

## **Perception of health systems strategic economic policy by medical librarians of Delta State University Teaching Hospital, Oghara, Nigeria**

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### **Abstract**

The study is on perception of health systems strategic economic policy by medical librarians of Delta State University Teaching Hospital (DELSUTH), Oghara, Nigeria. The study employed a descriptive design. DSUTH has a total of seven medical librarians who were all used as sample for the study. The study used a questionnaire for data collection. The instrument was administered to the health librarians on a hand-to-hand basis to facilitate retrieval of all administered instrument. The findings showed that effective implementation of strategic policies on healthcare service delivery can lead to equity in healthcare services, help prepare medical librarians to accept health economic policies, prepare for training on strategic health policies and facilitate the repatriation of Nigerian medical doctors working overseas and create general wellbeing among Nigerians; that in order to overcome the challenges bedeviling the implementation of good healthcare policies in Nigeria, there is a need for effective oversight role by government officials and hospitals' management and attitudinal change to provide modern tools that can facilitate data capturing, sharing, and storage. It was concluded that in order to develop and improve healthcare services strategic policies would be resourceful; and recommended that both the state government and hospitals' management develop strategic economic policies and ensure effective implementation of health related policies to attract more healthcare professionals back to the hospitals and boost the overall wellbeing of Nigerians.

**Keywords:** Perception of health systems, strategic economic policy, medical librarians, Delta State University Teaching Hospital, Oghara, Nigeria

### **Introduction**

Despite making up 14% of the world's population, sub-Saharan African countries barely make just 2 percent of global economic activity (Carnegie Endowment for International Peace, 2021). Sub-Saharan Africa's GDP is projected to stagnate in 2022, sliding from 4% in 2021 to 3.6% in 2021; this deceleration is a consequence of narrow shocks including the global economic downturn and prolonged health, financial, food, and ideological catastrophes all around world (The World Bank in Africa, 2022). Given that Africa is home to more than 1 billion people, it is now obvious that the continent's economy is struggling. This approaching economic catastrophe is spurred on by recent and predictors

upheavals, which underlines the urgency for African policymakers to put into motion mechanisms that can quicken structural change via productivity-enhancing growth and the creation of more and better jobs for young Africans (The World Bank in Africa, 2022). The African economy's overreliance on borrowing from industrialized countries and international organizations is what causes underdevelopment among Africans and drains development funding over time through debt servicing. What form does the body currently take?, is the critical question. Then how are librarians perceived? Are they committed to explore beneficial ideas and offer project plan for a rigorous inspection of the economy and other elements of African life?

### Literature review

The work was examined underneath the following three tropes: hurdles in enacting Nigerian health fiscal strategy, variables influencing the deployment of fiscal plans in medical libraries, and healthcare librarians' perceptions and attitudes regarding strategic economic policies.

The leadership of Africa, notably those of Nigeria, are cognizant of their failures to put into motion a number of strong measures that may have helped the country's economy and, in particular, its health establishment. The figureheads of Nigeria should recognize that regulations do not succeed or fail on their own merits and that policy implementation always be strengthened and reinforced by three (3) tactics: identifying key messages for policy practitioners, dissecting the primary causes of policy failures, and exploring various methods of policy support (Hudson, Hunter & Peckham, 2019). Inferring from this, leaders must accept that for regulations to work, there must be follow-ups with solid economic and policy studies or research that may help alter plans. They should also take into account the three phases of policy implementation (short, medium, and long term) and support this with appropriate documentation, descriptions of functions, the worth of cabinet-positions, and consideration of outside influences and policy interactions. More crucially, that workable policy needs time to develop rather than being written off at the inauguration when not all anticipated implementation options have been tried.

The following components were found by Hudson, Hunter, and Peckham (2019) to dissect or unhook the fundamental elements of government reform:

- i. Examining policy alternatives and their viability with important implementation agencies.
- ii. Establishing platforms for cooperative policy design: The less arguments there are during the implementation phase, the more consensual the design process was.
- iii. Developing frameworks for policy layout assurance: identifying key implementation risks and difficulties and adding risk management techniques
- iv. Creation of strong implementation statements that clearly outline what may be anticipated to be achieved and under what conditions.
- v. Using the finest evidence base currently available to guide policy formulation
- vi. A consensus on what would represent a sufficient financing source for securing the policy and attaining the program's goals.
- vii. Verify that the implementation agency has a realistic expectation of success.

