

## **Social Learning theory as a Theoretical Framework for Understanding Non-use of Clinical Information Resources among Medical Doctors in Resource Constrain Settings**

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Universities library have invested in medical library and provide clinical and pre-clinical information resources and services to encourage quality teaching, learning and research. Unfortunately, the university library are losing huge sum of money due to the non-use of medical library. Using Vygotsky's theory of social development and his perspective on social interaction and MKO. Therefore, this study explored the reasons for non-use of medical library among medical doctors in Brau Dikko Teaching Hospital, Kaduna State University (BDTH-KASU). A qualitative research methodology was adopted. Data were collected using in-depth interview with eleven (11) medical doctors, whom were selected through purposive sampling, particularly criterion sampling. Data from respondents were analyzed using thematic analysis. Findings revealed that, Lack of Time Compliance, Lack of Internet Connectivity, Inadequate Reading Space, and More Knowledgeable Others, are the major reasons for non-use of medical library. Therefore, this study posit that for the medical doctors to make use of the library there is need for the library management to provide good internet network, this will allow medical doctors to utilize the library so as to exploit the advantage of the medical library data network for their learning, teaching and researches as well as benefit from the rich databases subscribed by the university library to download current and up-to-date clinical information resources. It is also recommended that, the library management of KASU should create or provide conducive reading section for consultant doctors so as to avoid non-use of medical library. There is also need for the library management to extend the time of closing hour from 8:00am to 9:00pm so that the medical doctors can have time to utilize the library after working hours.

**Keywords:** Medical Library, Non-use of Clinical Information Resources, Medical Doctors

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### **INTRODUCTION**

Medical libraries provide physicians and medical students with clinical information resources and services in their duties related to patient care, education, research and

management. Medical libraries of today are operating in the age of electronic and remote access to clinical information. They are involved in the twin purpose of

providing learning resources and evidence based practice resources to help medical doctors and other health professional make good decisions in their clinical practice (Rathnakara 2011). However, university libraries have also invested a huge sum of money in providing clinical and pre-clinical information resources for the medical doctors to make use of it and improve their learning, teaching and research (Shah 2010). Despite the importance of clinical information resources in medical libraries and the huge sum of money invested in providing both the clinical and pre-clinical information resources, the problem of low or non-use still persist (Ial 1999; Geer 2006, Chatterjee 2006; Prout, 2009). To improve the low or non-use of clinical information resources particularly in medical libraries, scholars have explored the problem from different perspectives: lack of internet connectivity (Olanlokun 2005; Omehia 2008) inadequate health information resources (Afebende 2008; Wales 2000), lack of quality services (Torma 2004; Tenopir 2003) lack of awareness and problem of accessibility (Asemi 2007). While these studies have helped in understanding issues of low or non-use of clinical information resources in medical libraries, very few studies (Chatterjee 2006; Aziegbe 2006; Adetoro 2011) approach the problem of low or non-use of clinical information resources in medical libraries and none of these studies approach the problem using theoretical perspective.

Therefore, to have a better understanding of low or non-use of clinical information resources in medical library this study explored the problem using theoretical perspective. This study will adopt two constructs of Vygotsky's theory of social development (social interaction and More Knowledgeable other) to investigate the reasons for non-use of clinical information resources in medical library among medical doctors in Barau Dikko Teaching Hospital of Kaduna State University (BDTH-KASU) and their perception on librarians.

### **Non-use of Clinical Information Resources in Medical Library**

According to Mohammed (2017) non-use is difficult to define without answering the question non-use of what? In the context of the present study, non- use of clinical information resources in medical library is defined as a concept. Non-use of clinical information resources in medical library is having the right to use the medical library and consult clinical information resources and services but not doing so over a specific period/or for a specific sample of collection. Medical library allow users (medical doctors) to have access to different kind of clinical information resources and services in both print and non-print. Similarly, Wyatt (2003) categorized non-use of clinical information resources in medical library

into resisters, rejectors, excluded, and expelled. Rejectors and expelled are those who have use the clinical information resources in medical library before and are now non-users (not using the library) while resisters and excluded are those who never used the clinical information resources in medical library. In the same vein, Sridhar (1994) categorized non-use of clinical information resources in medical library into absolute and marginal. Absolute non-use of clinical information resources in medical library is those who do not use the library or clinical information resources and services at all. A substantial number of users who make marginal use of clinical information resources in library are called marginal users. The result of absolute non-users and marginal users makes the clinical information resources in library underused. This is important in the study of non-use and non-user of clinical information resources in medical library

