

**Network of African Medical Librarians Workshop
held from February 27 – March 2, 2012 held at
Kenyatta University, Nairobi, Kenya**

**Theme: Outreach and Sustainability: Building Pan-African
Capacity in Finding, Organizing and Using Health
Information**

Workshop Summary Report

May 2012

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1.0 Summary of day 1 (27 February 2012)

1.1 Opening and Welcome Remarks

On behalf of Kenyatta University Vice Chancellor, Professor Olive Mugenda, Professor Frederick Gravenir welcomed all the participants to the Network of African Medical Librarians (NAML) meeting and hoped that the participants' stay would be an enjoyable one. Julia Royall and Becky Lyon who were both facilitators at the workshop also welcomed the participants.

A vote of thanks was given by Grace Ajuwon to Kenyatta University for hosting the workshop. She also thanked the United States National Library of Medicine for funding the workshop and therefore affording everyone any opportunity to participate. Thereafter she extended her thanks to Julia Royall and Becky Lyon for supporting the network.

1.2 Moment of Silence for Sara Mbaga

A moment of silence was held for Sara Mbaga; a Librarian from Albert Cook Library, University of Makerere Medical School in Uganda who died in 2011. Sara was an active member of the network and had participated effectively in all the networks activities.

1.3 Welcoming New Members

A special welcome was extended to new members of the network. The welcome was extended to Alison Kinengyere from Albert Cook Medical Library, University of Makerere Medical School, Uganda who had replaced the late Sara Mbaga and Masimba Muziringa from the University of Zimbabwe Medical School. The network members also welcomed Salima M'Seffar from Morocco in absentia as she could not be present in the meeting.

1.4 Introductions

As a way of enlivening introductions from the workshop participants; and learning more about one another, each network member was asked to bring something from his/her country that had meaning for her/him. These products/items were then used by the members to introduce themselves to the group.

1.5 Setting up of Goals for NAML

The members of the network broke into small groups to formulate the vision, mission and goals of the network. This activity was led by Grace Ajuwon and Julia Royall.

1.5.1 Vision

The vision of the Network of African Medical Librarians is to strengthen health sciences education, research and outreach for better health outcomes in Africa.

Goal:

- **Building African capacity in finding, organizing and using health information for better health outcomes.**

Themes:

- Customise manual for specific audiences (languages),
- Training (all institutions in country),

- Outreach (policy makers, institutions, etc),
- Repositories,
- Information needs assessment.

1.5.2 Mission

The Mission of Network of African Medical Librarians is to expand the frontiers of knowledge through the training of, and outreach to African librarians, the academic community and health care professionals, policy makers and the public in finding, organizing and using health information.

1.5.3 Objectives

- a) To increase access to local health content,
- b) To improve the skills of librarians, health care professionals and the academic community in finding, organizing and using health information,
- c) To increase access to current information to frontline health workers in hard to reach areas,
- d) To increase the use of research information for evidence based policy making in Africa.

1.5.4 Activities

Objective 1: *To increase access to African health research output.*

- Create ability to search across repositories in seven countries in Africa,
- Create the repositories that are Open Archives Initiative (OAI) compliant where they don't exist,
- Training,
- Create Union Catalogue of local journals,
- Know where journals are published in Africa and in what format,
- Have local journals content online (work with the of African Journals Partnership Project - AJPP).

Objective 2: *To improve the skills of librarians, health care professionals and the academic community in finding, organizing and using health information.*

- Identify target audiences for training (librarians, students, health care professionals, faculty and researchers),
- Identify key persons to engage audiences,
- Conduct a needs assessment for specific audiences,
- Customise the manual to meet the needs of target audiences,
- Develop pre and post evaluation tools for training assessment,
- Implement training programmes,
- Follow up with trainees within one year.