The medical librarian is anticipated to unwittingly mediate by organizing programs (workshops, town hall meetings, outreach, etc.) that inform people and the obligatory follow-up strategies for execution of legislation. By harnessing these crucial features, the medical librarian will give policymakers the ambition to sustain the adoption, integration researches/studies by stakeholders, and opinion polls confidence and reliance for the policy outcomes. Medical librarians have a duty to provide public-libraries with workable health economic policies so that people can present them to their thronging patrons and inspire patience in their users to wait for policies to complete the full implementation cycle. As

per Whiteman, Dupuis, Morgan, D'Alonzo, Epstein, et al. (2018), public libraries tend to converse the social determinants of health. In a review on the difficulties with effective policy implementation: the Nigerian experience, Makinde (2005) came to the conclusion that "it is evident that regulations are rolled out periodically in poorer world but, the overwhelming part, without obtaining the intended results."

Lynch, Young, Jowaisas, Boakye-Achampong, and Sam (2021) discovered in their study African-libraries in advancement: preconceptions and possible scenarios that "interviews with practitioners indicate that preconceptions of libraries stay low and limited but permit for possible roles for libraries as neighborhood entities and development resource hubs for libraries." The recording of data production is vital to demonstrating the potential of libraries to genuinely participate in developing projects, according to a similar assertion made by them. Guidelines must therefore be monitored or adhered to throughout all phase of implementation to be acknowledged and accepted by all parties. Hudson, Hunter, and Peckham (2019) highlight the usage of assorted strategies. These include:

- i. Two-way communication processes: reactions from the policymaking center to implementing agencies after receiving progress reports from the latter
- ii. utilizing or developing intermediary groups to take up the slack between the creation and execution of policy
- iii. Creation of reasonable primary and secondary targets with established timeframes

- iv. Distancing support mechanisms from duties in monitoring, regulating, and inspecting: Using policy support initiatives to better comprehend the narratives underlying the statistics
- v. Realistic expectations of what "success" looks like: In the eventuality that "wicked issues," policy objectives might never be fully achieved.

Achieving Nigerian health economic policies, as per medical librarians, requires the availability of cash, political support, proper mobilization of stakeholders, strategic planning procedures, firm targets, and an execution schedule (Obodo, 2016). According to Hudson, Hunter, and Peckham (2019), the following must occur for policies to receive the necessary backing and acceptance:

- i. Ensure that individuals implementing policies in managerial and professional roles adhere to the consensus reached with key stakeholders during the planning stage: comprehend bottom-up discretion and problems.
- ii. Choosing and preparing a team of knowledgeable and competent "implementation brokers" to offer support tailored to local circumstances
- iii. Provide assistance with implementation when it is required or requested, including ongoing support for problem-solving and capacity-building to create long-term implementation skills and expertise.

It is important to present the policies in an organized manner and with an awareness of their possibilities to the general-public through a variety of media since medical

librarians in this case act as facilitators or mediators. The consequence is, the medical librarian must profile such policies to spot the target audience and provide sufficient justification to that population for the policy to be accepted and currently implemented.

The pace of execution of legislation in Nigeria is typically slow, like it is in many other developing nations. The notion that policies to have been appreciated only after being fully implemented are a prevalent one. The study, researched by Ojo (1995), "identified certain critical areas of economic management that have inhibited complete commitment to the accomplishment of the core goals," and the outcome "many policy recommendations are presented." The necessity for macroeconomic stability, the rationalization and diminution of public sector's economic contribution, the extension of the private sector, the call for greater economic diversification, the radical reform of the external trade regime, and the encouragement of political stability, and among the variables well-known in the study as impediments to policy formation were the deployment of a thorough plan for managing the nation's economy. Unfortunately, because of the government's attitude of incompetence and its inability to alter Nigeria's policy framework, the issue has gotten worse. All parts of our existence, not just one aspect of the Nigerian economy, are impacted by the current situation.

When creating health economic policies, it's crucial to consider a wide range of aspects, including the general public's health information literacy, educational background, financial situation, and information needs, as well as the morality of healthcare delivery and the policy's overall economic impact. Ullah and Ameen found that information literacy skills include "accessing the looked-for information effectively/efficiently; identifying and

verifying pertinent, trustworthy, and unswerving information sources; recognizing the call for information; verifying the relevance and quality of information sources; and using information ethically and legally" in their 2015 study on medical librarians' perceptions of the value of information literacy skills in India.