### **Medical Library Resources and Services in Barau Dikko Teaching Hospital of Kaduna State University**

The library established in 2011 and began its operations in February, 2014 at Barau Dikko Teaching hospital of Kaduna state university (BDTH-KASU) which is formally well-known as Barau Dikko specialist hospital with a seating capacity for twenty four (24) users and nucleus collections of clinical and some of pre-clinical textbooks and digital books. Over the years, university library have invested huge sum of money for medical library to operate hybrid system which combines printed and electronic books, e-journals, online and offline databases and other health information resources. Its main purpose is to serve the entire Barau Dikko teaching hospital community by playing a major role in selecting, acquiring, processing, lending library materials and responding to patron's enquiries. The library provides the following services.

- Reference and Referral Services
- Book Loan Services
- Photocopy, Printing and Scanning Services
- Internet Services
- Online Computer Catalogue (DigiMax – Library Management Software)
- Access to Offline and Online Electronic Journals and Books
- Training and Consultation in the Use of Medical Online Databases Searching
- Other Health related information services is available upon request.

### **STATEMENT OF PROBLEM**

University library have invested in medical library and

provide clinical and pre-clinical information resources and services to encourage quality teaching, learning and research. Unfortunately, the university library are losing huge sum of money due to the non-use of clinical information resources in medical library (Juith 1995; McCreddie, 2013; Hasin 2013; catalina 2014) However, several studies have found out that there is generally low or non-use of clinical information resources in medical libraries by medical doctors (Oduwole et, al. 1999; Pamela 2004; Alper 2006; Daniel 2007; Shah 2010) To improve the low and non-use of clinical information resources in medical libraries, these scholars have explored the problem from different perspectives, lack of ICT equipment and facilities (Pamela 2004; Alper 2006) inadequate clinical information resources and services (Daniel 2007; Shah 2010) lack of awareness and professional librarians (Oduwole et, al 1999). However, these studies are presented in isolation without the use of any theoretical framework. While the studies have helped to better understand issues of low and non-use of clinical information resources in medical library, they did not approach the problem from the perspective of how medical doctors perceived librarians as scaffolding in providing access to clinical information resources using theoretical framework. Therefore, this study set out to understand and find out the reason for the non-use of clinical information resources in medical library among medical doctors in BDTH-KASU and their perceptions on librarians using two constructs (social interaction and MKO) of Vygotsky's theory of social development.

### Research Questions

1. What are the reasons for non-use of Clinical Information Resources in Medical Library in BDTH-KASU?
2. How do Medical Doctors in BDTH-KASU Perceive Librarians in the Provision of Library and Information Services?
3. How does Vygotsky's Theory of Social Development and his Perspective on Social Interaction and MKO explains Perceptions of Medical Doctors in BDTH-KASU on Librarians?

### Vygotsky Theory of social development

Vygotsky development theory explains the relationship between a more experienced individual (professional) with a person that is less knowledgeable. The theory was first developed as a learning theory explaining the relationship between learning and development. The theory emphasizes the roles of social interaction and cultural participation to the understanding of human cognition and learning (Kozulin, Gindin, Ageyev & Miller,

2003). The main basis of the theory is that higher order function develops out of social interaction, and the interaction occurs between a learner and an expert. Hence, to fully understand Vygotsky theory, it is important to note that the theory was built around three basic constructs but for the purpose of this study only two constructs are used. These constructs are discussed below:

#### Social Interaction

It is the manner in which people talk to and interact with one another. It is the process by which we act and react to those around us, includes those acts people perform towards each and the responses they give in return (Blanton, 1998; Kearsley, 2005). According to Vygotsky's theory, much important learning by the individuals occurs through social interaction with a skillful tutor or More Knowledgeable Other (MKO).

