

# **Health InterNetwork Access to Research Initiative (HINARI)**

## **Summary of Activity to July 2003**

<http://www.healthinternetwork.org>

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The HINARI Project was first announced on July 9, 2001. This initiative, sponsored by the World Health Organization, has as its main goal to provide equitable access to health information. The core objectives of the project are content, Internet connectivity and capacity building.

Phase I provides free access to biomedical journals from institutions in the countries designated by the World Bank in 2001 as Low Income Economies (the gross national income GNI per capita is less than \$1000).

### **Phase I**

Initially six biomedical publishers (Blackwell, Elsevier Science, Harcourt International STM Group, Springer Verlag, John Wiley and Wolters Kluwer), signed a Statement of Intent in London, in July 2001 to implement Phase 1 of the project. Dr. Michael Scholtz, Special Representative of the Director General of WHO, leads the project. WHO staff identifies institutions that would qualify for the access to the HINARI Portal on the WHO server in Geneva. The portal provides access directly to the publisher's computer servers. Yale University offered its own library user authentication system to HINARI to assist in this project.

Institutions that qualify include research centres, medical, pharmacy and nursing schools, large hospitals, government health and policy departments. For-profit institutions were specifically excluded.

The project was up and running by January 30, 2002. As of November 2002, 377 institutions (out of a possible WHO-identified 490) have access (see Appendix B). There are now 30 publishers who have joined this initiative thereby providing access to over 2000 peer reviewed journals. (See Appendix A for List of Publishers)

### **Phase II**

Phase II of the project is extended to the World Bank's designated Lower Middle Income Economies (LMIE) group (see Appendix B). So far 204 institutions (out of a possible 320 identified by WHO) from 31 countries have registered with WHO for access to HINARI. The institutions that apply for access from the LMIE group pay \$1000 per annum for access. Without this project the annual cost of subscriptions to the project's medical journals would cost each institution over \$750,000. Phase II was activated in early in 2003.

### **HINARI Training Course in Information Management**

In July 2002 the first of the training courses on how to perform and manage electronic searching was held in Tanzania at the National Institute for Medical Research, Dar es Salaam. Eleven librarians and information managers from seven countries (Cameroon,

Ethiopia, Ghana, Kenya, Nigeria, Tanzania, Uganda) participated in this workshop on information management of HINARI and other web-based resources.

The workshop, led by Ms Uju Mollel, Cushing/Whitney Medical Library, Yale University and Ms Elsie Okobi, Library Science and Instructional Technology, Southern Connecticut State University, included presentations and hands-on sessions that covered general computer skills, an overview of the Internet, an introduction to the HINARI menu and how to search publisher's websites where the fulltext journal articles may be found.

### **Current and Future HINARI Activity**

The Workshop training materials have now been translated into French, Russian, Spanish and Portuguese. NGOs active in health development have organized training sessions locally. It was mentioned by Barbara Aronson from the WHO office that there is a direct correlation between training sessions and new institutional registrations. The organizers of local sessions not only are training their own staff but invite representatives from other local institutions that have not yet registered.

Another positive development that was noticed is that "eligible institutions are successfully using their access to HINARI as an argument for increased or new funding (from their governments, from national and international donors) to pay for better computer equipment and for increased connectivity. Since one of the main goals of any development initiative is to provoke local pro-activity, we count this development as a strong sign of HINARI's success." (Aronson, B. July 2003).

A review of the HINARI Project will be done in 2004 to ensure that the goals and objectives are being met. This review will include an examination of which countries remain or have changed from LIE to LMIE or vice versa.

This initiative is changing the face of information discovery and dissemination for many countries in Asia, Africa and Latin America and Oceania. This medical model together with an earlier initiative, INASP, the International Network for the Availability of Scientific Publications based in Oxford, UK, (<http://www.inasp.info/>) is assisting LIE/LMIE countries greatly to access important medical, scientific and technological information that was, for the most part, difficult to obtain.

(INASP was established in 1992 by the International Council for Science (ICSU) as a program of the Committee for the Dissemination of Scientific Information (CDSI). This program's goals also support activities that promote access to scientific and scholarly information.)