Kazempour, Soleyman, Najafi, and Ashrafi-rizi (2021) did a second study on the COVID-19 situation in Iran and unearthed that there were "hurdles related to medical librarians, institution barriers, specialist barriers, and context of society (country conditions)-related barriers." As a consequence, this could be understood as a viral condition that has contributed to Nigeria's lax attitude toward the implementation of economic policies. But in Nigeria, Okafor (2020), in his study on public library services in Nigeria: difficulties and strategies, discovered that "the issues mentioned include inadequate funding, poor conditions of service and prospects for the personnel, insufficient ICT infrastructure, and staff with ICT capabilities." To put it briefly, strategic economic analysis has identified numeral problems with the Nigerian health systems.

### **Statement of the problem**

With more than one billion inhabitants, Africa's economy finds it thorny to provide healthcare services and implement fiscal policies. Medical librarians are at a crossroads because of the failure to implement measures that would improve the economy and promote economic stability. Owing to poor or nonexistent economic policy implementation, the project aims to investigate "understanding Nigeria health systems via strategic economic policy: librarians' perspective."

### **Objectives of the study**

This study's main objective is to explore perception of health systems strategic economic policy by medical librarians of Delta State University Teaching Hospital (DELSUTH), Oghara, Nigeria. The specific objectives are to:

1. Identify the variables that affect how economic policies are implemented in medical libraries.
2. Determine the perceptions and attitudes of medical librarians towards strategic fiscal plans.
3. Recognize the obstacles medical librarians in Nigeria confront in implementing health economic policy

### **Research questions**

The following questions are answered in the study:

1. What variables affect how economic policies are implemented in medical libraries?
2. What are the perceptions and attitudes of the medical librarians towards strategic fiscal plans?
3. What obstacles do the medical librarians in Nigeria face while implementing health economic policy?

### **Methods**

This study adopted the descriptive-research-design. "Descriptive design studies the general objectives by disclosing the characteristic traits of a given unit, scenario, and group of population," claim Achugbue and Ogbomo (2017). Thus, descriptive-surveys enable researchers to describe or explain events, processes, or segments of a population. By methodically compiling facts and trustworthy facts, the descriptive survey "also provides basis for current situation and

present conditions" (Achugbue & Ogbomo, 2017). This study adopted the descriptive design because it was found suitable for the study.

There are seven (7) medical librarians in Delta State University Teaching Hospital (DELSUTH), Oghara, which is the location of this study. The total enumerative/census sampling technique was used in this study. By using the census sampling technique, particularly when the participant is small, this study's sample populace is actually composed of all DELSUTH medical librarians. "Total enumerative sampling eliminates the risk of biased sample that is often encountered in a randomized study sample" (Glen, n.d.). A self-constructed questionnaire entitled: "perception of health systems' strategic economic policy by medical librarians of Delta State University Teaching Hospital (DELSUTH), Oghara, Nigeria Questionnaire" was used to collect from all the seven medical librarians on their perception and behaviour in relation to economic policies, and the challenges related to implementing economic health policies in Nigeria.

The researchers used a research assistant from the university under investigation to distribute and retrieve participants. The data were analysed by means of frequency counts, percentage and mean.

### **Results**

The results of the study are presented in this section.

The age distribution of the respondents is displayed in the data shown in Table 1. It was found that 5 (72%) of the respondents are between the ages of 46 and 50, 1 (14%) is between the ages of 41 and 45, and 1 (14%) is between the ages of 51 and over. In accordance with the study's findings, the

majority of its respondents are between the ages of 46 and 50.

Data in table 2 show that 5 (71%) of the respondents were females and 2 (29%) were males. The study's researchers arrived at the conclusion that women make up the majority of its responses.

Table 3 provides details about the respondents' academic backgrounds. According to the data, 1 (14%) of the respondents and 6 (86%) of the participants both hold master's degrees in science. The majority of the respondents who took part in this study held M.Sc. degrees, it was found.

Table 4 revealed that 7 (100%) of the respondents had 16 years and above of work experience. The conclusion was reached that all the respondents used for this study had work experience of 16 years and above.

**Research question one:** What variables affect how economic policies are implemented in medical libraries?

The data in Table 5 are used to answer this question.