#### More Knowledgeable Other (MKO)

According to Vygotsky (1978) the MKO is someone who is perceived to have a better skill or understanding of a task, process or concept which could be a peer, partners, teacher, tutor or another person. The key to MKO is that they must have more knowledge about the topic or task being learned than the learner does. The MKO can raise the learner's competence through the Zone of intervention (Vygotsky, 1984).

Several scholars from different disciplines have used Vygotsky theory of social development as theoretical framework guiding their studies. The next paragraph discussed some of the previous studies that adopted Vygotsky theory of social development.

#### Previous Studies that Adopted Vygotsky Theory of social development

This section discussed some of the previous studies that adopted Vygotsky Theory of social development by different scholars.

Zahide (2013) conducted a study using vygotsky theory to examine the pre-school teacher's experiences and perceptions of tablet use and how the implementation of the tablets benefits the school activities, using qualitative research methodology. Findings from the study showed that the teacher who went on a further education in tablet use was more knowledgeable in tablet use than the teacher who didn't use, the study also showed that the average of using digital tools among the Swedish people is down to a very young age that need to be supported when using digital tools.

Mlay (2010) studied the impacts of using English as the language of instruction on students' academic performance in secondary schools particularly contrasting urban and rural schools in Tania, using two constructs (MKO and social interaction) in Vygotsky theory of social development as guide. The objective of the study is to determine the extent of the language instruction and performance of students in urban and rural secondary school. The study used qualitative methodology. Findings from the study revealed that students performed by more knowledgeable other intervention. Further findings also revealed that, the use of similar coping strategies and lack of interaction in class discussion were observed in both schools.

Another study conducted by Dale (2012) used one construct (zone of proximal development) in Vygotsky theory of social development to studied students perceptions in teaching ESL using peer-to-peer ESL Text Chart. The study asked the following question what are the students' experiences and perceptions of the use peer-to-peer ESL text chart? The study use qualitative methodology. The finding revealed that all students have enjoyment of the text chat experience and they experienced a reduction in anxiety and fear due to less stress. The findings also revealed that ZPD is a powerful paradigm that enables those who participation in it to realize learning they could never accomplish alone.

Furthermore, Sadiq (2013) studied the implementation of an apprenticeship training program in the Addis Ababa technical vocational educational training (TVET) colleges and enterprises, using two constructs (ZPD and MKO) in Vygotsky theory of social development. The study asked the following question: what are the causes of apprenticeship training program's challenges in the Addis Ababa Administrative Region? To what extent did professional qualities of supervisors of apprentices? The study used qualitative research methodology. Finding from the study revealed that the application of ZPD indicate that the difference between what the apprentice can accomplish independently and what he/she can do with the assistance of supervisor (MKO) on a given task.

## RESEARCH METHODOLOGY

This research adopted qualitative research methodology. According to musa (2013) qualitative research methodology refers to the method of inquiry employed to gather an in depth understanding of phenomenon and human behavior especially feelings, perceptions or opinions, and the reason that governs behavior. Qualitative research is appropriate for this study. This is because the study aimed at understanding medical doctor's reasons for non-use of clinical information resources in medical library and their perceptions on librarians as scaffolding in providing access to clinical

information resources. Therefore it's appropriate for this study.