Objective 3: *To increase access to current information to frontline health workers for improved health outcomes*

- To conduct a health information audit,
- To communicate the results of the health information audit to policy makers, government,
- To train health workers in finding, organizing and using health information - in collaboration with Ministries of Health (MoH) libraries,
- To repackage health information using interactive tutorials, videos, radio, social media and mobile phones,
- To collaborate with the Medical Education Partnership Initiative (MEPI), African Journals Partnership Project (AJPP), the Association for Health Information and Libraries in Africa (AHILA) country chapters, community information centers

and local Non Government Organization (NGOs) in increasing access to health information,

- To build local content of health information (local language, beliefs and cultural aspects),
- To evaluate the impact of improved access to health information towards achieving better health outcomes.

Objective 4: *To increase the use of research information for evidence based policy making in Africa*

- To create awareness of the value of library and information to policy makers,
- To train librarians and policy makers in finding, organizing and using evidence based health information,
- To conduct training in developing and writing policy briefs from research output,
- To support the systematic review process through training in locating relevant health research information.

1.6 Future funds and sustainability

1.6.1 Soft funds - Proposal discussion and preparation

The discussion on proposal preparation was led by Becky Lyon and Christine Wamunyima Kanyengo. Firstly, the discussions were held with the whole group; this was then followed by work in small groups. Volunteers were chosen to lead the work on each component of the proposal and the lead volunteers were then made responsible for each section of proposal.

This session discussed the various steps needed in preparing a proposal. The participants also discussed ideas and agreed on a broad framework on what should go into the proposal.

In developing the proposal the following were identified as critical:

- What is being proposed? (Executive Summary),
- Audience for proposal (Population/Geographic Target),
- Why this proposal is unique and needed – big picture and tight focus (Identification of Need),
- Background on NAML – including mission, history, course, secretariat,
- Project description (Goals and Objectives; Methodology and Approach),
- Activity schedule (Methodology and Approach),
- Institutional resources and support,
- Sustainability,
- What will the activity cost? Budget.

Objective: Completion of strategic thinking on a proposal and assignment of proposal parts.

2.0 Summary of day 2 (28 February 2012)

2.1 Medical Education Partnership Initiative (MEPI)

The session on MEPI was chaired by Nancy Kamau.

The presentation on medical education partnership initiative (MEPI) was done by Dr James Kiarie from the University of Nairobi on 28th February 2012. Dr Kiarie is the Principal Investigator (PI) for the Kenya MEPI project and the Chair of the PI's for MEPI which is spread across 12 African countries as follows:

- Botswana; Ethiopia; Nigeria; Ghana; Kenya; South Africa; Uganda; Tanzania; Malawi; Mozambique; Zambia and Zimbabwe.

In Kenya, the MEPI project is hosted by the University of Nairobi, College of Health Sciences. However, the project has brought in other partners such as Kenyatta and Maseno Universities.

The major mission of the Kenya MEPI project is to “Improve Health of Kenyans through Research and Training”.

2.3 The project has four main aims:

- a) Quality of Training,
- b) Decentralized training,
- c) Research for retention,
- d) Administrative and oversight capacity building.

2.4 All the four aims have lead persons and a set of activities.

2.4.1 Aim 1:

The objective of Aim 1 is to improve the quality of medical education.

One of the identified activities of this Aim is to develop a good library system. There has been development in this area as 50 computers for the University of Nairobi medical library have been purchased and a room renovated.

A baseline survey has been done to assist in planning for the library services. The survey established that most of the medical students are computer literate at 93% and most of them use textbooks more than journals. However, postgraduate students' use of e-journals was high. Textbooks were also important for postgraduate students.

The meeting was informed that there will be a MEPI symposium in Addis Ababa in August 2012.

The meeting commended Dr. Kiarie for a good cross cutting project that is set to improve the health of Kenyans.

After discussions, the meeting agreed the following:

- a) To lobby for the inclusion of the network librarians as part of the delegates to attend the August Symposium,

- b) That the August PI Council agenda to include the formation of a library technical committee,
- c) To come up with a presentation whose title should reflect the mission of MEPI- improvement of medical education, research and training,
- d) The medical librarian's presentation at the MEPI symposium in Ethiopia should reflect four main areas:
 - Information about the Network,
 - Information about the manual,
 - The impact/evidence the manual has had so far,
 - The way forward/future.

