type of scholarly abstracts
- List tips for writing good abstracts
- List tips for oral and abstract presentations
- Identify the ethical issues involved in the development and presentation of scholarly abstracts
The topics discussed during the workshop were definition, types and features of abstract, tips for abstract presentation, format of writing abstract, development of poster abstracts, tips for oral presentation of abstract, poster presentation and ethics of writing and presenting abstracts.

**Definition, Types and Features of Abstract:** Multiple definition of Abstract was given among which is defined as a summary of a research, idea, project or activities, you plan to present at a conference. Abstract was also described to be the only piece of work, the conference organizers will see, so it should be well-written with clarity, providing all relevant information in an appealing manner. Research, project and conceptual abstract are the three major types of abstract.

**Tips for Abstract Presentation:** A good abstract starts with a good title. The title must be short and attention catching that describes the research in the body of the abstract which must include; study population, subject matter and the setting. Useful tips were also recommended as: ensure that your research fit the theme for the conference, follow the conference guidelines (title, word limit, sub-headings, contact details format, key words, etc.), limit your title to 12 words or less; title is gateway, describe background or problem your research addressed, describe how you conducted the research, discuss the key findings, conclusion and proffer recommendations. Also read accepted abstracts from previous conference of your choice, revise, review, peer review and submit early; before deadline.

**Format of Writing Abstract:** Another definition of abstract was given which share similarity with the previous definition. Types of abstract formatting was stated as structured and unstructured abstract formatting with detailed information on its importance and characteristics. Information on how to prepare an abstract was shared among participants and common reasons why abstracts are not accepted for presentation was stated as: Subject matter not appropriate, information not new enough, a duplication of other submissions, format not following guidelines, poorly written, background not a summary of hypothesis, methodology inadequate or insufficient to support conclusions, controls are absent or inadequate, statistical evaluation inadequate or absent, summary of essential results is inadequate or absent, data are not included
or offer inadequate/insufficient support for conclusion and submission of reports from incomplete or ongoing studies.

**Development of Poster Abstracts:** Poster was defined by encyclopedia as an eye-catching printed paper announcement or advertisement that is exhibited to promote a product, event, or idea while a scientific poster can be thought of as a visual abstract that blends together text and graphics to effectively convey your research. Other rudiments of poster development for abstracts were also stated like important points for consideration, qualities, what to have in mind when designing the poster, need to revise the draft poster what a poster entails and its importance. The presentation was followed by pictures showing different types of abstract poster and participants could critique them for better understanding.

**Tips for Oral Presentation of Abstract:** This include; Prepare your slides based on the time available, confirm time available for presentation, arrive early, do not try to say too much; audience have short attention span; many can read details in your slides, maintain eye contact with audience, improve writing style, mind your spelling, develop public presentation skills, abide by the rules of use on power point and take note of non-verbal communication.

Additional requirement includes; find out about the profile (literacy, sex, profession etc.) of your audience, rehearse your presentation, arrive on time & keep to time permitted for presentation, use appropriate IT (power-point), have back-up plan (hard copies of your paper), focus on your audience not the slides, rehearse your paper in front of a friend or colleague, be familiar with structure of room where you will make your presentation, rely on technology; but have back-up plans and expect questions including tough ones.

**Poster Presentation:** The facilitator gave an overview of the session, stated the expected outcome of the presentation, defined poster and listed the features, essence and structure of poster. Additionally, he gave practical illustrations on how to design posters; simple rules for preparing and presenting posters; tips and tricks of presenting scientific posters.
Ethics of Writing and Presenting Abstracts: The facilitator briefly defined research and the six stages of research. After which scientific research and misconduct was also defined. Examples of misconduct are falsification, fabrication, plagiarism, multiple presentation of same abstract, gift authorship and simultaneous submission of an abstract to/for many conferences. Emphasis was then laid on the nine best practices in publications; Publish results in an open, transparent and accurate manner, as soon as possible, all authors should be fully responsible for the contents of the publication, complimentary or gift authorship should be avoided, criteria for establishing the sequence of authors should be agreed by all, ideally at the start of the project, all contributions by collaborators and assistants should be acknowledged with their permission. All authors should declare any conflict of interest, intellectual contributions of others should be acknowledged and correctly cited, honesty and accuracy should be maintained in communication with the public and the popular media, financial and other support for research should be acknowledged.

Conclusion

The workshops provided opportunity for delegates to acquire knowledge and skills relevant to conducting systematic reviews, conducting online training sessions and development of abstracts. The workshops also provided opportunity for delegates to network as they worked in small group sessions, thus achieving one of the goals of the conference which was to create a forum for local and international delegates to learn and share ideas during the conference.
Preamble
The 16th Biennial International Conference of the Association for Health Information and Libraries in Africa (AHILA) was held between October 14-18, 2019 at the Otunba Subomi Conference Centre, in University of Ibadan, Nigeria. The theme of the conference was “Achieving health lives and well-being in Africa through access to and use of information”. The AHILA conference consisted of hands-on workshop, plenary sessions and scientific presentations of abstracts.

The Delegates
A total of 109 delegates comprising 53 males and 57 females, 73 Nigerians and 36 international delegates attended the conference (see Appendix 1 for details). The Nigerian delegates came from 42 institutions including universities and teaching hospitals. The 37 international delegates are from 22 countries across Africa, Europe and America. Although the majority of the delegates were medical librarians and health information specialists, other categories of professionals including health workers, academics and representatives of health government agencies attended the conference.

The Objectives
The objectives of the regional conference were:

✓ To provide a platform for discussion about the ways in achieving health lives and well-being in Africa through access to and use of information

✓ To review and learn from the good practices and experiences of colleagues, different professionals and institutions in the context of achieving health lives and well-being in Africa through access to and use of information in order to make delegates to become equipped with new knowledge, functional skills and generate ideas.

