

## **Ensuring healthy lives and promoting well-being for all: the role of Ghanaian academic libraries in achieving the 2030 Agenda for Sustainable Development**

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### **Abstract:**

*Good health and well-being are central to human development. The United Nations Sustainable Development Goal 3 highlights the aspirations of this new universal agenda towards healthy living and well-being by 2030. All institutions, stakeholders, acting in collaborative partnership are expected to help national government attain the SDGs.*

*This paper assesses the role of ten academic libraries in Ghana in meeting the Sustainable Development Goal 3. Using the case study approach, ten librarians were interviewed to ascertain the current and future roles in attaining the SDG3, their mode of collaboration and the challenges they encounter in the implementation of SDG3. Findings reveal that librarians have been collaborating with health and allied institutions in an often subtle manner to address some health concerns of the communities they serve. Traditional authorities, youth groups, faith-based organisations as well as government agencies were identified as potent partners for libraries to collaborate with to help attain the SDG 3. Interpersonal methods such as Focus Group Discussions and role-play, as well as mass methods such as print, electronic and social media, posters and flyers were identified as efficient means to reach out to people for the purposes of ensuring healthy lives and well-being. Issues which emerged as possible threat to this effort include perceived role conflict, funding, credibility of information, community acceptance. It is recommended that for any initiative of this nature to succeed, there must be a strong policy at the local or inter-institutional level for increased cooperation. Librarians on the other hand, are expected to assert themselves and play a strong advocacy role in addressing an important national agenda such as the SDG3.*

**Keywords:** United Nations Sustainable Development Goals, Good Health and Well-Being, Academic Libraries, Health Training Institutions, Libraries, Ghana

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## **Introduction and background to the study**

There is no doubt that health is crucial for sustainable human development. It is an inalienable human right and an essential contributor to the economic growth of the society. Health is defined as a “state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity” (WHO, 1948). Some determinants of health include the social and economic environment, the physical environment and the person’s individual characteristics and behaviours (WHO, n.d). Specifically, they include factors such as income and social status, education, physical environment, social support networks, genetics, health services and gender.

These global determinants have been encapsulated in one of the 17 goals that make up the 2030 Agenda for Sustainable Development. SDG 3 aspires to ensure good health and well-being for all. It aims at addressing all the general health issues including, but not limited to communicable diseases, sexual and reproductive health, degenerative or lifestyle diseases, narcotic and substance abuse, the health care system and infrastructure, health financing and strengthening the capacity of countries to act against the risk of trans-border diseases (Baptiste, 2015). Nine quantitative and four qualitative targets have been set in respect of SDG3 and organizations and institutions are expected to work around these to achieve sustainable development.

Current facts and figures on child health, maternal health, HIV/AIDS, malaria and other diseases released by the United Nations (2015) reveal that even though the prevalence of these diseases is declining, many governments and institutions especially in developing countries now have the responsibility, more than ever before, to eradicate them and/or integrate sustainable development into all their health activities.

In Ghana, the health delivery systems have over the years been grappling not only with sanitation-related infectious diseases, but have further been burdened by the emergence of degenerative diseases such as hypertension, diabetes, chronic heart diseases and cancer (Adogu et al, 2015; Miranda et al, 2008). In addition, reliance on herbal concoctions with no scientific basis and wrong dosage has been the bane of many rural dwellers resulting at times in renal failure, etc. A number of mental health patients are confined to prayer camps (Edwards, 2014) while the elderly with Alzheimer’s are usually stigmatized and labelled as witches and wizards. These health challenges are threatening Ghana’s effort at meeting the third goal of the SDGs and eventually affecting the attainment of the other 16 goals.

Ghana took a leading role in the designing stage of the SDG’s culminating in our President, H.E. John Dramani Mahama being appointed as co-chair of a group of sixteen (16) SDGs Advocates to support the United Nations Secretary-General in his efforts to generate momentum and commitment to achieve the SDGs by 2030. In the light of this prominent role, all institutions in Ghana are enjoined to embrace and support the SDGs.

Institutions such as the universities have been identified to be key agents for improving sustainable development in the health sector. Through teaching, learning and research, universities are able to affect not only graduates but also communities and society at large. Additionally, universities through institutional strategies, outreach and services, partnerships and funding have improved initiatives towards sustainability. For some universities, the outcomes have been phenomenal while in some African universities, the progress towards sustainability is significantly small (GUNi, IAU Report 2011: x).

Library services which are integral to the mission of these universities support teaching, learning and research. Through their collections and services, academic libraries are able to meet the educational needs of students, support faculty enabling informed choices and knowledgeability thereby contributing to national development. Libraries guarantee access to information and the recognition of their role in the 2030 Agenda for sustainable development is worth noting. Through advocacy by IFLA and other development partners, public access to information (16.10), culture (11.4) and ICTs (5b, 9c, 17.8) have all been included in the SDGs and governments are being challenged to recognise and commit to supporting libraries as they implement the SDGs.

In Ghana, five out of the nine public universities play a major role in the development of human resource for the health sector through teaching, learning and research. The curricula of the units within the universities ensure that knowledge, skills and capabilities of its health graduates are developed while health-related research on prevalent diseases are also carried out. The units are:

- College of Health Sciences, University of Ghana
- College of Health Sciences, Kwame Nkrumah University of Science and Technology (KNUST);
- College of Health and Allied Sciences, University of Cape Coast;
- School of Medicine and Health Science, University for Development Studies (UDS), and the
- Schools of Basic and Biomedical Sciences, Allied Health Sciences, Public Health, Nursing and Midwifery of the University of Health and Allied Sciences (UHAS).

Besides, there over thirty public Health Training Institutions with the sole aim of training middle level manpower for the health sector. In addition, universities also ensure that health-related subjects are incorporated in programmes such as Physical Education, Home Economics etc. The libraries of these academic institutions are equipped to support the information needs of their clientele through information management and dissemination. However, the extent to which library services in all these institutions are ensuring sustainability of healthy lives and well-being is unclear and needs to be investigated.