It was also agreed to:

- a) To come up with a draft presentation at the meeting,
- b) The complete version of the presentation to be ready by May 2012 to give room for improvement,
- c) Nancy Kamau and Christine Wamunyima Kanyengo to coordinate the preparation of the presentation with technical back up from Abda Anne,
- d) Julia Royall and Becky Lyon to assist in editing the final presentation,
- e) Presentation to be done by at least two people.

2.5 Visit by the Workshop participants to the Kenyatta University Library

The team visited the library which is called post-modern university library. The team was cordially received by the University Librarian and his team. The workshop participants were then taken on a tour of all the major library units. The library is new as it was opened in October 2011. It has four floors and can sit a total of 6,000 students. The library has many facilities such as the Online Public Access Catalogues (OPACs) and computer rooms, reading carrels as well as instruction rooms. The team congratulated the University Librarian on having such a fine library building which is well maintained.

3.0 Summary of day 3 (29 February 2012)

3.1 Outreach and strengthening of AHILA and AHILA Chapters

General statement: It is important that we act as mobilizers (?) in the respective network member countries towards the implementation, development and strengthening of AHILA.

3.2 How is AHILA in each of the Network countries?

3.2.1 Kenya: Started an AHILA chapter called Ken-AHILA out of a few health sciences libraries, and very soon realized the importance of an Association that would congregate all Librarians. Ken-Ahila is registered under the Laws of Kenya. It successfully organized AHILA 10 as well as training workshops for its members and for Kenyan senior nurses. The current AHILA president is a member of Ken-AHILA. It has been very active and can be presented as the most developed and active of all the AHILA Chapters in East Africa.

3.2.2 Mali: The country doesn't have a formal AHILA Chapter. There are perhaps 3 Medical Libraries in the country. But they work with the West African Health Organization (WAHO) and some of the Librarians are active members of AHILA as

well. They have organized one of the first AHILA Congresses in the country that was held in Ouagadougou, Bamako in 2010.

3.2.3 Mozambique: Although Mozambique has organized AHILA 11 and some of the Mozambican Librarians have been very active and been members of the Executive Council of the organization, the fact remains that there is not a registered Mozambique AHILA Chapter.

3.2.4 Nigeria: The health librarians have an Association of Medical Librarians. Although the name isn't the same, the goals are the same and they are members of AHILA.

3.2.5 Uganda: Has the Uganda Association for Health Information and Libraries in Africa (UGAHILA) since September 2011. It's registered and has a bank account. The country chapter hosted and organized the visit of Nasra Gathoni, the AHILA President that helped to improve the mood towards the acceptance of the Association. They started training colleagues in October 2011. In the beginning of February 2012, they have trained 200 Nurses. Although Uganda has hosted the 1994 AHILA Conference, work as an Association did not develop until now. There are 29 health Libraries registered with the country chapter.

3.2.6 Zambia: There is an AHILA Chapter, but it's not working. It worked very closely with the Network of HIV/AIDS Resources Centers. At that time, it organized training.

3.2.7 Zimbabwe: Does not have a functional AHILA country chapter. There is only one Medical School and one Nursing School that have Libraries; so membership to the organization is limited.

3.4 What are the common interests between AHILA and NAML?

3.4.1 Networking: It is very important, as it will be a platform for defending the network Manual and the services offered by the network members.

3.4.2 Presence: The experience of some of the members has been pivotal to AHILA. Some of the members have been board members of the AHILA Executive and/or Secretariat. There is a need for one of the members to be part of AHILA Executive.

3.4.3 Training: One of the main roles of the network members at AHILA can be that of training. The members should promote the network members as a skilled group of people who are available to train colleagues and other health professionals through collaboration within certain parameters and agreed guidelines.

During the next AHILA Congress in Cape Verde it was agreed that members should do training, not only to fellow librarians but also use the opportunity to train other health professionals.

3.4.5 What to teach/train in: E-books, PubMed and Medline+; MyNCBI, Reference Tools (Zotero, Mendeley, Endnote), MESH. As a start, ask from the AHILA Local Organizing Committee for a list of health professionals in Cape Verde

and write them asking what would be the subjects they would be more interested in being trained on?