**Table 1: Age range of the respondents**

Age Range	Freq.	%
25-30 Years	-	-
31- 35 Years	-	-
36 - 40 Years	-	-
41-45 Years	1	14
46 – 50 Years	5	72
51 Years and above	1	14
<b>Total</b>	<b>7</b>	<b>100</b>

**Table 2: Gender of the respondents**

Gender	Freq.	%
Female	5	71
Male	2	29
<b>Total</b>	<b>7</b>	<b>100</b>

**Table 3: Academic qualification of the respondents**

Qualification	Freq.	%
Ph.D.	1	14
M.Sc.	6	86
<b>Total</b>	<b>7</b>	<b>100</b>

**Table 4: Years of experience of the respondents**

Years	Freq.	%
1 – 5 Years	-	-
6 – 10 Years	-	-
11 – 15 Years	-	-
16 – Years and above	7	100
<b>Total</b>	<b>53</b>	<b>100</b>

**Table 5: Factors affecting how economic policies are implemented**

Factors	SA	A	D	SD	$\bar{x}$
It will enable my library to save money for the future	4	2	1	-	3.43
It facilitates health tourism	3	4	-	-	3.43
It aids health information marketing	4	2	1	-	3.43
It facilitates collaborative health information service	3	3	1	-	3.29
It guides health innovations and care delivery systems	2	4	1	-	3.14
It facilitates healthcare satisfaction among healthcare services	5	1	1	-	3.57
It increases efficiency in health service delivery	3	3	1	-	3.29
It leads to equity in healthcare services	5	1	1	-	3.57
It aids inclusivity in healthcare service delivery and bring about general wellbeing	4	2	1	-	3.43
<b>Aggregate mean</b>					<b>= 3.40</b>

**Criterion mean** = 2.50

The results in Table 5 demonstrated that the mean score of 3.40 was higher than the criterion mean of 2.50, which indicates that a variety of factors influence how economic policies are used in medical libraries. The majority of respondents specifically mentioned that the implementation of economic policies in medical libraries will promote inclusivity in the provision of healthcare services, facilitate healthcare satisfaction among healthcare services, and lead to equity in healthcare services ( $x=3.57$  and 3.43, respectively). This will allow my library to save money in the future and promote health tourism, assist in the marketing of health information, and facilitate healthcare satisfaction among healthcare services. Implementing economic policy will also promote cooperative health information services and increase the effectiveness of providing health care ( $x=3.29$  and 3.29, respectively), and it will

direct health innovations and care delivery systems ( $x=3.14$ ).

**Research question two:** What are the perceptions and attitudes of the medical librarians towards strategic fiscal plans?

The data in Table 6 are used to answer this question.

Data from Table 6 showed that the aggregate mean, which was 3.63, was higher than the criterion mean, which was 2.50. This suggests that medical librarians have a favorable perspective of and attitude toward strategic economic policies.

**Research question three:** What obstacles do medical librarians in Nigeria face while implementing health economic policy?

The data in Table 7 are used to answer this question.

**Table 6: Medical librarians' perceptions and attitudes towards strategic fiscal plans**

Statements	SA	A	D	SD	$\bar{x}$
It help prepare medical librarians to accept health economic policies	6	1	-	-	3.86
I am prepared for training on strategic health policies	5	2	-	-	3.71
I am ready to understand community awareness programme to create health economic awareness among Nigerians	3	4	-	-	3.43
Implementation of effective health policies can become e new source of taxable income if effectively implemented	4	3	-	-	3.57
Efficient healthcare policy execution can stop Nigeria's capital flight	4	3	-	-	3.57
Good policies can repatriate Nigerian medical doctors working overseas and create general wellbeing among Nigerians	5	2	-	-	3.71
Good policy implementation generally requires adequate awareness creation	4	3	-	-	3.57
<b>Aggregate Mean = 3.63 Criterion Mean = 2.50</b>					

**Table 7: Health Economic Policy Challenges in Nigeria**

Statements	SA	A	D	SD	$\bar{x}$
Lack of policy implementation in medical libraries and medical schools	2	5	-	-	3.29
Poor collaborative atmosphere between medical librarians	1	5	1	-	3.00
Poor awareness of health policies that can leverage economic standing of the citizenry	4	2	1	-	3.43
Poor working environment between medical doctors, nurses, healthcare givers and medical librarians	3	2	2	-	3.14
Lack of oversight role over policy implementation by the government and management	6	1	-	-	3.86
Unwilling attitude to provide modern tools for data capturing, sharing, storage	5	2	-	-	3.71
lack of adequate database for medical referrals and follow-ups	3	4	-	-	3.43
Capturing of individual records for consistency in medical records keeping	3	4	-	-	3.43
<b>Aggregate Mean = 3.41 Criterion Mean = 2.50</b>					

