
Interlibrary Cooperation Among Medical Libraries in Nigeria: Some Problems and Possible Solutions

INTRODUCTION

The oldest Medical Library in Nigeria dates back 26 years to the establishment of Central Medical Library in 1947. Since then, several new Medical Libraries have been established. The six Medical Libraries established after the Central Medical Library are in Medical Schools. These are: The University of Ibadan Medical Library established in 1948; The Medical Library of College of Medicine University of Lagos established in 1962; The Medical Library of Ahmadu Bello University established in 1968; The University of Nigeria Medical Library established in 1972; The University of Benin Medical Library established in 1976 and the University of Ife Medical Library (still part of the main Library; it is hoped that the Medical Library will be carved out separately very soon). Seven new Universities, each with a Medical School were established by decree in 1976. Each Medical

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School in these new Universities has a Medical Library. This brings to thirteen, the number of Medical Schools with functioning Medical Libraries in the country. Besides these Medical Libraries in Medical Schools, there are Biomedical Research institutes and hospitals for specialized research with very good libraries scattered all over the country. Examples of a few of these Institutes are: The Neuropsychiatric hospital, Abeokuta; The Medical Research Council of Nigeria, Lagos; The Orthopaedic Hospital, Igbobi, Lagos; Ophthalmic Research Hospital, Kano; Trypanosomiasis Research Institute,

Kaduna and the Veterinary Research Institute, Vom. A recent survey by Mr. G.S. Belleh of the College of Medicine, University of Lagos, shows that there are hospitals with libraries scattered all over the country. It is amazing to find that there is no formal Interlibrary Cooperation policy among these Medical Libraries. The lack of formal Interlibrary Cooperation policy among these medical libraries is not due to the fact that these libraries have every document needed by their clientele, or that they do not need any document from any other library in or outside the country, but to problems such as:

- (a) small outdated collections
- (b) lack of funds to buy new editions of books and to renew subscriptions to journals
- (c) lack of equipment such as photocopying machine
- (d) poor postal facilities
- (e) poor transportation systems
- (f) time lag between sending and receiving interlibrary requests
- (g) uncooperative attitudes of librarians
- (h) absence of Union Catalogue and list of holdings of various medical libraries
- (i) poor telecommunications systems and
- (j) lack of legislation.

Many colleagues have published articles about the problems of Interlibrary Cooperation among Medical Libraries in Nigeria, but none of them have addressed the solution to the problems. Therefore, this article is going to deviate from their approach by talking mainly on the possible solutions to the problems. At the annual conference of the Nigerian Library Association (NLA) held in Kano in 1975, the Medical Group of the NLA was formed. This was the first meeting of the Medical Librarians from a few Medical Schools and research institutes and this one would call the beginning of unity among these Librarians. Since this first meeting, several other meetings have been held, but the problems of Interlibrary Cooperation have not yet been examined in any of them. This is not because the Librarians do not realize the importance of Interlibrary Cooperation, but, may be the elected officials think that there are more urgent problems to solve. It is the view of this author that attempts should be made to tackle the problems of Interlibrary Cooperation among Nigerian Medical Libraries. The first suggestion towards the solution to this problem is that a Committee on Interlibrary Cooperation be set up by the newly formed Medical group.

MEMBERS OF THE COMMITTEE

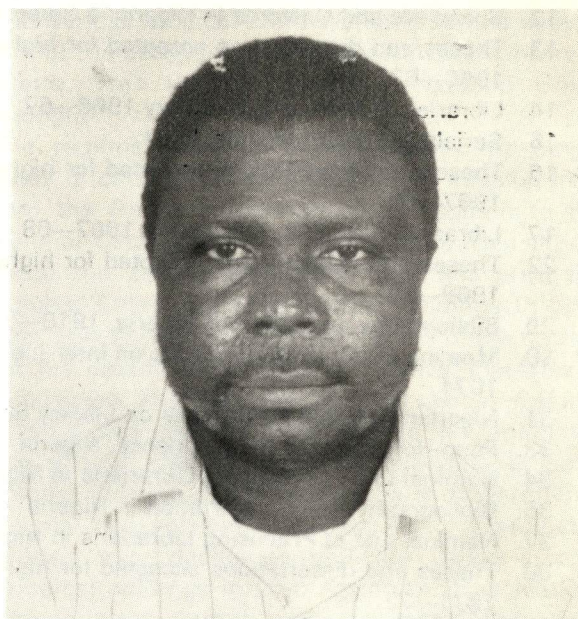
The committee members should include:

- (a) the Director of the National Library of Nigeria
- (b) the Librarian of the Central Medical Library, Yaba, Lagos
- (c) all Interlibrary Loan Librarians of all Medical Libraries (These are not existing as of now, and so, Reference Librarians could be substituted)
- (d) any Librarian chosen by the Medical Group to be a member
- (e) representative of the Nigerian Library Association.