During AHILA 13 training should be in the three languages; English, French and Portuguese. Two different librarians could be leaders for each of the four (?) workshops while the others could help out during practical work at each workshop.

4.0 Recap notes for day 4 (1 March 2012)

4.1 Collaboration with Medical Journal Editors

Individuals started by giving a brief analysis of the medical journals published in each of the seven countries which are part of this Network.

- a) **Nigeria-** is publishing the Nigerian Journal of Health Sciences
- b) **Zambia-** is publishing the Medical Journal of Zambia (MJZ) which is available online and the medical librarian is also an associate editor of the journal. They have also organized workshops on author writing so as to capacitate publishing in Zambia.
- c) **Mozambique** - there is no functional medical journal in the country since the editor passed away.
- d) **Kenya** - the librarian was involved with the publication of the African Journal of Health Sciences.
- e) **Zimbabwe** - Zimbabwe has not had a running medical journal for the past four years but has been running Author-Aid workshops to capacitate authors and researchers in publishing.
- f) **Uganda-** the country is producing the Uganda Health Information Digest and the African Health Sciences Journal.

After this introduction by the members, Professor James Tumwine gave his experiences and interests in publishing and writing. He gave his past experiences and the challenges he was once constantly faced with in having his article published in a European journal whilst in an African country. This nasty experience inspired him to start his own journal in 2001 which has now grown to be a phenomenal project to this day.

4.2 Institutional Repositories

Members discussed how they have implemented and created digital repositories/libraries in their countries using free software such as DSpace. However members pointed out how difficult it has been for them to get copyright clearance on African published material.

Members also pointed out that there was need to educate authors on copyright issues so as to avoid signing away all their rights when they publish with international journals.

It was also proposed that open access publishing should be considered as one of the ways that could potentially ensure wider access to African research by Africans.

4.3 Outreach to Medical Journal Editors and strengthening Information flow to rural areas

Librarians shared experiences on how their countries have made efforts to reach out to rural areas in their countries. Countries such as Kenya, Zimbabwe and Uganda shared their experiences on how they have adopted and adapted to technological innovations

such as mobile technology, emails and FM radios in reaching out to their under-served communities. The session concluded by pointing out that it was imperative to establish and ascertain what the health information needs of the communities were so as to meet their exact information needs.

4.4 Draft proposal

Members broke out into 2 groups to discuss critical areas that should be included in the proposal.

4.4.1 Report back from both groups

- a) Need for a needs assessment was the best starting point to find out the needs of the audiences that the network would target. This would enable the team have the right content and the right methods of presentations.
- b) Audience – all agreed that the team also focus on rural areas - the categories of health workers who are usually left out such as enrolled nurses, Community Health Workers (CHWs) and the lowest health workers in the system – reach out to the community.
- c) Use of mobile technology – especially social media – depending on whether the audiences had phones and what kinds of phones they had.
- d) Questions for that need to be answered are: what type of people they serve, their profiles etc)
- e) Agreed that there was need for translation to appropriate languages
- f) Involvement of the Ministries of Health (MoH)

4.4.2 The Grant Proposal

In trying to write the proposal, the team members asked the following questions.

- a) What are we proposing to do?
- b) What resources do we have?

4.4.2 Looking at the objectives of Day2

The members resolved that it was ideal to have one proposal statement which would run under the title: “*Outreach and sustainability: Building African capacity in finding, organizing and using health Information for better health outcomes*”

4.4.2.1 The key and core objectives of this project proposal would be:

- a) To increase access to Africa health research output.
- b) To improve the skills of healthcare workers in finding, organizing and using health information for better health outcomes.
- c) To increase access to current information to frontline health workers for improved health outcomes
- d) To increase the use of research information for evidence based policy making in Africa.

4.4.2.2 Activities

- a) To create repositories where they don't exist (OAI compliant software).
- b) To create ability to search across repositories
- c) Training
- d) To create a database of health sciences journals published in Africa (to be refined).
- e) Create a union catalogue

5.0 Recap notes for day 5 (2nd of March 2012)

5.1 Outreach to Health Professionals who speak French and Portuguese – Details & Budget

5.2 Presentation of Draft Proposal

A draft proposal titled “Building Capacity in Finding, Organizing and Using Health Information for Better Health Outcomes” was presented during the last day of the workshop.