Table 7 show that the aggregate mean of 3.41 was greater than the criterion mean of 2.50, suggesting that there are a number of barriers to the implementation of health economic policies. In particular, the majority of medical librarians believe that the lack of an oversight role over policy implementation by the government and management (x=3.86), an unwillingness to

provide modern tools for data capturing, sharing, and storage (x=3.71), a lack of awareness of health policies that can leverage the economic standing of the populace, an inadequate database for medical referrals and follow-ups, the capturing of individual records for consistency in medical research and poor

collaborative atmosphere between medical librarians ( $\bar{x}=3.00$ ) are all factors.

### Discussion

Based on the poll, there were more women working as medical librarians than men, and the largest part of them were older. Again, it was eminent that the technical services division of the library has a superior concentration of medical librarians. The majority of these librarians have master's degrees in library science, and all have more than 16 years of experience.

Among the major conclusions of this study is that fiscal plans should be implemented in a way that promotes health equality. Health equity is the absence of unfair, preventable, or redress able inequalities between groups of individuals, according to the World Health Organization (2021), regardless of how such groups are categorized socially, economically, demographically, geographically, or by other dimensions of inequality (such as sex, gender, ethnicity, disability, or sexual orientation). Unfortunately, this scenario does not apply to the Nigerian economy.

Another discovery is that it can promote health tourism. "A service that promotes health and raises a person's morale at a place of residency that lasts for more than 24 hours and less than a year (using mineral water, weather, or medical interventions)," according to the World Tourism Organization. It was published in 2021 by Jahanbani, Derkvand, Najafpour, Torabipour, and Razmi. Medical librarians contribute to the total healthcare output when they provide correct and timely information that enables information seekers to have confidence in the librarians' capacity to supply information. As previously stated, according to Jahanbani, Derkvand, Najafpour, Torabipour and Razmi (2021), "health tourism encompasses the capabilities

and facilities of health centers in the field of health tourism (e.g., hospitals, clinics, diagnostic centers, offices, medicinal plants, and hot springs)," including medical librarianship. This is especially true now, as people all around the world seek out excellent health and are willing to receive care no matter where they are.

If healthcare-related economic policies are to be implemented, medical librarians' impressions and attitudes toward them must be positive. According to Adeloje, David, Olaogun, Auta, Adesoken, and --- Iseolurunkanmi (2017), "In Nigeria, several challenges have been noted within the health system, particularly in training, funding, employment, and deployment of the health staff". The recent study, found that good policies can bring back Nigerian doctors who are now working overseas and enhance general wellbeing among Nigerians, supports this assertion. More importantly, it helps with the training of medical librarians who are working to adopt health economic concepts and transform Nigeria's decimal system.

It was stated that Nigeria's health economic policy faces a number of challenges in its execution.

The lack of governmental oversight of the operation of medical libraries and the implementation of public policy is one of these problems. Masfield, Msosa, and Grugel (2020) recognized three types of challenges: influence in decision-making (unequal power; stakeholder involvement), accountability (enforceability, answerability, stakeholder-led initiatives), and health resource management (healthcare financing, pharmaceutical supply)". No matter how long it takes to implement a policy, it will be effective if people in charge of it do their jobs correctly.

## Conclusion

Conclusion looks like recommendation. It should be derived from the findings.

The study on perception of health systems' strategic economic policy by medical librarians of Delta State University Teaching Hospital (DELSUTH), Oghara, Nigeria concluded that: strategies to help prepare medical librarians to accept health economic policies need to be adopted; fiscal plans should be implemented to leverage healthcare services in Nigeria; policy implementation on healthcare service delivery can promote health tourism; and more specifically, the creation of strong economic policies for healthcare service delivery can facilitate the repatriation of Nigerian physicians who are now working overseas, thus enhancing the overall wellbeing of all Nigerians.

The following recommendations are made based on the findings:

1. There is the need for developing strategic economic policies by the state governments through the implementation of fiscal plans.
2. Government and hospital management, especially medical librarians should, ensure effective implementation of health related policies to attract more healthcare professionals back to the hospitals and boost the overall wellbeing of Nigerians.

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