✓ To provide platform for networking and collaboration among various participants.
Day 1: October 15, 2019

Opening Ceremony

The opening ceremony began at 10.15am. The AHILA president – Dr. Grace Ada Ajuwon, presented her welcome address in which she noted that the theme of the 16th Biennial AHILA congress - “Achieving health lives and well-being in Africa through access to and use of information” was carefully chosen to reflect the Sustainable Development Goals (SGD 3). She affirmed that the conference was designed to provide opportunities for delegates to learn, share, and acquire new knowledge, skills, network with colleagues and professionals from different African countries, Europe and America. She concluded her address by expressing deep appreciation to the organizations and agencies that provided support for the conference including the University of Ibadan Management, Medical Library Association of Nigeria, Elsevier Publishers, World Health Organization (WHO), Safari Books, Nigeria, the United States of America National Library Medicine (NLM), and Keynote speakers.

The Chairman Local Organization Committee (LOC), Mr. Timothy Shola Abolarinwa, also heartily welcomed all the conference delegates and encouraged them to take advantage of various keynote lectures, plenary sessions and abstract-driven presentations to improve their professional experience and skills. He ended his speech by wishing everyone present a rewarding, wonderful and fulfilling time.

Professor Idowu Olayinka, the Vice Chancellor of University of Ibadan, who served as the Chairman of the occasion, welcomed all the participants and appreciated AHILA for bringing the conference to Ibadan. He enjoined the participants to visit the serene environment of the University and notable places in the ancient Ibadan metropolis. He then formally declared the conference opened.

The following persons gave goodwill messages during the opening ceremony:
1. The University of Ibadan librarian, Dr. Helen Komolafe Opadeji
2. Representative of the Commissioner of Health in Oyo State, Dr. Abbass Gbolahan
3. Medical Librarian, College of Medicine, University of Ibadan- Dr Josephine Igbeka
4. President, Nigeria Medical Library Association – Mrs. Agnes Ola Oye
5. Representative of Director of African Library Association and Institutions (AfLIA)- Dr. Ayo Alonge
6. Head, Department of Library, Archival and Information Studies University of Ibadan- Professor S.O Popoola and
7. The Chief Executive Officer (CEO) of Safari Books Limited- Chief Joop Berkhout OON.

Highlights of keynote lectures

As scheduled, two professionals, namely Ms Christine Wamunyima Kanyengo, University Librarian, University of Zambia and Dr. Abib Olamitoye, the Chief Executive Officer, Ibadan Central Hospital, gave keynote addresses.

Ms. Kanyengo’s presentation was titled “Achieving healthy lives and well-being: what role for Libraries and Librarians in Africa”. She identified the role for libraries and librarians towards achieving healthy lives and well-being in Africa to include supplying information to caregivers, supporting research in a digital world, provision of consumer health information, publishing, development of literacy skills and systematic review. She asserted that she dreams ‘that librarians will become champions in systematic reviews’ and encouraged librarians not to be discouraged as a result of the various challenges that are facing the profession in Africa. Ms concluded her presentation by appreciating all organizers wishing all an educative and fruitful congress.

In his lecture titled “Using information to generate health and wealth, Dr Olamitoye, narrated using photos and stories, his own life story and how he spent his childhood days in a village in Ondo, State Nigeria and later found his way to Lagos, Nigeria where he started his primary education at the age of 12 years. He stated that in spite of his poor background he was able to
overcome his academic struggles and accomplish his dream of becoming a medical doctor by cultivating the behaviour of avid reading and deliberate searching for helpful information. Dr Olamitoye emphasized that as a medical student, he read a lot of personal development literature and motivational books like ‘How to Win Friends and Influence People’, ‘The Instant Millionaire’, ‘Think and Grow Rich’ and ‘Richest Man in Babylon’ among others which served as his road map to success. He encouraged his audience to read good books in order to find solutions to their challenges. He provided several nuggets on how people can use information to generate health and wealth. For example, he said that “the difference between billionaires and beggars is information”. He further asserted that the key to achieving healthy life and wealth is searching for right information. He advised that business endeavours should never be started without first reading sufficient books and acquiring necessary information. He opined that “individuals should know what they want, realize what other people have done in the areas of what they want and read good books”.

Summary of Plenary Sessions

Evidence Project Presentation 1:
Professor Maria Musoke served as the chair of the first two plenary sessions on evidence project. The evidence project presentations (evidence project presentations 1 and 2) focused on use of ‘UpToDate. Julie Rosenberg, from the Harvard School of Public Health, USA, made the first project presentations. She justified the importance of the use of ‘UpToDate’, an evidence based medicine database and stated that the goal of creating it was to improve access to appropriate health information at the right time and deliver the best care. She further explained that in resource-constraints settings the burden of diagnostic error was large, therefore the software was aimed at improving accurate diagnostic testing, improve access to diagnostic testing, non-electronic record keeping system, reduce scarcity of provider, and high burden of disease. Ms. Rosenberg also stated that in the US, providers rely solely on evidence-based clinical resources such as ‘UpToDate’ for clinical information. She explained that ‘UpToDate’ is an electronic evidence-based clinical decision support tool with over 6900 world-renowned physician authors
which is available both online and offline. She also demonstrated how the programme works, eligibility criteria and gave a report (positive feedback) from a pilot study conducted in Rwanda. On a final note, she gave the website for application (www.better-evidence.org) and concluded that UpToDate is a resource that has been linked to better health outcomes. She encouraged medical librarians to advocate for and support this resource in their institutions.