RESPONSIBILITIES OF THE COMMITTEE

The first duty of the committee is the drawing of Interlibrary Loan Code which will govern the lending Relations among Medical Libraries on National level. This code should include:

- (a) definition of Interlibrary loans
- (b) the purpose of Interlibrary loan
- (c) responsibility of the Borrowing Libraries
- (d) responsibility of Lending Libraries
- (e) scope
- (f) expenses
- (g) conditions of loans
- (h) placement of requests
- (i) form of request
- (j) duration of loan
- (k) notification and acknowledgement and
- (l) violation of code.



Dr. John S. O. Ojo

The committee should design a standard loan form, which should be used by all Medical Libraries in the country for their requests. A standard shipping label for this purpose should also be designed in such a way that they can be used for both National and International requests (the committee could send for the American Library Association (ALA) standard Interlibrary Loan Request Forms and standard Interlibrary loan request forms and shipping labels and copy from them). The designed forms and shipping labels should be given to a printing company and all Medical Libraries should be made to buy from the company.

The next big task for the committee is the creation of Regional Libraries in each region. The regional libraries are libraries which are larger than all other libraries in the locality by the size of their collection, their staff strength, financial status, and the amount of equipment they have. In order to choose Regional Medical Libraries, the first duty of the committee would be to divide the country into four regions as follows:

- (a) Lagos region
- (b) West, Bendel and Kwara regions

- (c) the Eastern region (include Benue and Plateau States)
- (d) the Northern region.

The following libraries should be chosen as regional libraries:

- (a) Lagos region: the Medical Library of the College of Medicine, University of Lagos.
- (b) West, Bendel and Kwara region: the Medical Library of the University of Ibadan.
- (c) the Eastern region: the Medical Library of the University of Nigeria, Enugu.
- (d) the Northern region: the Medical Library, Ahmadu Bello University, Zaria.

It should be noted however that this arrangement is just for the beginning and that as the country advances and more medical and hospital libraries are established, the regions could be broken into smaller units and more regional libraries could be established.

NIGERIAN NATIONAL LIBRARY OF MEDICINE

The Committee on Interlibrary Cooperation among Medical Libraries in Nigeria should recommend that "The Central Medical Library", Yaba, Lagos, which is the oldest Medical Library in the country become the National Library of Medicine (that is the Nigerian National Library of Medicine). The Committee should further recommend that the central medical library (the National Library of Medicine) establish the Interlibrary Loan Division immediately and that this should be headed by a professional librarian. The Director of the National Library of Nigeria who is a member of the Committee should be made to send a recommendation to the Federal Ministry of Establishment in Lagos, under whose control the central medical library is, at present, that the library be upgraded to the Nigerian National Library of Medicine status and that the staff strength be increased. This explains why the Director of the National Library has got to be a member of the Committee.

THE NIGERIAN NATIONAL LIBRARY OF MEDICINE CURRENT CATALOG

One of the biggest problems facing Medical Librarians in Nigeria is how to locate the holdings of libraries. Several attempts have been made by colleagues to compile union lists of periodical holdings, but their efforts have been foiled mainly by the uncooperative attitudes of fellow librarians. The first "Union List of Biomedical Serials in selected Libraries in Nigeria" was compiled by C.F. Renolds in 1964. This as the title has indicated covered just selected Libraries in the country and the circulation was only between these selected Libraries.

The next attempt at a union list was by Mr. S.M. Lawani and Mr. T.A.B. Seriki of IITA Ibadan. They both compiled a Union List of Scientific Periodicals in Nigerian Libraries in 1971 and updated it in 1973. The National Union Catalogue at the National Library of Nigeria is not updated, simply because many libraries do not send in a list of their holdings.