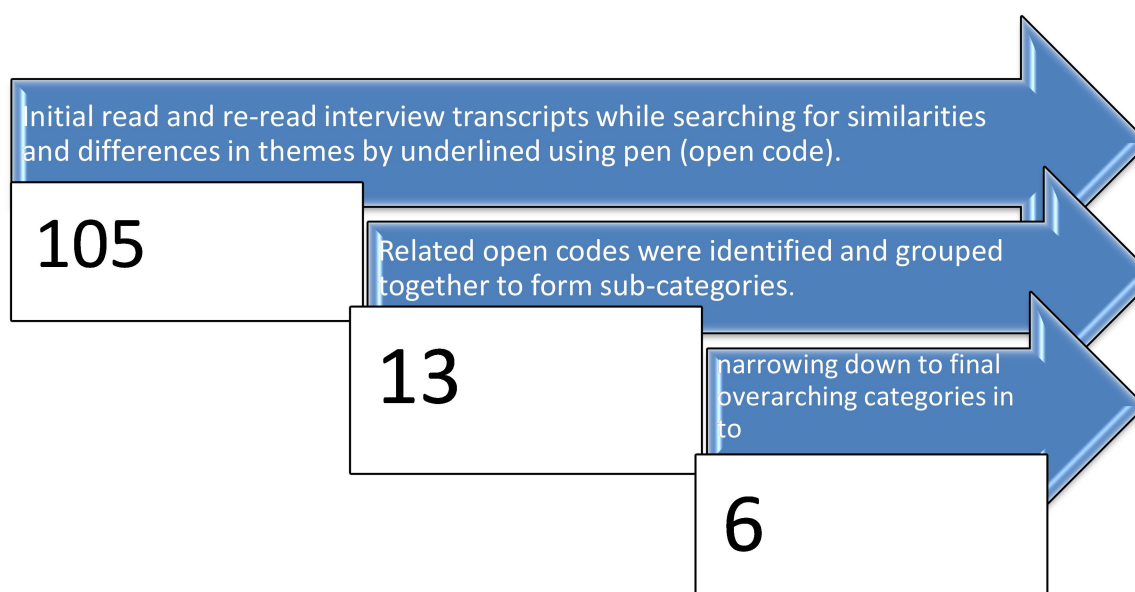
A case study research design was also adopted in this study. A case study method selects a small geographical area or a very limited number of individuals as the subjects of study (Acker 2007) Therefore, a case study method is known to be best suited for studies whose purpose is to select limited number of individuals as a subject of the study. In this case 11 respondents (7 male and 4 female) were select out of 251 medical doctors through purposive sampling technique particularly, criterion sampling. Therefore, respondents for this study must meet the following criteria: (1) must be a medical doctor in BDTH-KASU. (2) Must be consultant and specialist doctor who doesn't consult clinical information resources in medical library for any academic matters. (3) Must be consultant and specialist doctor who doesn't consult librarians when seeking for clinical information resources.

## Data collection

The data from this study was collected using in-depth interview. The interview session began with administration of informed consent form. The consent form solicited participants' permission to voluntarily participate in the interview and it sought authorization to record the conversations. More so, respondents were assured of privacy and confidentiality concerning their responses. The interview was conducted at the medical doctors' offices in their respective departments. Questions were asked on the reasons for non-use of clinical information resources in medical library and their perceptions on librarians. The total duration of all the initial interviews amounted to 12 hours of conversations. During the interviews the researchers used probing technique to solicit for in-depth information and/or to build on their responses. This provided the researchers with rich in-depth information. By the time 11 participants were interviewed, the data was saturated. Marshal (2006) explains data saturation as the point when there are no new categories, themes, or explanations emerging. The data were transcribed for analysis.

## Data Analysis

Data in form of narratives about the non-use of clinical information resources in medical library among medical doctors and their perceptions on librarians were collected from 11 respondents. The collected data was transcribed verbatim. The transcribed narratives were read and examined severally using inductive approach described by Thomas (2003) as a process that "begins with close readings of text and consideration of the meanings that



**Figure 1.**

are inherent in the text". Using this inductive analysis coding process the narratives were read thoroughly to identify variance and relationships. The narratives were coded into 105 open codes (meaning derived directly) recorded in the spreadsheet. The 105 open codes were condensed into 13 lower categories and identified as classification subcategories. The classification subcategories were then further collapsed into 6 emergent categories. The next paragraph illustrates the data analysis steps as adopted in this study from Thomas (2003) p11. (See Figure 1)

The next section described the findings of the study. The five main categories and quotations from the participants are written to some extent in everyday vernacular and were arranged properly based on questions asked in the process of data collection. They are presented in this style to allow the reader an opportunity to draw on the reflection of thought given to the participants' responses.