**Evidence Project Presentation 2:**

The second “evidence project presentations 2” session was a practical demonstration of how ‘UpToDate’ application works. Dr. Alison Kinengyere, the Head of Head of Sir Albert Cook Medical Library, University of Makerere, Uganda, co-presented this session with Ms. Rosenberg. Ms. Rosenberg explained the application process for institutions who wish to make use of ‘UpToDate’ and stated that institutions who wish to apply for ‘UpToDate’ have to work with their IT department and that access would require the authorization of the Vice-Chancellor or Dean as he or she will be responsible for signing agreement documents. Both Julie Rosenberg and Dr. Alison Kinengyere took turns to present practical demonstration of how UpToDate works. Various features of UpToDate tool were explored including how to look out for information to support clinical decisions, obtaining references, sharing the information from the tool, graphic interaction feature as well as the use of its calculator feature for relevant calculations such as BMI (Body Mass Index), conversion of measurements for temperature. The two presenters shared experiences of how UpToDate had been usefully used in Tanzania and Uganda. It was noted that UpToDate contents are highly credible and could reduce diagnostic errors to barest minimum. It was emphasized that UpToDate has almost 7,000 authors who provide updates the contents. The audience asked questions that were clarified after which the session ended.
Plenary 1b:
Professor Maria Musoke directed the next plenary session on “Education and training in health sciences librarianship in the 21st century: Is the curriculum addressing the needs? Two professionals, Ms Rena Lubker, a research and education information specialist at the Medical Library, University of South Carolina, USA and Dr Abiola Abioye, a lecturer from Department of Library, Archival and Information Science, University of Ibadan spoke at this session.
In her presentation, Ms. Lubker listed the responsibilities of medical librarians in the USA, including facilitating access to quality health information, answering a surgeon’s call from a hospital emergency room for information, responding to consumer health request for health information and teaching health information topics. Ms. Lubker asked delegates of their perceived competence to perform these roles to which only four participants affirmed their perceived confidence. She provided suggestions on things that health sciences librarians can do to become better professionals including structured apprenticeship, improvement in critical thinking, and need for librarians to be life-long learners. She ended her presentation with the advice that health librarians should always learn new things to be able to meet up with the challenges of the work.

Dr Abiola Abioye gave his own presentation citing examples from the Nigerian environment. He emphasized that none of the institutions in Nigeria including University of Ibadan have specialized training for medical librarianship, stating that available training is for general librarianship. He affirmed that some universities in USA like University Alabama for example, has specific training programmes for health sciences librarians. He concluded that the training curriculum of Nigerian Universities are not sufficiently specific enough for equipping students to serve as health sciences or medical librarians using the American Medical Library Association standards. He recommended development of curriculum for the effective training of health sciences librarians in the country.
The acknowledgment of the gap in the training of health sciences librarianship prompted unanimous suggestion of the need to urgently develop curriculum for training of medical librarians in African Universities. Mr Haruna Hussein from the Tanzanian Ministry of Health provided information about the existence of a-3-year health sciences information diploma programme being pilot-tested in 3 institutions in Tanzania.

**Plenary 1c**

Mr. James Kimani of Book Aid International, Kenya, moderated the third plenary session, in which Dr. Mohammed Tanamly, Elsevier Sales Manager for Africa, presented a paper titled ‘transforming medical education from class to clinical practice with digital knowledge’. He emphasized that clinicians, university teachers, resident doctors and medical students struggle to have access to good medical textbooks. He noted that Elsevier has over 200 medical textbooks in over 50 medical specialities and explained how Elsevier unique online Health resources called “Clinical Key” help students, teachers and universities to improve learning outcomes and clinical decisions. He opined that many medical students in Africa rely on online materials or resources like Wikipedia which often contain some errors. Dr. Mohamed further commented that a study done by Elsevier has shown that 93% of staff and students that have been using “Clinical Key” expressed their willingness to continue to ask for access to “Clinical Key”. According to him, “Clinical Key” has over 1,000 full text reference textbooks, more than 650 journals and over 2 million images in it. Reacting to the presentation, a delegate from University of Jos, Nigeria confirmed that “Clinical Key” is a good medical resource widely used in his University. Other delegates encouraged Elsevier to work with the World Health Organization (WHO) to explore how to make medical textbooks and resources available in Africa at low costs. The Elsevier Sales Manager explained that Elsevier resources are available in sub-Saharan Africa at discounted prices.

Mr Segun Aregbesola from Safari Books Limited, made the second presentation on ProQuest and Mallory. He mentioned that ProQuest Central has over 425 publications, more than 400,000
e-books, over 2 million journals, key magazines and newspapers that furnish people with relevant and current information. He informed participants to encourage their universities to take advantage of ProQuest to enhance effective teaching and learning in their institutions. He also advised that “due to the cost of procuring ProQuest, two or more institutions can come together to form a consortium to acquire ProQuest contents”.

Dr Mathew Peligry made his own presentation on Mallory. According to him, Mallory, established in 1984, is a leading bookseller in Africa with long-term relationship with several main publishers on the continent delivering low-priced educational books. Dr Mathieu spoke about the new online portal of Mallory and provision of books covering subjects like cataloguing. The session ended with questions and clarifications from delegates.
Day 2, October 16, 2019

Plenary session 2a:

Mr. Richard Ssenono, from Makerere University, Uganda, moderated the plenary session which began at 8.35am. Mr. Ibrahima Bob, from the British Embassy in Senegal, delivered the first paper titled, “Reaching out to underserved communities to achieve healthy lives and well-being in Africa: contributions to health information professionals”. He started the presentation by defining information as the key to health system and emphasized that health information is very important in improving health systems and helping in policy making. He lamented that in Africa many health professionals and researchers obtain information from patients and communities without providing appropriate feedbacks to study participants. He noted that every health campaign should have a proper campaign guide which involved: objectives, target population, strategy, implementation and evaluation. He concluded by stating that the first vector of illness/sickness is ignorance, therefore information should be at the verge of analysis not medical approach. There were several contributions from the audience that health sciences information professionals should be involved in the design of IEC (Information, Education and Communication) materials and use of technologies such as SMS text messaging to reach out to underserved communities to share basic information especially in times of epidemics like Ebola.

Dr Grace Ajuwon, the President of AHILA delivered the second paper titled “Teaching high school students to use online consumer health information resources through mobile phone: outcome of a pilot project in Oyo State, Nigeria”. She described the methodology of implementing the intervention project targeting high school students in Ibadan metropolis and Oyo town and how it was evaluated. The intervention included training of students as peer educators, development and distribution of handbill/leaflets. She confirmed that trained peer educators delivered consumer health information on various health issues using their mobile phones. Evaluation results showed that peer educators reported significant increase in knowledge on CHI after attending training program. She also highlighted the challenges encountered by peer educators in the project which include poor network, insufficient handbills and difficulty in
discussing sexuality among peers. Dr Grace Ajuwon concluded that it was feasible to train volunteer high school students to deliver consumer health information using mobile phones. She recommended that the training for high school on the use of mobile phone for consumer health information on various health issues should be scaled up and further explored.