This paper thus seeks to assess the role of ten academic libraries (five from the universities and five from the Health Training Institutions) in Ghana in meeting the Sustainable Development Goal 3 which ensures healthy living and promotes well-being for all.

### **Objectives of the Study**

Specifically, this paper seeks to:

- Ascertain the awareness level of librarians in selected universities and institutions on SDG 3;
- Explore the role of the selected libraries/librarians at achieving SDG3
- Investigate how selected libraries/librarians are partnering with universities, government and other external groupings to achieve SDG3.
- Identify the challenges faced by libraries/librarians and stakeholders in the quest to achieve SDG3;
- Develop a model on how libraries/librarians can support the achievement of SDG 3.

## **Theoretical Framework**

The current study adopted the analytical framework of Cloete et al. (2011), which draws its strength from Clack's Triangle of Coordination (1983). The researchers consider this framework appropriate for the study because it is relevant to the role African Universities can play in national development. According to the analytical framework of Cloete et al. (2011), for Universities to respond to the role of national development, there must be "a pact" relationship which concerns the role of development between Universities, government and external groupings (major actors).

According to Cloete et al. (2011), "a pact" involves agreement among the major actors. There are three aspects of "a pact" which are the need for:

- i. capacity in the academic core of universities
- ii. coordination
- iii. connectedness of policies and activities of government, universities and external groupings

The three aspects of "a pact" are interwoven; its interrelatedness makes it impossible to achieve national development without one another.

## **Implications of the framework**

Without national policies and implementation of these policies, it will be very challenging for universities to develop a strong academic core, in the same vein, a strong academic capacity devoid of connection to development activities results in the insulation of a particular university. Meanwhile, strong connectedness of universities to development, but in the midst of weak academic capacity, reduces the contribution that universities can make towards development.

This implies that there is the need for partnership and networking amongst universities (leadership, faculties and academics), government (government departments, notions & policies and coordination mechanisms) and external groupings (funders, business and community).

## **Review of the Literature**

### ***The role of the MDGs***

The precursor to the Sustainable Development Goals, the MDGs had four goals directly related to health. This is not surprising due to the irreplaceable role health plays in every facet of life. MDGs intervention according to Kweifo-Okai & Galatsidas (2015) saw the number of people living in extreme poverty, the proportion of undernourished people, HIV infections as well as the number of out-of-school children of primary school age worldwide fall by almost half. The successes chalked in health under the MDGs (4,5,6) have not been even both within and across countries (Barredo, Agyepong & Liu, 2015) and the concern that 6 million children are dying before age five, with HIV/AIDS still being on the rise in sub-Saharan Africa raises more concerns for the sustainability of healthy lives and well-being.

The intervention of SDGs therefore comes in good time not only to reaffirm commitment to the MDGs, but also to expand beyond them to cover new issues that merit urgent global attention. It covers areas regarding poverty, food, health, education, women, water, energy, economy, infrastructure, inequality, habitation, consumption, climate, marine ecosystems and sustainable institutions among others (Mohamedbhai, 2015). The adoption of the Sustainable Development Goal 3, which is to ensure healthy lives and the promotion of well-being for all at all ages, has room in this broad agenda. The focus on ensuring healthy lives rather than preventing diseases is highly welcome (Stepping & Rippin, 2015). A positive feature of this goal is that the majority of targets apply to developing and developed countries alike and additionally, it is complementary to a number of other goals. Nevertheless, they consider the level of ambition to be unrealistic given the current operationalisation of the goal.

Even though SDG3 has been subjected to various critiques, the ambitious and revolutionary nature of the SDG 3 towards universal health coverage is surely the best way to inspire progress towards attaining good health and well-being (Barredo, Agyepong & Liu, 2015; Moreno-Serra & Smith, 2012). In admitting the broad nature of the SDG 3, a successful implementation does not become the responsibility of governments only. Other international organizations and local entities are equally enjoined to rally around governments in their quest to achieve the SDG 3. Affirming the need for a wider stakeholder involvement in health, Parker and Kreps (2005) posit that health issues does not only involve the communication skills and predispositions of a broad range of health care providers and information sources and the support of the larger health care system in promoting effective health communication. To them, this implies developing sophisticated multidimensional approaches and creating interdisciplinary partnerships to address the many problems associated with health literacy in the modern health care system (Parker & Kreps, 2005).

Several MDG-related studies have recorded higher level of awareness but reduced level of knowledge among respondents surveyed. In a study of the Nigerian public, even though Ogbodo and Okoro (2015) recorded that nearly an eighth of the 301 respondents admitted being aware of the MDGs, there emerged a shortfall of 15% who did not have any knowledge. In a similar study to assess the knowledge and perception of medical students from Western Cape, South Africa regarding the MDGs, Yeatman et al. (2012) found out high level of discrepancy between respondents' level of awareness of the goals and knowledge about the specific goal. Even though a little above half of respondents claimed they knew about the goals, a further probe revealed that only a few actually had knowledge of the MDGs (Yeatman et al, 2012). Several awareness campaign strategies have been identified including lectures, posters, radio and television as being the source of respondents MDG awareness (Ogbodo & Okoro, 2015; Nashash, 2013; Yeatman, 2012). In the view of Nashash (2013), 'grassroots' awareness strategies are required where people must first be aware of the MDGs and work with them to demand their fulfilment from their governments. This then implies that awareness and knowledge could possibly be linked to the achievement of SDGs.