## FINDINGS

Reports indicated based on the findings regarding the reasons for non-use of clinical information resources in medical library and their perceptions on librarians were grouped into six major categories as described below.

**Lack of Time Compliance:** This category explains lack of time as one of the reason expressed by medical doctors for non-use of clinical information resources in medical library as explain by the following respondents:

*"I don't have time to visit the library am always occupied and busy attending patients from morning to evening and by that time I was tired and wanted to rest" other respondents affirmed that: "I only have time around 4:30pm and by then the library is locked" this respondent expressed that: "I only have time during the weekend and the library is always closed during the weekend"*

**Lack of Internet Connectivity:** This category provides some explanations quotes from the participants' responses on the issue of internet connection or poor network as expressed by these respondents: *"sometimes when am thinking of going to the library and i remembered that there is no internet i will then change my mine to remain at office and read"* similarly, other respondents further confirmed this fact by stating that: *"Because there is no internet to browse"* in the same vein this respondent stated that: *"there is no network connection in the library"*

**Lack of up-to-date Clinical e-resources:** this category also explains quotes from the participants' responses on the issue of non-existing or non-current of clinical offline and online information resources as other reason for non-use of clinical information resources in medical library, as explain by the following respondents: *"it's because there is no current offline and online clinical books and journals"* similarly these respondents expressed that: *"most of the e-resources are not updated, you know we are dealing with human being so we need current clinical video and other non-print information resources"*

**Inadequate Reading Space:** This category provides some explanations quotes from the participants' responses on the issue of consultant reading section like postgraduate section in the main library, as describe by these respondents: *"it's because there is no enough seating capacity and section for consultants like PG section in the main library, because seating with students is not computable and their always making noise"* apart from inadequate reading space another respondent also expressed that: *"I observed that hot is too much in the library especially when there is no light"*

**Librarians are user assistant:** This category provides some explanations on the perceptions of medical doctors on librarians. They revealed that librarians assist users especially when the want borrow out a book and also informed (awareness) them about the online subscribe databases as explained by the following respondents: *"I believed that librarians help users by lend out a books for specific period of time"* other respondents expressed that: *"I only contact librarian when i need a particular book to read and nothing more"* other respondents revealed that: *"I believed librarians assist users by making awareness about the online subscribe databases"* this respondent confirmed how librarian assist him by stating that: *"I believed librarian assist users by notifying them about the subscribed online scholarly databases"*

**More Knowledgeable Others (MKO's):** This category contains narratives revealing who medical doctors contact when they need any clinical information resources for their learning, teaching and research as explains by these respondents: *"whenever i need clinical materials I use to contact my colleagues"* Furthermore, another respondent expressed that: *"if i need clinical materials for research use to ask my HOD"* in addition this respondent stated that: *" actually, i use to ask my colleagues first about the kind of research to conduct, if they will tell me the king of materials to look for, i can then contact librarian"* this respondent indicated that: *"yes, I use to conduct librarians but my colleagues first before librarians"* another respondent complained about the shortage staff: *"I simply contact my colleagues due to inadequate staff in the library, the librarians are not available some time, if you call them they said they have a meeting to attend and they closed the library"*

## DISCUSSION OF FINDINGS

This section discussed the research findings under the six major categories emerged including pertinent quotes from the respondents. The findings were arranged in line with the research question asked in the study, in a convincing manner in order to archive the stated objectives of the study.