Abstract-driven Presentations 1:

The first abstract-driven presentations started around 9.30 am on day two of the conference. Ms. Emma Ndalameta-Theo, from the University of Zambia, delivered the first presentation titled “The path to the development of an African Network of Knowledge Brokers”. She stated that the formation of African Knowledge Broker originated from a course attended by the 8 librarians from Zambia and Zimbabwe. Those trained were expected to be skilled knowledge brokers who provided knowledge integrated into the routine work practice of the healthcare workers they supported. Ms. Ndalameta-Theo concluded that the partnership between librarians as knowledge brokers and health workers was beneficial in the sense that allowed reduced gaps between the health workers’ knowledge and their service delivery practices.

In his own presentation, titled “converging blockchain and next-generation artificial intelligence technologies to decentralize and accelerate biomedical research and healthcare”, Mr. Iraneus Ogu, of the Africa Blockchain Artificial Intelligence for Healthcare Initiative, Insilico Medicine, Inc, Abuja, Nigeria, described how use of artificial intelligence could be developed for data management and analytics system. This is expected to improve record keeping and utilization of health information such as test results and drug delivery. He recommended that healthcare systems should take advantage of recent developments in digital health records management and analytics for more efficient healthcare delivery, and better health outcomes.

The presentation for Mr Kimani was titled “improved quality of medical care in Uganda through medical books provision”. He explained that Book Aid International is a leading international
book donation and library development charity registered in the United Kingdom. He disclosed that in 2018, Book Aid International sent 1,236,538 books to over 3,000 libraries in 25 countries. He further revealed that between 2018 and 2019 they have supplied over 2,000 medical books in 7 teaching hospitals in Uganda. He encouraged delegates to take advantage of this opportunity to register with the organization in order to access health-related textbooks for staff and students in their different institutions.

The next presentation was delivered by Dr. Ajuwon, who described activities carried out under the project “Development of the African Digital Health Library (ADHL): Experience at the medical library, University of Ibadan, Nigeria”. She stated that institutional repository project has led to the digitization of over 1,000 theses and dissertations written by students in the College of Medicine, University of Ibadan. She identified challenges encountered during implementation of the project including inadequate power supply, technical problems, institutional problems and lack of interests from some authors. She concluded that ADHL has made huge contribution to the development and preservation of institutional scholarly heritage.

Ms. Mercy Monde from the University of Zambia made a presentation of the Zambian component of the ADHL project, titled “Implementation of the Digital Health Library (ADHL): Zambia project’. She stated that the project was up and running as digital health repository was already created and was freely available online. She remarked that the project had provided the opportunity to increase the visibility of research conducted in Zambia.

Mr. Pascal Moulvelo, from WHO African Regional office in Congo Brazzaville, delivered his presentation titled “Contribution of the WHO Regional Office for African library to health development”. He said the WHO African library provides the following services maintaining of database, information sharing with partners like African Union, building and strengthening capacity and publication of relevant health policies.
Abstract-Driven Presentations 2

The ‘Abstract-Driven Presentations 2’ was organized into 4 breakout sessions focusing on 4 sub-themes, namely 2a-2d, and conducted concurrently.

*The breakout session 2a*

Ms. Lubker moderated this section whose theme was “Application of ICTs to Support Medical Education, Quality Health Care and Well-being”. Nineteen delegates attended this section where 2 papers were presented. Dr. Shehu Allahde, of Bingham University, Jos, Nigeria, presented the first paper titled “Awareness and Use of Social Media Platforms by Medical Library Staff in Selected Tertiary Institutions in Plateau State, Nigeria”. The findings from the survey showed that the most common social media used for disseminating health information by library staff in the state were Facebook and YouTube. He concluded his presentation with a recommendation that Medical library staff (MLS) in all institutions should use social media to ensure effective and efficient service delivery which is in line with global best practice.

In his presentation, titled “Use of Social Media in Bowen University Medical Library for supporting Medical Education”, Mr. Olajide Afolabi, from Bowen University, Iwo, Nigeria, described how librarians from Bowen University Teaching Hospital have facilitated students’ access to resources in digital format, including g-mail blog, Twitter, Facebook and Instagram accounts. He identified financial constraints, shortage of manpower and lack of interest among colleagues as challenges encountered. He concluded that social media has greatly supported medical education for library users and recommended that use of social media platforms should be embraced in medical libraries to support medical education.

Delegates asked questions, offered constructive feedback and comments on the presentations. Ms. Lubker appreciated contributions of presenters and feedback from audience and ended the session.
The breakout session 2b

Dr. Kinengyere moderated this session titled “The contribution of health literacy to achieving health and well-being”, where three papers were presented. In the first paper, titled “Health Information Literacy among Rural Women in Delta State, Nigeria”, Ms Onome Norah Ekoko, from Delta State University, Abraka, Delta State, Nigeria, presented findings of a research on health literacy among rural women. She noted that in results that the majority of the women lacked functional literacy (i.e. they could neither read nor write) and recommended that adult literacy programmes should be implemented to improve health information literacy skills of the women.

The title of the second presentation was “Gender Perspectives of Health Literacy Proficiencies of In-school Adolescents in Osun State, Nigeria” derived from a study conducted by Iwok Nnah Shabi, Obafemi Awololo University, Ile-Ife and Fadekemi Oyewusi from University of Ibadan. The key findings from the study were that female students had significantly lower health literacy than their male counterparts. The authors recommended gender-based interventions for adolescent female students to improve their health literacy.

The last presentation was from a research titled “Internet Use and E-health Literacy among Tuberculosis Patients in DOTS Centre, Lagos State, Nigeria’, conducted by Messrs Olalekan Moses Olayemi and Shola Timothy Abolarinwa from the Nigerian Institute of Medical Research, Yaba, Lagos, Nigeria. The results of the study revealed that tuberculosis patients surveyed used internet as source of health information but lacked skills to assess the quality of information from the internet. The presenters recommended that healthcare providers and information professionals need to collaborate to develop strategies to improve TB patients’ e-health knowledge and skills especially on ways to interpret health information for effective use.