### ***Role of universities***

Academic institutions are duty-bound to educate their campus communities and beyond to be key stakeholders in attaining an important developmental intervention such as the SDGs. It has often been suggested that African Higher Education Institutions should be able to establish "a unit or an office to sensitise the institution about the importance of the SDGs, to serve as a clearing house for information about the SDGs, to coordinate all activities related to the SDGs, to ensure that the SDGs are mainstreamed in all the activities of the institution and to mobilise resources, whether nationally or internationally" (McCloskey, 2015). He further establishes that universities and other research institutions have been partners in most areas of development, and have often directly and remotely participated in governance to uplift the life conditions of people.

A survey on sustainable development by higher education institutions in Sub-Saharan Africa (GUNi, IAU & AAU, 2011) reveals that institutions are promoting sustainable development albeit, significantly "small" in most universities. This confirms an earlier study by Bloom et al. (2006) that the involvement of African Universities in national development in many instances is below 5%, and calling for reconsideration and a reposition of African Universities to mount strategies to play a more proactive role in national development. They demand that Universities in Africa should partner and network with industries and other institutions to achieve national development. Continuing in a similar vein, Mazzoleni (2008) also challenges policy makers and academics that aside their key role as knowledge producers, they should now engage directly in actions that promote and contribute to competitiveness, growth and development. Indeed, the survey on sustainable development goals affirms the early views and concludes that the momentum attained so far is a sign of progress which universities can take advantage of in improving sustainability practices. The best way to be responsive to national development issues is for universities to engage in interaction with social partners such as firms, farmers, community, civil society and the government within the regional, national and global levels (Kruss, 2011).

### ***Role of libraries/health librarians***

Libraries, it is believed, ‘provide an essential means of reaching the next billion by supporting digital inclusion through access to ICT, and dedicated staff to help people develop new digital skills’ (United Nations, 2015). Worldwide, 320,000 public libraries and not less than a million parliamentary, national, university, science and research, school, and special libraries are estimated to exist to ensure that information and the skills to use it are available to everyone (United Nations, 2015). This situation lends libraries as critical institutions for all in the digital age. Through the provision of ICT infrastructure, libraries help people to develop the capacity to effectively use information, and preserve information to ensure ongoing access for future generations. Libraries cannot afford to lose the strategic role they are expected to play due to the increasing perception of low image (Public Agenda, 2006; Fuegi et al., 2011).

Research shows that libraries provide non-stigmatized community space, skilled staff and assist online access, which can reach out to vulnerable people (Ukachi, 2011; Fujiwara et al, 2015). In a study by Janavicien (2012), it was realized that 43% of Lithuanian public libraries were implementing bibliotherapy with local health care institutions, with 28% of the surveyed libraries having organized group or individual bibliotherapeutic work with library users. In Ghana, the Northern Regional Library in Tamale has a Maternal Health Corner where pregnant women and health workers have free access to five computers pre-loaded with maternal health information in lively formats, including video and animation (Public Library Health Services/EIFL, 2014).

The Arts Council of England (2014) found out that 81% of local government library authorities in England provide access to e-information on health and well-being. In Cuba, ‘Infomed’, a part of a project to facilitate the electronic exchange of information between a set of libraries, was the first electronic health information network in that country (Seror, 2008). It occupies a strategic position in the National Information System of Medical Sciences in the Ministry of Health, Cuba. Again, the San Juan Planes Community Library (Honduras) plays a central role in bringing safe drinking water to the entire community via a water treatment project they established in the town’s central square (IFLA, 2012).

Moving forward, the International Federation of Library Institutions and Associations (IFLA) has undertaken to work with library associations and institutions in 150 countries, to ensure their readiness to support implementation of the SDGs in their country and locally through library services and programmes, including public access to ICT. With the growing numbers of both government-funded and privately owned tertiary institutions, and its concomitant increase of students enrolled at this level of education, it has become very prudent to gauge the efforts of the libraries of these institutions at meeting the SDGs.

In 2013, the Consumer and Patient Health Information Section (CAPHIS-MLA) of the American Medical Library Association observed that the growing focus on patient-centred care and the general need for accurate general health information have necessitated the need to integrate librarians fully into health delivery systems. By virtue of their training on how to know, identify, select, organize and disseminate evidence-based information, health librarians’ role cannot be overemphasized (CAPHIS-MLA, 2013). Ranging from the provision of information to consumer education, the activities of health librarians have been generally geared towards health promotion, preventive medicine in order to impart knowledge, attitudes and skills with the specific goal of changing behaviour, increasing compliance, thereby, improving health (Aitken et al., 2011). Thus, all over the world, health librarians have tasked themselves with collection management practices, knowledge and resource sharing, advocacy, access and dissemination of information, education, and research. There is however, a distinction about the information provision role of librarians and the core diagnoses and advice-giving role of health practicing professionals, and an interchange of these could rather harm the social and community goals of producing a healthy society (Henderson, 2014; CAPHIS-MLA, 2013; Tan, 2013).

Sacket et al., (2000) observed that the need for health professionals in Canada to integrate individual clinical expertise with the best available external clinical evidence from systematic research has

drawn librarians closer to the health care management system. This, in the observation of Rankin (2008), has among many other reasons caused health librarians the world over to evolve significantly over time, resulting in the emergence of clinical librarians and outreach librarians. Harrison and Beraquet (2009) discovered that in the UK, literature searching and teaching information literacy skills are the key activities for clinical librarians, and these have had a positive effect on the patient experience and clinical decision-making.

Globally, it has been observed that health librarians often operate within three environments. These include academic, medical, nursing or health sciences libraries in the universities and higher education sector; hospital and health services libraries as well as libraries with a focus on health in voluntary, private, government, state and semi-state agencies (Henderson, 2014; Kelly, 2009). In the view of Kelly (2009), librarians in any of these environments provide resources and services that support the teaching and learning, clinical practice and research activities undertaken in these settings. In a study regarding the provision of pandemic disease information by health sciences librarians, Featherstone et al. (2012) discovered the heavy application of social media technologies, such as wikis, Twitter, Facebook, and RSS feeds. The impact of this strategy was regarded as phenomenal as with a wiki receiving more than 25,000 hits in America.