CATALOGUE

In order to solve this problem among Medical Libraries, the Committee should recommend that all Medical Libraries in the country should send three copies of their holdings (books and periodicals) in card form to their regional libraries. The Regional Medical Librarians should be given the responsibility to collect these cards and they should give these libraries a dead line. The Regional Medical Libraries should be funded to communicate with other Medical Libraries in the region in order to collect these cards and if possible they should send messages to libraries that fail to send in their cards on time.

After the cards have been collected, the regional libraries should send two copies of each of the cards to the Central Medical Library in Lagos. A deadline should be given to the regional libraries as to the time the first batch of the cards should reach Lagos.

The Central Medical Library should send a copy of each of the cards received to the National Library of Nigeria. This will go into the National Union catalogue.

The regional libraries should collate the single copies of cards retained by them and develop from them the Regional Catalogue. In addition to the Regional Catalogues, the Regional Libraries should collate the serials cards and from this print the Regional Catalogue of periodical holdings in book form. This should contain full citation of the serials, and full details of holdings by Medical Libraries in each region. The Regional Libraries should give free or sell a copy each to all libraries in the region and they should also make copies available to other regional libraries as well as libraries in other regions. This may be given free to the libraries or the regional libraries may decide to sell the Union List of periodical holdings in their region to other medical libraries in the country that want them if they wish. This Regional Union List should be updated from time to time.

The Central Medical Library should collate the cards retained by her and from this print weekly, monthly and annually, the Nigerian National Library of Medicine Current Catalogue. This should bear locations as well as full bibliographic descriptions of all items entered in them. This should be sold to all Medical Libraries as well as other libraries in the country that have interest in having copies.

ROUTING OF INTERLIBRARY LOAN REQUESTS

Now that holdings of all Medical Libraries are available, it is very easy for libraries to contact one another for loans. If a medical library in a region wants a document that is not available in any Medical Library in that region, she either contacts the holding library directly if the library is sure of the holding library or she contacts her regional library who will check and see where the material is available in the country and route the request to the appropriate holding library. If the location of any request is doubted by any medical library in any region, the request should be sent to the regional library who will check from the regional catalogue or the National

Catalogue and route the request to the appropriate holding library. All local requests, that is; requests for documents that could be obtained within the country must first pass through the regional library. It is when the regional libraries cannot meet the request or trace the location for the document within her resources that the request should be routed to the National Library of Medicine which must check for proper location of the material and obtain the document for the borrowing library or fill the request from her own collection or obtain the document from abroad if the material is not available anywhere within the country. Requests for materials from outside the country could be passed directly by any medical library to the National Library of Medicine for verification before the request is sent abroad. Any medical library is free to request for materials from outside the country directly without passing through the National Library of Medicine which will first verify the request and make sure that the material is not available in the country before sending the request abroad. This will obviously result in a great saving of time.

The National Library of Medicine must have a very strong and up-to-date periodical collections. She must also be very strong in book collection as well as in the collection and storage of old materials that are not constantly consulted; i.e. materials that other Medical Libraries in the country will not have room for. All reference materials that will aid and fasten Interlibrary Loan such as the National Union Catalogue of other Nations that may not be available in any other medical library in the country must be in the National Library of Medicine. The National Library of Medicine must collect and store all theses, dissertations and other ephemeral publications on Biomedical Research in Nigeria that other medical libraries in the country will not have room for.

INTERNATIONAL LOANS

Indeed, there is no need to make any difference between international loans and loans between libraries in the same country. The former may raise a few problems which are rarely encountered by the latter such as the long time involved and the reimbursement of expenses. However, once the principle of loan is accepted, lending outside the country is no more difficult than limiting one's consignments to the National territory. "A country where the Internal Lending system works well is also the one which will best meet requests from abroad". There will be no appreciable improvement at the International level so long as Interlibrary Loans are not better organised within the country.

CONCLUSIONS

As stated earlier, much has been said on the problems of Interlibrary Cooperation among medical libraries in Nigeria and little has been done on the solution to the problems like any other desired objectives. The model developed in this project is proposed as a basis for achieving meaningful interaction among medical libraries in Nigeria. The model is also proposed to be a pace setter for other

special library groups in the country wanting to come together to achieve similar objectives like the medical group. It is strongly hoped that the proposal will be of benefit to the medical group if implemented within a short time. It is also to be expected that the proposal will extend among medical libraries in West Africa as well as other developing countries with similar environmental, technological and developmental constraints as Nigeria.

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