The breakout session 2c

The breakout session 2c focused on two sub-themes: “Education and Training in Health Sciences Librarianship in the 21st Century: Is the Curriculum Addressing the Need” and “Training for
Evidenced Based Policy/Practice and Systematic Reviews”. Professor Musoke moderated the session in which four papers were presented.

The first presentation, titled “Identifying Training Needs of Medical/Health Librarians in Nigeria: A Perception Survey” was jointly made by Dr. Violet Ikolo, from Delta State University, Abraka, Delta State, Nigeria and Ms. Celina Nongo, from Benue State University, Makurdi, Benue State, Nigeria. Key findings report that majority of health librarians surveyed had not attended any training in medical and information science in recent years. The authors noted that the expressed areas of training needs of the study participants were information system and technology usage, subject knowledge in medical and health sciences (terminology, classification, searching) and health information resources and services. The barriers to access to training were exorbitant cost, lack of time, distance, and not finding training in area of interest. The authors’ conclusion was that health librarians in Nigeria are willing to receive training but do not have access to resources needed for this to happen.

The title of second presentation, delivered by Mr Bilamin Popoola, from University of Medical Sciences, Ondo city, Nigeria, was titled “Suggesting Ways to Advance Library Delivery for Medical Education and Research in Africa: An Opinion Paper”. He noted that that the library has become more valuable for their space, and that more services should be rendered in libraries. Mr. Popoola emphasized that health librarians need new set of skills for instructions, research, including systematic review, and searching and retrieval of resources from the internet. He concluded that libraries should transform from being settings that provide only traditional services to those that are friendly and responsive to needs of users.

Ms. Cecile Coulibaly, from Virtual University of Côte d'Ivoire, made the third presentation titled “Emerging and Current Research into the Curriculum for Health Sciences Librarians and Information Specialists: Experience from Cote d' Ivoire”. Speaking through an interpreter, Ms. Coulibaly justified the need for creating training opportunities to improve knowledge and skills
health sciences librarians in Africa. She noted that a special curriculum in health information and documentation is needed to enable health librarians meet up to the needs of their clients.

The fourth presentation, titled “Challenges in Obtaining Literature for Evidence-based Medicine and Systematic Review in Nigeria Health Institutions: Case Study of the College of Medicine, Ituku Ozalla, University of Nigeria” was jointly taken by Mrs Ngozi C. Uzoagba (from University of Nigeria) and Mr. Popoola. The authors reported that results from their qualitative study showed that physicians and researchers had adequate knowledgeable about the use of evidence-based medicine and systematic review, but few practice this due to limited access to online journals, evidence-based medicine specific databases, and inadequate internet access. The presenters recommended that training to create awareness of databases where physicians and researchers can obtain relevant literature should be implemented and administrators should provide resources to overcome infrastructural deficits in the institutions.

The breakout sessions 2d
Mr. Masimba Muziringa, from University of Zimbabwe College of Health Sciences Library, moderated this session titled “Reaching out to under-served communities to achieve health and well-being in Africa” in which three papers were presented. In her presentation, titled “librarians making a difference in health care setting: Experience from Zambia”, Ms. Ndalemata-Theo described the process of the communication project supported by friends of Chitambo charity organization in the rural province of Chitambo, Zambia with the aim to reduce mortality and morbidity due to common ailments. She said that health librarians as knowledge brokers created a strategy that led to the establishment of a resource centre to service approximately 170 health workers. The conclusion drawn was that the use of the knowledge into action model was beneficial as it allowed interaction between the healthcare workers and the knowledge brothers thereby reducing gaps between the health workers’ knowledge and their service delivery practices.
The second presentation titled “strategy to promote immunization uptake in Ibadan Northwest and Ido Local Government Areas, Oyo State, Nigeria” was delivered by Mrs. Flora Olaniyi, from The Polytechnic Ibadan, Nigeria. Mrs. Olaniyi said that the uptake of recommended vaccines to prevent childhood diseases was better among nursing mothers in urban areas than in the rural areas and confirmed that mother’s forgetfulness was the major reason for missing immunization schedule. She suggested that information should adopt innovative technology to send reminders through SMS, short codes, online group messaging & phone calls to mothers to overcome the challenge of low coverage of childhood immunization in Nigeria.

The last presentation, titled “High maternal mortality rates in Africa: A review on health information gap of pregnant women” was delivered by Ms. Solanke Olayinka from University of Medical Sciences, Ondo State. She concluded that African pregnant women have deficit knowledge because they seek information from non-professionals and recommended that health information professionals should collaborate with healthcare professionals and pregnant women, to provide current information to improve health outcomes of pregnancy.

**Plenary Session 3**

The presentations for this plenary session focused on “Evidence-based medicine and the systematic review process: The role of librarians”. Three speakers, namely Ms. Marshall Dozier, Drs Kinengyere and Muziringa spoke during the session. They all agreed that most librarians do not have the skills to conduct systematic reviews. They identified the roles of librarians in conducting systematic reviews to include designing and running of search strategy, providing advice to authors on appropriate databases that should be used, teaching researchers and students on use of software packages, and reference managers. The speakers acknowledged that librarians should work together with content experts and be duly involved in activities that will earn them authorship of systematic review including proposals development and manuscripts writing, the
outputs from the systematic reviews. Delegates suggested that librarians should lead or assemble multi-disciplinary team in doing systematic reviews in order to get the much deserved relevance. Librarians were also advised to seek for ways of improving their capacity on systematic reviews.

Abstract Driven Presentations 3

The ‘abstract-driven presentations 3’ was divided into 3 breakout sessions with different sub-themes. Papers with similar theme were presented in the same breakout sessions. The 3 breakout sessions were labelled breakout sessions 3a, 3b, 3c. The 3 breakout sessions were conducted simultaneously.