In recognition of the role that librarians play in the health and well-being of communities, The Association for Health Information and Libraries in Africa (AHILA) continues to cater for those who are interested in health information issues and may not be librarians. It has therefore launched a forum Health Information For All (HIFA). Realizing the benefit that inures to members who belong to such professional bodies, AHILA has committed itself to the provision of up-to-date and relevant health information, promote resource sharing and the standardization and exchange of health databases in Africa (AHILA, 2016).

## **Materials and methods**

### ***Study design***

The multiple case study approach was adopted to carry out the study. Generally, a case study is an empirical inquiry, in which focus is on a contemporary phenomenon within its real-life context (Sarantakos, 2005; Creswell, 2003). In multiple case studies, each individual case consists of a complete study, in which facts are gathered from various sources and conclusions drawn from those facts. Multiple cases strengthen the results by replicating the pattern-matching, thus increasing confidence in the strength of the theory.

### ***Sample and sampling procedure***

The study involved ten academic libraries – five from the universities that play a major role in the development of human resources for the health sector through teaching, learning and research and five from health training institutions. Library staff in key management positions such as the Librarian, Deputy Librarian/Library officer were engaged in interview sessions. In all, ten respondents were purposively selected by virtue of the fact that they are very key regarding the issues surrounding the objectives of the study.

### ***Data collection***

Information elicited from respondents was through interviews. The interview was semi-structured in order to allow for harmony whilst accommodating the unique situation of each campus. The semi-structured interview guide was fashioned in such a way to accommodate the unique feature of each interviewee whilst focusing on the objectives of the study. Note-taking and audio recording were the strategies to document the data emanating from the study. Secondary sources of data included electronic resources from search engines and databases as well as other print monographs.

### ***Data analysis***

The interviews were transcribed and together with the observation checklist, analysed according to the themes, categories and sub-categories. The highly rich qualitative data collected from respondents was subjected to careful thematic analysis from which the findings were made.

### *Brief profile of libraries*

- University of Ghana College of Health Sciences. The College of Health Sciences (CHS), an amalgamation of the various institutions within the University of Ghana that train health professionals, was the first College to be established by the University of Ghana in 1999. Prior to the establishment, medical sciences were part of the University of Ghana's programmes since 1962. The College produces highly qualified and competent health professionals and medical scientists to provide promotive, preventive and curative services to meet the health needs of the nation and the global community through world class excellence in teaching, research and dissemination of knowledge. University of Ghana Medical School Library became the College of Health Sciences Library at the inception of the College in 1999. At the inception of the then University of Ghana Medical School Library, it was charged to provide and make accessible library materials and services for the educational and research needs of the students, faculty and staff of the school. It was also to provide for patient care needs of the teaching hospital and other hospitals in the country. In addition, it was to provide for the information needs for the administration of health services, the instruction of the students in the use of the library with emphasis on the use of bibliographical apparatus, and the participation in the global sharing of medical and health sciences literature. <http://chs.ug.edu.gh/welcome>
- College of Health Sciences, Kwame Nkrumah University of Science and Technology (KNUST); The College of Health Sciences at the Kwame Nkrumah University of Science and Technology attained the status of a college in 2005 following a change in the University Statutes. The College provides an environment for community-based professional training, research and support for health care delivery in Ghana and Africa. The College also provides entrepreneurial training in health care, pharmaceutical, training in traditional medicine, especially herbal medicine, health care, pharmaceutical and biomedical sciences. The School of Medical Science Library, KNUST serves five faculties namely – Faculty of Veterinary, School of Dentistry, School of Medical Sciences, Allied Health Sciences and School of Public Health, serving over 5000 clients, including faculty and students. It has about 6,000 volumes of book stock, 320 manual journal titles and a number of online databases and sits 62 users at a time. <http://chs.knust.edu.gh>
- University of Cape Coast College of Health and Allied Sciences. The College was created in August 2014 after the merger with other units. The College provides medical and allied health education in all aspects of clinical, basic science, and community-based participatory research, adhering to internationally accepted principles of humane and ethical behaviour, conscious of the ethical, legal and social implications of genetic research, genomic sovereignty and intellectual property. University of Cape Coast. College of Health & Allied Sciences <http://www.ucccohas.edu.gh/index.php/aboutcol/college>
- School of Medicine and Health Science, University for Development Studies (UDS), the University for Development Studies was established in 1992, under the Provisional National Defence Council (PNDC) law 279, section 29 to fulfil the need for universities to assume a more vibrant role and position in solving social issues including poverty reduction. The

university is strongly positioned to blend academic excellence with community work. The university envisions "to be a home of world-class pro-poor scholarship" as it collaborates with organisations to tackle environmental challenges. School of Medicine and Health Science,

<http://www.uds.edu.gh/about-us/history-facts>

- University of Health and Allied Sciences. Schools of Basic and Biomedical Sciences, Allied Health Sciences, Public Health, Nursing and Midwifery of the University of Health and Allied Sciences (UHAS), the schools through research and scholarship provide higher education for the purposes of the dissemination of research results and the implementation of research results to boost health conditions. The University of Health and Allied Sciences (UHAS) Library started in the year 2013 in a temporary accommodation but now is located in a purpose-designed building on the main campus of the University at Sokode Lokoe. The Library provides comprehensive access to library holdings across the boundaries of individual schools and disciplines. The print library collections comprise over 3,000 textbooks and periodicals relevant to the various programmes of study in the University. The Library also subscribes to an increasing number of electronic journals (e-journals). Both the e-journals and the growing holdings of electronic books (e-books) are available to UHAS students and staff online 24/7 via the internet, regardless of the user's physical location. As a technologically-driven library, the library exists to provide intellectual leadership and support services for academic excellence in medical and healthcare education.