## **Appendix A.**

### **HINARI Publishers and Partners**

The list of HINARI publishers and partners has now expanded and includes 30 publishers:

American Association for the Advancement of Science	Lippincott Williams & Wilkins
American College of Physicians	Massachusetts Medical Society

American Medical Association (JAMA)	National Academy of Science
BioMedCentral	Nature Publishing Group
Blackwell Publishing	Oxford University Press
BMJ Publishing Group	Portland Press (Biochemical Society)
CABI Publishing	Royal Society of Medicine
Canadian Medical Association	Royal Pharmaceutical Society of GB
Cochrane Collaboration	Sage Publishing
Company of Biologists	SciELO (Brazil, Chile, Cuba, Public Health)
Elsevier Science	Springer Verlag
Harcourt Worldwide STM Group	Taylor & Francis
Hodder Arnold	Thieme Verlag
Infectious Diseases Society of America	University of Chicago Press
John Wiley	Wolters Kluwer

The list of the HINARI website also includes specific journal titles, e.g. Medical Journal of Australia, Morion (Ukraine).

## Appendix B.

### World Bank Ranking of Countries

The HINARI project country classifications are from 2001 and even though the World Bank revises the gross national income (GNI) income levels, the project will continue for a few years based on the original designations. For instance, in June 2003, the World Bank website indicates that Low Income Economies have a GNI less than \$745 per annum and the Lower Middle Income GNI is \$746 to \$2,975. The 2003 lists remain essentially the same as the 2001 lists, however.

#### Phase 1

#### The World Bank Low Income Economies (LIE): GNI less than \$1000

69 countries

Afghanistan	Georgia	Niger
Albania	Ghana	Nigeria
Angola	Guinea	Papua New Guinea
Armenia	Guinea-Bissau	Rwanda
Azerbaijan	Guyana	Sao Tome & Principe
Bangladesh	Haiti	Senegal
Benin	Honduras	Sierra Leone
Bhutan	Kenya	Solomon Islands
Burkina Faso	Kiribati	Somalia
Burundi	Kyrgyzstan	Sudan
Cambodia	Laos (People's Dem. Rep)	Tadjikistan
Cameroon	Lesotho	Tanzania, (United Rep)
Central African Republic	Liberia	Togo
Chad	Madagascar	Tokelau
Comoros	Malawi	Turkmenistan
Congo, Dem.Rep.	Mali	Tuvalu
Congo, Rep.	Mauritania	Uganda

Cote D'Ivoire	Moldova, (Rep.)	Ukraine
Djibouti	Mongolia	Uzbekistan
East Timor	Mozambique	Vietnam
Eritrea	Myanmar	Yemen
Ethiopia	Nepal	Zambia
Gambia	Nicaragua	Zimbabwe

## Phase II

### World Bank Lower Middle Income Economies (LMIE) GNI \$1001- \$3000

41 countries

Algeria	Fed. States of Micronesia	Panama
Belarus	Fiji	Paraguay
Belize	Guatemala	Peru
Bolivia	Jamaica	Romania
Bosnia & Herzegovina	Jordan	St. Vincent & the Grenadines
Bulgaria	Kazakhstan	Samoa (Western)
Cape Verde	Kosovo (Serbia/Montenegro)	Suriname
Colombia	Latvia	Swaziland
Costa Rica	Lithuania	Syrian Arab Republic
Cuba	Macedonia (Rep.)	Tonga
Dominican Republic	Maldives	Tunisia
Ecuador	Marshall Island	Vanuatu
El Salvador	Morocco	Wallis & Fortuna
Equatorial Guinea	Namibia	West Bank & Gaza

## Appendix C.

### Health InterNetwork: Partners

Bill and Melinda Gates Foundation	UN Population Fund
International Telecommunications Union	Unicef
Open Society Institute of the Soros Foundation Network	UNESCO
Satellite	United Nations Volunteers
UN Development Program	The World Bank Group
UN Fund for International Partnerships	World Health Organization

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