### **Reasons for non-use of clinical information resources in medical library among medical doctors in BDTH-KASU**

Findings from this study indicated that, medical doctors are aware and interested to use the clinical information resources in medical library of BDTH-KASU but due to lack of time which appears from this study that it affects the medical doctors negatively to use the clinical information resources in medical library. Finding from this study also indicated that medicals doctors were only have time in the evening and night but the library is already closed within that specific period of time, adding that the library also remain closed during weekend. Another findings from this study also indicated that, lack of internet also contributed to non-use of clinical information resources in medical library, even though medical doctors are interested and willing to clinical information resources in the library but if the remembered or realized that there is no network to browse, they will change their mind and refuse to visit the library.

Apart from lack of internet connection, medical doctors also reported the issue of non-existing or non-current of clinical offline and online information resources as among the reasons for not using clinical information resources in medical library. This is because medical doctors need current and up-to-date clinical information resources to read and make their self-prepared for learning, teaching, research and manage patients care. Further findings from this study also indicated that, insufficient reading section for consultants medical doctors like postgraduate section in the main library also is cited as one of the reasons for non-use of clinical information resources in the library. This is because the library has no reading section and medical doctors specifically consultant were not comfortable seating with the students close to them, revealing that some time students use to make noise or discussing in the library, complaining that this interrupt their reading.

### **Perceptions of medical doctors in BDTH-KASU on librarian in the provision of library and information services**

Findings from this study indicated that, medical doctors believe and perceived librarian as helper or assistant, by assisted them especially when they want borrow out a book and this belief by medical doctors on librarians as helper or assistant is partially linkeds to another perception that, librarians are databases manager or provider. This is because librarian uses to provide them and update them about the new subscribed online databases and follow them to their offices to show them how to search clinical information resources. Further findings of the study revealed that, medical doctors seek

help from librarian simply because they believe that librarian are person whom were trusted in assisting users when they want to borrow out a particular book read.

### **Explanation of the two constructs of Vygotsky social development theory about the perceptions of medical doctors in BDTH-KASU on librarian**

**Social Interaction:** It is evident, findings from this study indicated that librarians do have personal conversation with medical doctors as uncovered from the study expressing hospitality from librarian whenever they needed help. This indicated that, the librarians render assistance to medical doctors by means of making awareness about the online subscribed databases and followed them to their offices and asked them how far they are going through on the databases and also teach them on how search information resources on the databases. Furthermore, findings from this study revealed that, librarians assist users when they need a particular book to read and also help them to borrow books for a specific period of time.

**More Knowledgeable other:** Another findings from this study indicated that, medical doctors believe librarians can help them but after contacting their colleagues. They rely mostly on their colleagues (medical doctors) for help than seeking help from the librarians. This is because they think that their colleagues are in the right position to assist them. Further findings from this study shows that, this believe is far from the medical doctors' negative perception that librarian help users only when they want to borrow a particular book to read or informing them about the online subscribed databases. Further findings also revealed that medical doctors rely more on their fellow colleagues for help since the librarians are not available sometime and the library is closed when the librarians are not available, while their fellow colleagues are always available and easily accessible.

### **CONCLUSION AND RECOMMENDATIONS**

From the findings of this study conducted using Vygotsky social development theory as theoretical mirror to investigate the reasons non-use of clinical information resources in medical library and explains the medical doctor's perceptions on librarians. A number of conclusion and recommendations can be offered for practical intervention as well as for future researches. It is observed from the study that, lack of internet connectivity and lack of up-to-date clinical information resources are among the reason for non-use of clinical information resources in medical library. It is recommended that, the library management should provide good internet

network, this will allow medical doctors to utilize the clinical information resources in library so as to exploit the advantage of the medical library data network for their teaching, learning and research as well as benefit from the rich databases subscribed by the university library to download current and up-to-date clinical information resources. Inadequate reading space for consultant doctors, are also one of the reason for non-use of clinical information resources in medical library. It is recommended that, the library management of KASU should create or provide conducive reading section for consultant doctors so as to avoid non-use of clinical information resources in medical library. It is also discovered that lack of time is among the reason for non-use of clinical information resources in medical library, it is recommended that there is need for the library management to increase or extend the time of closing the library from 8:00am to 10:00pm so that the medical doctors can have time to utilize the clinical information resources in the library after working hours.

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