<http://www.uhas.edu.gh/index.php/aboutuhas/establishment-of-uhas>

- Nursing and Midwifery Training College, Korle Bu, Accra, the institution trains nurses in the area of healthcare delivery through cleaning, community health education, health screening, basic health preventive measures, fighting against tuberculosis (TB), leprosy, epilepsy and HIV/AIDs stigmatization and inculcating discipline & ethics of nursing into nursing students for professionalism. The Korle-Bu Nursing and Midwifery Training College has two libraries for both nursing and midwifery students with a collection of about 5,000 books and journals. Headed by a Librarian with two permanent workers and national service personnel. They also have conducive seating capacity of about 102 for users.

[https://en.wikipedia.org/wiki/Korle-Bu\\_Nurses\\_Training\\_College](https://en.wikipedia.org/wiki/Korle-Bu_Nurses_Training_College)

- Kumasi Nursing and Midwifery Training College. The College provides discipline and academic excellence in high standard theoretical and clinical programmes in all the aspects of nursing; general nurse, mental nurse, midwifery, community health nurse, community health, health information, medical laboratory technology, environmental health, oral health, community medicine, community health nursing, environmental health, clinical health care, physiotherapy. Nursing and Midwifery Training College, Kumasi

[https://en.wikipedia.org/wiki/Kumasi\\_Nurses\\_and\\_Midwifery\\_Training\\_School](https://en.wikipedia.org/wiki/Kumasi_Nurses_and_Midwifery_Training_School)

- Ankaful Nurses Training College, Cape Coast, this institution educates students in the provision of mental health care services, the college train students to be mental health professionals in community professionals, psychiatrists and clinical psychology, clinical psychologist, counselling psychologist or psychotherapist, behaviour analysts and community/institutional roles, mental health professional, school psychologist and inclusion

educators, psychiatric rehabilitation, social worker, psychiatric and mental health nurse, mental health care navigator. Ankaful Nurses Training College, Cape Coast [https://en.wikipedia.org/wiki/Mental\\_health\\_professional](https://en.wikipedia.org/wiki/Mental_health_professional)

- The Tamale Community Health Nurses' Training College. The college is one of the public tertiary health institution in Ghana with the aim of training health professionals in the area of general nurse, mental nurse, midwifery, community health nurse, community health, health information, medical laboratory technology, environmental health, oral health, community medicine, community health nursing, environmental health, clinical health care, physiotherapy. Tamale community health Nurses' Training College, [https://en.wikipedia.org/wiki/Tamale,\\_Nurses\\_Training\\_College](https://en.wikipedia.org/wiki/Tamale,_Nurses_Training_College)
- Midwifery Training College Hohoe. Midwifery Training College Hohoe is one of the networks of nursing training schools in Ghana which educates future midwives in general nurse, mental nurse, midwifery, community health nurse, community health, health information, medical laboratory technology, environmental health, oral health, community medicine, community health nursing, environmental health, clinical health care, physiotherapy. Midwifery Training College Hohoe,

[https://en.wikipedia.org/wiki/Ho,\\_Nurses\\_Training\\_College](https://en.wikipedia.org/wiki/Ho,_Nurses_Training_College)

### **Findings of the study**

The results of this study are presented according to the objectives identified above.

#### ***Awareness of SDG***

There was generally a good level of awareness of the SDGs, with all ten respondents citing various sources or means through which they became aware of them. A respondent claimed *"I became aware of the SDGs through a researcher whose thesis topic centred around that subject. I did a couple of searches for her. It's a lot. It is more than the MDGs, the first one from the United Nations"*

In the words of this respondent, SDGs became known to her *"in a workshop not long ago. I think it is just like the Millennium Development Goals, those UN stuffs. They said the world has now fixed some new goals after the old ones"*. Her assertion of the SDGs being spearheaded by the UN is also shared by another respondent who goes as: *"Yes, I have heard of the SDGs. I think it is just like the Millennium Development Goals. I have been seeing it in the papers. I think it is the UN which brought it"*.

Another respondent, in displaying his awareness, intimated that *"President Mahama is even a chairman in some of the implementation bodies"*

In all these, it emerged that respondents' had general awareness but had shallow knowledge about the specific goals and targets. As portrayed by a respondent demonstrating his shallow knowledge about the SDGs, *"I know there were some goals on health with the MDGs. But for the SDGs, because they were mentioned in passing at the workshop, I did not get much on the specific goals"*. It therefore suffices to say that respondents have been made aware of the SDGs, and appreciate the fact that the phenomenon has a relationship with the earlier Millennium Development Goals. They had become aware of it through workshops, the media and their own routine duties.

#### ***Libraries' role in health activities***

The study ascertained the activities undertaken by the libraries to enable communities attain healthy lives and well-being. The findings revealed a general belief in communal preventive health driven by health promotion. One librarian mentioned that an efficient means to

meeting majority of people's health needs was to reach out to them in the communities. According to the librarian at a health training institution, they have *"been engaging in so many community outreach programmes. The students, through their clinical internships are attached to communities. This way, they are able to engage the community members in how they could stay healthy especially through good nutrition and hygiene. This new approach has gone a long way to avert some health challenges that used to confront such residents"*. In a similar vein a librarian attached to a university medical department opined, *"our school has a unique programme, the Third Trimester Field Practical (TTFP), during which, students are sent to the communities to live with the people and help them with various aspects of their daily lives. Health and sanitation is therefore, one of the core areas they tackle. By virtue of having a representation on the board which handles the TTFP, the library fairly contributes to these initiatives by providing health related materials to students."*

It is worthy of note that in all these, libraries have seldom been at the forefront in such health promotion campaigns. The closest role of the library has been to make information available to students or tutors or health practitioners who are the front-liners of such programmes. Confirming this observation, a respondent posited that, *"the library is not involved so much in the community mental health programme. ...we have not actually engaged with any external library to collaborate on such outreach programmes. You know, our focus had hitherto been in the classroom and the clinic or hospital, until we decided to now focus more on the outside"*.

