

EAHIL2010 - 12th European Conference of Medical and Health Libraries

OPENING SESSION, 16 June 2010, 9h30m

Centro de Congressos do Estoril , Auditório 2

Dear Mayor of Cascais António Capucho

Mrs. Suzanne Bakker -Chairman of the EAHIL

Dear Margarida Meira

Dear Guests

On behalf of the Board of Trustees of the Calouste Gulbenkian Foundation I would like to congratulate the organizers of this important event and also express our thanks for the opportunity of participating in the Opening Session.

These remarks are always a good chance to review the role of the Foundation in the Health field particularly on health information management and also to envisage new challenges in this area and what can be our contribution to accomplish them.

I)For more than 50 years the mission of the Foundation in the fields of biomedical research, health and human development has gradually been adapted to the country's social reality with three main stages being clearly identifiable.

1st Phase: (1956-1980) by the end of the 1970s the action of the Foundation was characterised, fundamentally, by the granting of **individual assistance** in response to requests for health care. The first **public health support programmes** also date from this era, namely campaigns to eradicate poliomyelitis and malaria, the equipping of laboratory units and provision of health training actions.

From the 1970s onward direct support evolved (progressively) towards the equipping of hospitals, providing them with diagnosis equipment and treatment means, thus taking a relevant role in the promotion of modernization of medicine already effective in Western Europe and in the United States.

The creation of the ICG in 1961 was a truly inspired decision which created **leverage** in biomedical research and which remains till this day a reference institution with international recognition.

2nd Phase: (1980-2000) The 1980s and 90s saw the structuring of the National Health Service which translated into a significant improvement in Portuguese health indicators, potentiated by Portugal entering the European Union. The Foundation began to play a major part in the in supporting the training of medical staff and the acquisition of leading edge diagnostic and treatment equipment, playing a pioneer role in many new medical specialties.

During this phase, technology and advanced medical training of the health care professionals were deemed as most relevant.

3rd Phase: (Post 2000) During the past decade great changes have been seen in the public and private provision of health care services in Portugal, along with the philosophy, scope and organisation of the National Health Service. Such factors have served to refocus the Foundation's intervention. Therefore, i) the promotion and dissemination of scientific knowledge; ii) promotion of technological progress; iii) valorisation of networking; iv) training of health care professionals based on their close connection with science; and, finally, v) the emphasis on a more humanized and accessible health services have been the basic pillars that currently guide our intervention.

II) In parallel, the Foundation has systematically supported the scientific education of Portuguese and African students through a wide programme of scholarships, namely in the Health field.

The Foundation has similarly undertaken relevant activities in its support for Universities and Polytechnic Institutes and Study Centres, particularly in the following areas:

- The acquisition of bibliography for the updating of the respective libraries;
- Management of bibliographic nuclei so as to allow their proper use;

- The acquisition of audio-visual and computer equipment which permits the promotion and updating of pedagogical methods of teaching and learning,
- The start up of high quality scientific periodicals,
- Support for distance learning and e-learning initiatives.
- III) Also, I would like to emphasize that as a valuable and indispensible support for the **research activities** of the Gulbenkian Institute of Science (IGC) and the scientific community in general, especially in the bio-medical field, the existence of the IGC library should be mentioned. I would like to thank Dr. Margarida Vieira for the unsurpassable work she has been developing in this area.
- IV) As I have mentioned earlier, special mention is due to the activities of the Foundation developed outside Portugal.

Since its founding the Gulbenkian Foundation has supported projects in what are Portuguese-speaking African countries and East Timor particularly in the fields of Health and Education which are areas fundamental to their development. The priorities and methodology for the activities of the Foundation have been adapting themselves to the contexts of these countries and have sought to respond to their development needs and strategies. At present the frame of reference for the Foundation's partnerships with these countries and players is defined by three main axes: the Millennium Development Goals, the Poverty Reduction Strategy Documents and the sustainability of the activities. This latter axis reflects itself,

along with the adoption of good practices in development cooperation, in the priority given to the production of local knowledge and to the qualification of human resources in the health field, not only through awarding postgraduate and specialization scholarships in Portugal, but above all through local training actions and through the empowerment of some of the main mean education institutes. Recognizing the importance of guaranteeing an equitable access to health information in the current digital context, the Foundation has thus supported: the reinforcement of the bibliographic and internet collections of health teaching structures in Portuguese-speaking African countries and in East Timor, the E-Portuguese Initiative and the Mobile Libraries aimed at reaching the remotest areas of these countries.

We are aware that knowledge and information dissemination is an important instrument to retain qualified staff in their countries of origin, potentiate their continuous updating, support the reinforcement of the health systems of these countries and face the major challenges of global health. Indeed a paradigm shift is beginning. More and more we need to export science and technology to developing countries but also to import some of their most succeeded communitarian health projects. We need to learn with the world and foster co-development, as Lord Nigel Crisp states in his recent book "Turning the world upside down – the search for global health in the 21st century".

V) Information Technologies represent one of the most remarkable progresses of contemporary societies. In the health field, IT has

changed management procedures and their supervision, related more closely services and healthcare professionals and drawn the public nearer to the scientific and technical knowledge. Let me just refer that we are currently supporting the research of the implication of IT technologies on health in Portugal, following the Manuel Castells model developed in Cataluña.

In the connected world and knowledge society we are living in, the main challenge we now face is how we can ensure that the right information reaches the right person at the right time. Each five years the health information doubles in volume. We are talking of about 1.2 km of paper information per month. These are massive figures so the role of health libraries is increasingly important as platforms of knowledge management and places of trust, where the information provided is fully reliable.

The second challenge is how we can improve health information channels and maps that can make the best of web 2.0 opportunities, therefore creating different types of access for different ends. The nature of the health information available has also changed quite a lot in the last 20 years. More and more the users and patients are involved and act also as health information providers. The question now is how the health information systems can embrace these new kinds of user-based knowledge.

Within this new complex information platforms and knowledge sharing practices it is crucial to train all its potential users – scientists, researchers, doctors and health professionals, students – to better work with these innovative systems. I think that more and

more we need to introduce health information management as part

of the standard curriculum of all health-related degrees.

Health information is the kind of information that people most look

for on the web. This is completely changing the relations between

patients and health professionals. So, last but not least, we need to

think about how we can open these new oceans of wisdom and

improve citizen's learning on managing health information, fostering

an effective and sustainable knowledge society.

I am sure that this event will help us to find new answers for these

challenges.

Thank you very much

Isabel Mota