The breakout session 3a

The sub-theme for this session was Application of ICTs to support Medical Education, Quality Health Care and Well-being’. Only one presentation was made at this session as authors of scheduled papers did not attend the conference. Dr. Owolabi Ruth Onajite, from Babcock University, Ilishan-Remo, Ogun State, Nigeria, delivered her paper titled “Digital Presentation of Health Records in Tertiary Hospitals in Nigeria”. She explained that the process of digital preservation included converting health records from their conventional form into digital from using scanner and other software. The benefits of digital preservation of health records are that it facilitates users to access information, reduce stress of accessing record, and conserve storage space. The challenges involved include lack of manpower and finance, inadequate technology, infrastructure and when records to be digitized are obsolete. She recommended that boards of hospitals management need to collaborate with information experts and tertiary institutions to ensure successful digital preservation of health records.

The breakout session 3b
Four presentations took place during this session titled “The Contribution of health literacy in achieving health and well-being”. Dr. Stella Anasi, from the University of Lagos, made the first presentation titled “Information Behaviour and Medication Adherence among Hypertensive and Diabetic Patients in Lagos State, Nigeria”. The results of the survey she presented patients relied on health care professionals as their primary source of health information mainly due to credibility, relevance and easy access to this source. The author reported that there was a positive relationship between information use and medication adherence and concluded that by emphasizing that access to reliable information should be seen as fundamental right for every patient.

In the second presentation titled “Promoting Health Literacy among Undeserved Communities through Information Dissemination by Health Information Professionals” Ms Adewoyin Omobola from University of Lagos, stated health is an indispensable aspect for development and defined health literacy as the ability to comprehend health related information. According to her, health literacy shapes people's health and quality of health care. She concluded that poor health literacy is a problem in Nigeria and underscore need for collaboration between health professionals and public library in order to improve health literacy of users.

Dr Alonge delivered the third paper titled “The Impact of Nollywood Movies on Awareness Creation about HIV and Risky Sexual Behaviours among In-School Youth in Nigeria”. He noted that the study was designed to investigate the extent to which Nollywood movies convey scenes of safe sex, unsafe sex, and HIV-related knowledge to young viewers. He stated 10 Nollywood movies had been identified for the study analysis had been completed on 3 of them namely Kila (2019), The wanted (2017), and Stigma (2013). He noted that preliminary analysis of the movies indicates that they the potentials to be used as a medium for ‘enter-education’ tool which can provide information on HIV/AIDS and promote behaviour changes among youths.

The last presentation titled “Barriers to, and Channels of Knowledge Sharing Secondary Health Care Providers in Gombe State” was made by Ms. Adeyemi Abiola from University of Ibadan.
She presented findings of a survey and noted the barriers to knowledge sharing by health workers were lack of trust of other people’s knowledge, absence of operational guideline for knowledge sharing, inadequate team-work, paucity of funds, and deficit of political will. She concluded by recommending appropriate interventions that can foster proper knowledge sharing among health providers as part of strategies to improve effective health care delivery.

*The breakout session 3c*

Ms. Marshall Dozier moderated this session titled “Reaching Out to Under-serve Communities to Achieve Health and Well-being in Africa” in which three papers were presented. The first presentation which was made Mrs Roseline Oshiname from Bowen University, Iwo, Nigeria was titled “Awareness and use of reference manager for health research by resident doctors in Nigeria”. She defined referencing as a standard way of acknowledging the sources of information and said referencing was important because it enables readers locate cited literature, serves as a means of acknowledging contributions of researchers and prevention of plagiarism. The key findings from the survey conducted were that many resident doctors (RD) in Nigeria were aware of reference managers but they do not use them. She recommended that training is an indispensable strategy to address the situation.

The presentation of Dr Kinengyere titled “Improving communication between health workers, librarians, journalists, researchers and policy makers: The Uganda National Health Communication Network (UHNC) initiative”, described how health information professionals organized interventions that strengthened collaboration between researchers, health workers, policy makers leading to improved outcome through better services delivery, policies and behaviours. She highlighted that the project faced challenges relating to managing virtual teams and sustainability of the network because of single funder. She suggested that to make the project sustainable there was need raising funds from multiple sources and setting up a repository of ongoing research among others. She concluded that the network is crucial for dissemination of timely and evidence-based health information.
Ms. Lydia Rignace from Ministry of Health (MOH), Seychelles delivered the last paper titled “Health literacy the key to achieving healthy lifestyle and well-being: experience from the Seychelles”. She started with an acknowledgement of the WHO that sponsored her participation at the conference. She described activities implemented by the MOH to promote health literacy using ICT, radio/television, counselling, social media, outreach activities in public areas, sport activities in schools, poster preparation as well as yoga and meditation. She disclosed that many lives have been saved and health restored through these activities. As a component of the intervention, Ms. Rignace said students from age 12 and above were given a laptop each to support their learning and use of online learning resources. She explained that the project was jointly implemented by information professionals, medical librarians at MOH and the professionals from the Health Promotion units. She concluded that access to health information is required to enable people achieve optimal health and well-being.

The session ended with delegates asking questions and providing constructive feedback and comments. The moderator thanked the presenters and delegates who attended the session.
Conference Day 3, October 17, 2019

The last plenary session of the conference was a panel discussion that began at 8:40am. Moderated by Mr. Kimani, the panel discussants were Messrs Popoola, Olayemi and Dr. Alonge who spoke on the topic on application of ICT to support medical education, quality health care and well-being: health librarian’s role. In his opening remarks, Mr Popoola stated that ICT has had tremendous impact on medical education and practice. He expressed the opinion that everything about medical education today resolves around ICT. He highlighted the benefits of ICT and the roles of librarians in ICT. According to him the role of medical librarians is to CARE for the caregivers, explaining that this acronym mean “Curiosity” about providing quality service, “Awareness Creation” (training, guiding and providing information to health workers), “Reinvigoration” (having professional network, attending workshops to acquire new knowledge and improved skills) and “Empathy” (expressing pity to users, implementing services in the best ways and ensuring flexibility in the approach).