Further, a librarian in a health training institution opined, *"Yea, our School actually focuses on community medicine. The mode of training centres more on the community. So on regular basis, students are sent into communities to stay with them and understand their needs better. ... The library by virtue of being part of this school, has been part of this process. We do support the School of Medical Sciences in most of their activities. But I must say that we have not been at the forefront"*.

Again, from a librarian who manages the library attached to a health facility/hospital: *"No. We have not directly been involved in mainstream community outreach programmes as a library"*.

Contrasting this view, another librarian indicates, *"I am working hard with health trainers (Nurses and Midwives) to produce qualified nurses and midwives as manpower for the health sector in Ghana. I have been part and continue to partake in the national sanitation day organized by the Local Government ministry to clean our area every month. Helping cleaning the area monthly ensures the prevention of communicable disease such as cholera"*.

This notwithstanding, the limited role of the library in supporting health professionals reach out to the public was regarded as being instrumental in ensuring healthy lives and well-being of all.

Putting it succinctly, a respondent opines, *"certainly, the library can seriously be of good help. I mean so many people are suffering from health challenges, especially mental health. Our youths are abusing alcohol and other harmful substances of late. In the training of the nurses, the focus has shifted to how they can help prevent the diseases. And this is where the library and library professionals become very important"*.

It was evident from the respondents that the approach to health delivery had shifted from being clinically-focused to community-focused, targeting disease prevention instead of control or cure. Evidence from health facilities and health training institutions suggested that there were programmes to reach out to the community in a bid to help people attain good health which is the focus of SDG 3. However, in doing this, there was very little ongoing collaboration between libraries and health related institutions. Notwithstanding though, the library's potential in this quest was not unrecognized.

### ***Areas/Strategies for partnership and collaboration in attaining SDG 3***

It was acknowledged that several opportunities existed for the library to collaborate with institutions for the purpose of helping the populace attain healthy lives and well-being. Strengthening this assertion, a respondent from a health training institute admitted that *“all in all, if the public outfit of this hospital collaborates with the library, traditional authority and opinion leaders, a lot of health concerns could be addressed at the micro level. Engaging with other stakeholders actually strengthens our effort”*.

What is more, various entities and strategies were identified by respondents as being key in any collaboration between librarians and other institutions. Stakeholders such as community leaders, municipal authority, media organisations among others, were regarded as being helpful partners to promote good health and well-being. As a caution though, any approach to effective collaboration ultimately would have to be backed or sanctioned by the mother institution such as the Ministry of Health or the Ghana Health Service. A librarian at a health training institute stated, *“An initiative of this nature must be formalized and engage other stakeholders. It must have a regular time period and should involve key community leaders as well. You know, good health is a shared responsibility”*.

This, it is believed, will give such a programme the necessary backbone and ensure sustainability overtime since with a goal such as the SDG 3, library or health professionals, according to a respondent, *“...are only implementers of policies. Most of our policies are made by our mother organization, Ministry of Health through Ghana Health Service. However, internally, we have the opportunity to develop and implement some minor policies but such must be consistent with the policies of the mother ministry”*. In much the same vein, another librarian stated *“...it should be a policy decision. The school has to come out with this policy since we are only an arm of the school. But then, I believe the Library could also impress on the School of Medical Sciences so they jointly embark on activities of such nature”*.

Lots of collaborative health promotional campaign strategies were identified. With different levels of efficiency, some of these strategies could target medium to large scale groups, with varying degrees in the use of technology to ensure health lives and well-being among the citizenry. As a respondent contends, *“these days, several libraries are going digital. Hence technology such as social media, I mean Facebook, WhatsApp, Twitter could be highly relied upon to disseminate information that could help people to live healthy lives. You know that these day, almost everybody has a smartphone”*.

A librarian was also of the view that with the engagement of *“.... focus group discussions, and the design, development and distribution of health education materials to the community, then it will be better”*.

An efficient technology could be seen to be highly potent in reducing traffic at health facilities *“because with that, people could then be encouraged to call on the librarian for any enquiries and receive education. This is very important, even in reducing some avoidable congestion at the hospital”*.

In proposing these strategies, respondents were quick to state that they were not to be one-cap-fits-all strategies. They call for the need to segment the beneficiaries of such programmes (age, occupation, educational level) and appropriately target them with workable initiatives. Again, respondents were of the belief that the build-it-and-they-will-come syndrome was no longer tenable in reaching the masses for the purpose of attaining the SDG 3. Furthermore, respondents believed that the areas for libraries to collaborate could include, but not limited to the crafting of health promotion messages in understandable terms, dissemination of healthy lifestyle campaign messages, pooling and sharing resources among others.

### ***Challenges faced by libraries in this quest and how to overcome them***

Respondents pointed to many possible challenges, some emanating from experiences in carrying out similar projects. Pointing out to the problem of image of the library, a respondent claimed:

*Oh, I do believe in these and other interesting ideas. The library can actually play a direct role in attaining the SDG Health goal. It has always been within their potential. Some reasons why such feats have not been achieved yet is that, the library itself has not clearly made a push about what it can do. Also, many people at the top there think differently when it comes to the library. Not much attention has been given".* Regarding this same issue, another foresees *"the greatest challenge being that of acceptance. People think whatever exists in a library could be found on the Internet. So if we should be seen to be doing any frontline health stuff, it might raise eyebrows.*

With concerns bordering on policy, a respondent believes that *"definitely, a project of such nature will face some challenges. Especially, if the intention is not discussed very well, the health professionals may think that the library is now coming to take their job. There should be a clear policy which will specify the roles of each individual. And there must be lots collaborations"*.

Issues directly to do with lack of training materials and remotely related to funding also emerged as a great challenge which could riddle such a programme. For instance, according to a respondent, *"the library has its own challenges, regarding inadequate teaching and learning materials, and lack of support from external bodies such as WHO and MOH. So if such a programme is to be carried out who bears the cost"*? Putting it rather aptly, another librarian opines, *"funding, awareness creation and education are the major challenges in the achievement of promoting healthy living and wellbeing"*.

Perhaps, a rather compelling challenge is, *"who validates or authenticates the information churned around. The library may be good at information provision, but if information concerning health is not critically scrutinized before they are sent out to the general public, it might lead to serious consequences. So yes, collaboration is important but the health institutions must play the leading role"*. Closely related to this, is a respondent who demonstrates that, *"it is true we are already partners, and are partnering with them. However, if this will not lead to role conflicts, then why not"*.

It also emerged that a programme in the form of ensuring healthy lives and wellbeing may fail if the various segments of the community are not treated uniquely. A respondent for example envisages that, *"for schools, it may be much easier because it is a bit more organized. But for a typical community, people are scattered and have different pressing needs"*. In admitting *"apathy, lack of financial support, time constraints and to some extent professional ignorance"* are some challenges, a respondent goes ahead to suggest probable remedies as *"Institutional, individual, Community and Stakeholder Commitment, as well as advocacy, lobbying, and public education on the part of the librarian"*.

Therefore, the challenges likely to affect a collaboration of the library with other bodies to help Ghanaians ensure healthy lives and well-being will not only emerge from external factors but also, the already existing issues that have bedevilled the library institutions and library professionals.

### **Discussion of Findings**

A number of respondents who claimed to be aware of the SDGs belong to professional bodies such as the Ghana Library Association and the Association for Health Information and

Libraries in Africa (AHILA). Others got to know of the SDGs through Conferences, Community Health Literacy Projects, Literacy Brochures and various activities both at institutional and community levels. In spite of this awareness, there was limited level of knowledge about the details of the goals and their targets. The findings of this study on awareness and knowledge of SDGs is comparable to earlier studies on MDGs by Yeatman et al. (2012) and Ogbodo & Okoro (2015). The authors found out that respondents generally were highly aware of the goals but were not highly informed about the specifics. Their study as well as many others also revealed multiple sources of awareness (Yeatman et al, 2012; Nashash, 2013; Ogbodo & Okoro, 2015).

Regarding the role of libraries and partners in health activities, the findings reveal that libraries may not have dealt directly with outsiders, but for the few times that they have had to directly support a health facility or health training institution to address their core mandate, they have discharged their duties creditably. There was the general acceptance of the fact that the library could collaborate with health facilities, health training institutions and other departments within and outside of academic institutions to help Ghana achieve an ambitious goal like the SDG 3.

Evidence from literature supports this view of cooperation and collaboration by libraries. Even though their roles may appear subtle, they cannot go without being recognized. For instance, in the UK Harrision and Beraquet (2009) discovered that literature searching and teaching information literacy skills are the key activities for clinical librarians, and these have had a positive effect on the patient experience and clinical decision-making. In another study, Hsu et al. (2003) argue that the relationship between librarians and health institutions in the United States could be improved by joint involvement at the levels of curriculum development, instructional design and classroom instruction. Featherstone et al. (2012) in another study indicated that pandemic disease information provided by health sciences librarians in the United States through the use of social media technologies was phenomenal during emergency and disaster situations such as Hurricane Katrina. The use of ICTs to disseminate health related information is also supported by Seror (2008). In Ghana, the Northern Regional Library in Tamale provides health information services to keep rural mothers healthy.

In spite of the diverse levels of responsibilities some higher and others very obscured (Fujiwara et al, 2015; Janavicien, 2012; Ukachi, 2011), a study conducted by the United Nations (2016) is of the firm belief that with the existence of millions of libraries, there could always be avenues to collaborate with local entities to meet the health needs of people. Such collaborations confirm the “pact” as proposed by Cloete et al. (2011) in the theoretical framework.

Libraries, in their bid to fully participate in Ghana’s quest to attain the SDG 3 could be derailed by the many challenges that already affect these information providers. As pointed out by the findings of this study, the low image and perception of the library that the public has continues to be an issue of concern to library practice (Public Agenda, 2006; Fuegi et al., 2011). The challenges pointed out in this study confirm the position held by Parker and Kreps (2005) that, for any success in a wider level of collaboration not only should information professionals possess the skills needed to collaborate with other stakeholders to achieve health goals but also need different channels of communication across a number of different contexts. Also Hsu et al., (2003) believe that in crafting health promotional messages, it is desirable to strengthen the collaboration between full-time public health faculty and library, in order to disseminate technically-oriented training modules to a wider audience. The concerns raised by some respondents about the possibility of librarians transcending into the roles of health professionals are well founded. Contributing to the seriousness of such situation, various researchers have posited that an interchange of these roles could rather harm the social and community goals of producing a healthy society (Henderson, 2014; CAPHIS-MLA, 2013; Tan, 2013).

## **Conclusion**

It can be safely concluded, based on the findings of the study that academic libraries and information professionals have been assisting in meeting the health needs of communities with varying degrees of cooperation. This puts them in a strategic position in helping Ghana attain the Sustainable Development Goal 3 – Ensuring healthy lives and wellbeing. In doing this, libraries and information professionals can confidently add to their traditional role of collection management, knowledge and resource sharing, advocacy, and research, to assume a more challenging roles of providing evidence-based information, towards health promotion, preventive medicine in order to impart knowledge, attitudes and skills with the specific goal of changing behaviour, increasing compliance, thereby, improving health. And with the growing trend of technological advancement, the library's potential in collaborating with diverse key actors to advance further the health and wellbeing of communities is unending.