Mr Olayemi said ICT is meant to promote health research visibility, support medical education, quality healthcare and well-being in digital age and that health librarians’ have important roles to play in this process. He said research will enhance visibility, solve practical problems and add to the body of knowledge. He lamented that out of the 146 universities listed on the Nigerian University Commission website only 11 have their repository online. He decried the situation where researchers had always relied on foreign literature because Nigerian studies are not available online. According to him, some of the consequences of this situation include duplication of research efforts, wastage of time and resources, lack of progress on previous findings and gaps in research policies and research outcomes. He stressed that health librarians have important roles in addressing the situation by encouraging researchers and students to publish in reputable and high impacts journals that are indexed in Scopus, Web of Science and other highly regarded databases. Other roles are digitization of documents, identification of manuscripts and grey literature; promoting digital engagement for learning; training the health practitioners and students to improve their online presence and visibility through Research Gate,
Academia.edu, Google Scholars and use of blogs as well as championing the hosting of journals. He said that the Medical Library Association of Nigeria, in a bid to promote health research visibility for health librarians, has launched a journal named “Journal of Health Information and Librarianship” (www.johil.org).

In his own contribution, Dr Alonge confirmed that ICT plays a central role in health care for individuals and communities. He also acknowledged that although librarians do not have medical training, their role is to support clinicians by providing relevant health information. He identified “mHealth” and “Makerspace” as ICT technologies that can be deployed to support medical education. He spoke about the application and use of mHealth in various areas including patient monitoring, mobile tele-medicine, electronic data collection and GIS (Geographic Information System) as well as disease and epidemic outbreak tracking. As part of his presentation, he showed a video to illustrate the use of “Makerspace” and emphasized that health sciences librarians have roles to play in supporting the development of “Makerspace”. He further commented that “Makerspace” can be placed in the library.

After the initial presentations from the panellists, the moderator asked the panellists to comment on internet in Africa. The panellists agreed that although there is improvement in internet penetration in Africa, cost of access is exorbitant by local standards. The panellists noted that most users of ICT in Africa access internet through mobile devices and that the ICT infrastructure on the continent under-perform because they are imported.

The moderator further requested the panellists to discuss perceived level of confidence of African librarians on use of ICT. The opinions expressed include (1) the fact that librarians are interested in ICT but many are not confident about its use; (2) there is a generational gap in use of ICT between young generation and the older generation of librarians; the older generation have less skills and are therefore less comfortable to use it; (3) There is need to advocate for more inclusion of ICT courses in the curriculum of library schools in Africa to make librarians more confident in the use of ICT for supporting medical education. One of the panellists
suggested that health information students should be requested to audit courses in computer science.

In their contributions to the discussions, many delegates agreed that it is necessary for medical librarians to be trained and equipped to use ICT and that ICT courses should be included in training curriculum of library schools. In conclusion of the session, there was a consensus of opinion among the delegates that a specialized ICT skills-based curriculum should be designed for training of medical librarians.

Professor Musoke gave a report International Federation of Library Association (IFLA) Health and Biosciences (HBS) programs. She started by stating that HBS endeavours have focused on Sustainable Development Goal (SDG) number 3 which is aimed at improving the provision of information to health care professionals and researchers. She also provided information about the constitution of IFLA HBS section officers and committee and emphasized that the work of IFLA was voluntary and as such requires commitment. She identified the professional gains librarians will derive from participating in IFLA activities.

Professor Musoke also spoke on the history and operations of the International Congress on Medical Librarianship (ICML), which she said was founded in 1953 and holds her congress every 4 years. She confirmed that the next ICML is scheduled to take place in 2021 in Pretoria, South Africa. She suggested that in order to enable AHILA members attend the next ICML, the next AHILA conference will be held in Pretoria, South Africa immediately before the ICML congress. She encouraged the conference participants to participate on IFLA HBS platforms and ICML activities. She concluded her presentation by calling for more collaboration among various international organizations for professional librarians.

Ms. Lubker delivered a short goodwill message from American Medical Library Association (MLA) and revealed that the bilateral agreement between MLA and AHILA that was signed in 2004 was due for renewal. She expressed willingness to work with AHILA members in updating
the 2004 bilateral agreement and encouraged members to take advantage of the scholarship, grant, fellowship and award opportunities being provided by MLA.

**AHILA General Assembly**

The AHILA General Assembly commenced 12.30 pm with only financial members of AHILA were allowed to participate at the meeting. The meeting began with a short welcome address delivered by the President, Dr Ajuwon. She explained that she became the President of AHILA following the resignation of the former President and that the Secretary General and Treasurer were unable to attend the conference. She talked about the efforts she made in trying to bring AHILA back on track after some challenging periods and gave details on how she secured support from the WHO for French and Portuguese translations of the conference proceedings.

She read the 15th AHILA congress reports and resolutions and described the actions taken to address the resolutions from the congress. She confirmed that the 17th AHILA Congress will be co-hosted with ICML congress in Pretoria and encouraged members to plan to attend both meetings.

Members deliberated and agreed that Cote d’Ivoire, should be the host of AHILA 2023 congress. The Assembly also considered and agreed with the suggestion that Congo Brazzaville should be the second choice, a ‘backup’ host, should Cote d’Ivoire, for whatever reason unable to host the AHILA 2023 congress.
Amendment of the Constitution

The AHILA Constitution Amendment team comprising Professor Musoke and Ms. Nancy Kamau from Kenya presented the details on the proposed amendments. They noted that the reviews were based on the feedbacks received at the 2016 AHILA congress when the first constitution was presented to the congress members. Professor Musoke read out the areas being proposed for amendments as shown below:

1. Electoral committee;
2. Presentation of manifesto by members who are veiling to be President of AHILA;
3. Presentation of reports by Secretary General and Treasurer of AHILA; and
4. Contribution of 5% of AHILA Country Chapter’s money into AHILA purse.

Professor Musoke said the revised constitution will encourage giving of financial reports at the congress and improve the confidence and trust that members have in the leadership of the association. Members expressed satisfaction with the amendments proposed for the constitution, but the President requested that an amendment that will prevent a serving AHILA President to host a congress should be included in the constitution citing challenges involved in combing the role of President with hosting an AHILA congress, delegates noted her concern but said it should not be included in the constitution. The delegates agreed with the proposed amendment, accepted them. The delegates also appreciated the efforts of the team that drafted the amendment after which all the amendments were ratified.