## **Recommendations**

Based on the findings and the conclusion, it is recommended that realising the enormous potential that libraries in academic institutions have in helping meet the SDG 3, there should be more sensitization among librarians of this fold on the supportive roles they can play in harnessing such potentials to meet the immediate health needs of their academic communities. While charging librarians to personally build their capacity in health related issues, the Library training school, the Department of Information Studies Department, University of Ghana may have to revise their curriculum to accommodate not only the SDG 3 but all the SDGs and how the new crop of trainees could contribute to help Ghana attain such goals. Also, the continent's Health Library and Information professional's umbrella body, AHILA could also spearhead the call for members attached to health training institutions and departments to build their capacity regarding this health goal.

Of greater significance is the advocacy role of librarians in bringing together key actors to meet health goals. This charge could be led by the Ghana Library Association to include health-related information issues in the many conferences, seminars and continuous professional development programmes it organises.

Again, while avoiding role conflicts and overstepping of legitimate supporting roles, academic libraries could employ emerging technologies to bridge the gap between patrons and evidence-based health information and services. Whilst relying on health professionals for approved contents for dissemination, librarians could use the various marketing techniques existing in their libraries to make health related information conveniently available to patrons in real time using appropriate technologies.

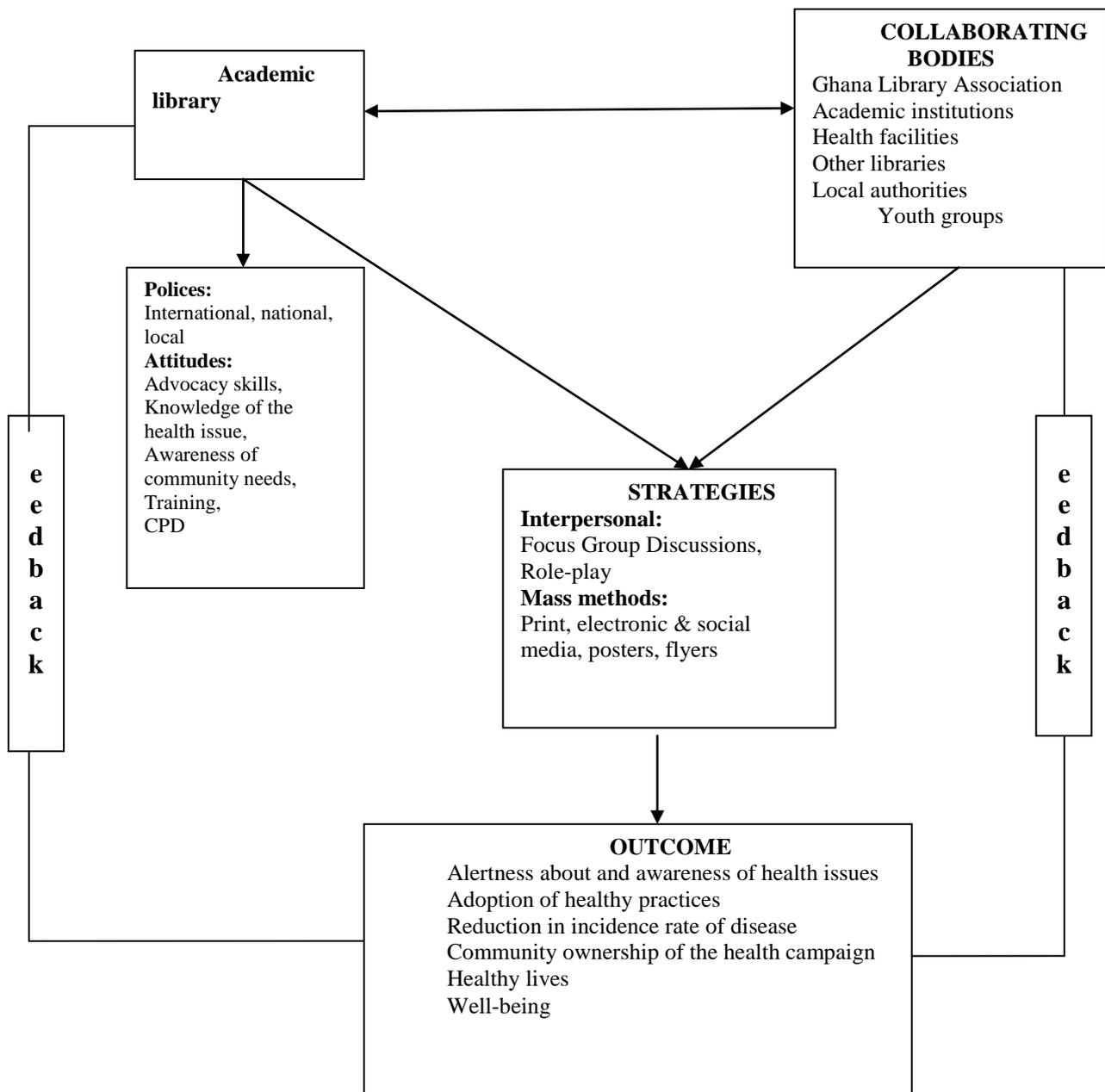
Finally, a model on how libraries can succeed in the implementation of SDGs is proposed.

### ***Model on how libraries can achieve the SDG 3***

For libraries to succeed in collaborating with other institutions to champion the attainment of the SDG 3, it will be prudent to first look within. The library must uplift its own image so it can efficiently collaborate with others to help ensure healthy lives and well-being. This could be in the form of both formal and informal training to be abreast of issues that transcend other fabrics of the society. It takes one to be well-abreast of health issues before one could be accepted to collaborate with a health professional. This could be spearheaded by the National Library Association introducing more multi-disciplinary issues or themes in their conferences, seminars and workshops.

Also, whilst not looking down upon themselves, librarians should learn to acquire advocacy skills to be able to work with people from diverse backgrounds such as health professionals, lecturers, community opinion leaders among others to help push such national agendas.

One other issue is the need for very up-to-date materials for effective health promotional campaign such as posters.



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