Report on Stewardship by the President

The President gave a report of her stewardship to the assembly and noted that part of her achievement was meeting the language needs of members from Francophone and Lusophone speaking countries through interpretation of proceedings in French and Portuguese languages at the 2010 AHILA congress. She also reported that she had successfully registered AHILA Nigeria
chapter with the Corporate Affairs Commission (CAC) of Nigeria, a development she said was long overdue.

**Election of New Executives**

Prior to the commencement of election of executive members of the association, efforts were made to confirm that only financial members of AHILA participated in proceedings. Two former AHILA Presidents, Mr Ibrahima Bob, Ms Nancy Kumau and immediate past President of EAHIL, Ms. Dozier, supervised the process of electing new AHILA executives. In her opening remarks, Ms. Dozier reminded members of the requirements for the election of an executive as stated in the constitution; according to her, only financial members of AHILA can vote and be voted and only members who have attended at least two AHILA congresses can be duly elected. After confirming that only eligible members were in the congress venue, ballot papers were distributed to members to vote for individuals who had earlier being nominated for the various posts.

The two candidates nominated for the position of President, namely, Mr Ssenono and Dr Ajuwon presented manifestoes; delegates casted their votes. Mr Richard Ssenono pulled 9 votes, while Dr Ajuwon had 21 votes, so Dr Ajuwon was returned elected to the serve as the AHILA President for another 2 years, (2019-2021).

Delegates nominated and voted for other members of the executives as shown below:

8. 1st Vice President: Ms. Cecile Coulibaly (unopposed)
9. 2nd Vice President: Mr. James Kimani (unopposed)
10. Secretary General: Haruna Hussein, following withdrawal of Mr. Muzingira and ineligibility of Ms. Mercy Monde
11. Assistant Secretary General: Dr. Stella Anasi (unopposed) because of the ineligibility of Mr. Billiamin Popoola
12. Treasurer: Mr. Alfred Marsatain Masiteng, unopposed
13. Executive Members: Mr Richard Ssenono; Mr. Abdrahemene Anne and Mercy Monde
Following the conclusion of the election, all the new executive members were presented to the congress members. The newly re-elected President of AHILA, Dr Ajuwon presented her acceptance speech in which she appreciated all the congress members, members of the ad-hoc electoral committee and the elected officers of AHILA and expressed willingness to contribute more for the development of the association. She reiterated her desire to work towards ensuring the creation of AHILA Journal which she listed as one of the proposed projects in her manifesto.

Awards and Presentation of Certificate of Recognition
Awards and certificate of recognition were given to the following individuals for their contributions to the development of AHILA:

1. Ms. Christine Wamunyima Kanyengo, for being a Keynote Speaker during AHILA 2019
2. Ms. Shane L. Godbolt for her huge interest and commitment towards developing Africa Medical Information specialists. Marshall Dozier received award on behalf of Ms. Godbolt
3. Ms. Marshall Dozier in recognition of her good contribution to the progress of AHILA.
4. Ms. Rena Lubker in appreciation of the tremendous support being received from American Medical Library Association.

Certificates of recognition were also given to four former Presidents of AHILA and others as listed below

1. Mr. Ibrahima Bob
2. Ms. Nancy Kamau,
3. Ms. Nasra Gathoni
4. Dr. Rehema Chanda Mallya
5. Professor Maria Musoke for great contributions and longstanding support to AHILA.
6. Dr. Dan Gerendasy (US, National Library Medicine) for continuing support for members of Network of African Medical Librarians and for facilitating their attendance of the 16th AHILA congress.
Resolutions
The resolutions of the 16th Biennial AHILA congress were read to the congress members by the new 1st Vice President, Mr James Kimani. The resolutions were as follow:

8) AHILA should support ongoing initiative towards the development of a curriculum for Health Sciences librarianship at different levels (Diploma, Bachelor, Master, PhD) to harmonize the education of health information professionals in Africa

9) AHILA should initiative development of short training course and other continuing education programmes in health sciences librarianship to upgrade the knowledge and skills of serving medical librarians and other health information professionals.

10) AHILA to encourage and support development of curriculum for health information professionals in Africa that is relevant in the 21st Century. AHILA should promote the use of 21st century learning framework for development of the curriculum and training.

11) Hands-one skill building workshop should continue to be a key component of all AHILA conferences

12) Health sciences librarians should take leadership in conducting systematic reviews; they can constitute a team, formulate appropriate research questions, conduct the research and publish from the review.

13) Health sciences librarians should improve their knowledge and skills on ICT in order to improve service delivery to their clients.

14) Workshop on research and academic writing should be organized during the next AHILA congress.

In response to requests for comments, delegates suggested that resolutions numbers 1 and 3 should be merged as well as resolutions numbers 2 and 6 because of their similarities. Several congress members suggested that the executive should develop a work plan, performance indicators, and target to ensure that the resolutions are achieved.
**Plans for workshops and publication of papers presented at 16th Congress**

The President of AHILA informed the delegates that workshop on how to write scientific papers will be included in the agenda for the 17th AHILA congress and seized the opportunity to thank all the facilitators of the workshops at the AHILA 2019. She also informed members about the capacity development training for librarians scheduled to take place in March 2020 in Kenya. She told the members that there will be funding opportunities to attend the workshop and encouraged members to watch out for the call for application on AHILA website.

Professor Ademola Ajuwon suggested that the papers presented at the conference should be published in the Journal of Health Information (a journal of Nigerian Medical Library Association) as a special edition. Delegates approved the suggestion while Mr Olayemi assured congress members that editorial team will consider all the papers provided, they are found suitable for publication after undergoing peer-review. A deadline of 31st December 2019 was set for submission of all manuscripts to the Journal. Mr Olayemi was charged with the responsibility of sending reminders (a month to the deadline) for submission of manuscripts to members who presented papers at the conference. The AHILA President noted that the association will still work on starting her own Journal because it was part of the agreement signed with EAHIL to have AHILA journal. The delegates were assured that certificates of attendance and all slides presented during the congress will be sent to each delegate through their emails.

**Closing**

Dr Haruna Hussein, the newly elected Secretary General declared the 16th AHILA congress closed at 5pm.