5.2.1 Overall Objective

The overall objective is to build African capacity in finding, organizing and using health information for better outcomes.

5.2.2 Objectives

The Specific objectives of the proposal are:

- To increase access to and visibility of African health research output
- To improve the skills of health care professionals, the academic community, policy makers and the public in finding, organizing and using medical information.
- To increase access to current information to frontline health workers in hard to reach areas.
- To increase the use of research information for evidence based policy making.

After the articulation of the overall objective and specific objectives; activities were then formulated for each specific objective.

5.3 Workshop Wrap-Up

5.3.1 Clarification of follow up responsibilities regarding the proposal,

- **Draft Overall Proposal**

The responsibility was given to Christine Wamunyima Kanyengo and Nancy Kamau

- **Institutional Repository**

The responsibility was given to Alison Kinengyere

MEPI, AHILA, journal editors

6.0 Workshop Programme



Network of African Medical Librarians Workshop
February 27 – March 2, 2012
Kenyatta University

Theme: Outreach and Sustainability: Building Pan-African Capacity in Finding, Organizing and Using Health Information

PROGRAM

DAY 0: 24th, 25th, 26th & 27th February, 2012

TIME	ACTIVITY	FACILITATOR
5.00 a. m - 9.00 p.m	Arrival & Airport pick ups	Frederick Gravenir

DAY 1: 27th February, 2012

TIME	ACTIVITY	FACILITATOR
8.30 a.m. – 8.40 a.m.	Welcome Remarks	Prof. Olive Mugenda Vice-Chancellor Kenyatta University
8.40 a.m. – 9.10 a.m	Opening & Welcome Remarks Moment of Silence for Sara Mbaga Welcoming New Members Introductions	Julia Royall
9.10 a.m. – 9.45 a.m	Setting up of Goals for NAML (Work in small groups)	Grace Ajuwon
9.45 am – 10.00 am	Setting up of Goals for NAML (Priority setting by entire group)	Grace Ajuwon
10.00 a. m – 10.30 a.m	Tea Break	
10.30 a.m – 11.10 a.m	Future Funds & Sustainability: Soft Funds – Proposal Discussion and Preparation.	

	Steps in Preparing a Proposal	Becky Lyon
11.10 am – 11.40 am	Discussion of Ideas & Decision on what to Propose	Christine Kanyengo
11.40 am – 1.00 pm	Developing the Proposal: <ul style="list-style-type: none"> - What is being Proposed (Executive Summary) - Audience for Proposal (Population/Geographic Target) 	Becky Lyon, Christine Kanyengo
1.00 p. m – 2.00 p. m	Lunch	
2.00 p. m – 5.00 p. m	Developing the Proposal: <ul style="list-style-type: none"> - Why Proposal is Unique & Needed- big picture & tight focus (Identification of Need) - Background on NAML – Mission, History, Course, Secretariat - Project Description (Goals & Objectives; Methodology & Approach) - Activity Schedule (Methodology & Approach) - Institutional Resources & Support - Sustainability - What will the Project Cost? (Budget) 	Christine Kanyengo, Becky Lyon
5.00 p. m	Housekeeping Matters	Frederick Gravenir
6.00 p. m – 7.00 p. m	Dinner	

DAY 2: 28th February, 2012

TIME	ACTIVITY	FACILITATOR
8.30 am – 8.45 a.m	Recap	Cristina Horta
8.45 a.m – 10.30 a.m	Medical Education Partnership Initiative (MEPI) MEPI Symposium, Aug 2012	James Kiarie, Nancy Kamau
10.30 a.m – 11.00 a.m	Tea Break	
11.00 a.m – noon	MEPI continued	James Kiarie, Nancy

		Kamau
Noon – 1:00 p.m.	Putting Together Sustainability & Outreach <ul style="list-style-type: none"> - Feasibility of Medical Librarian Travelling Workshops - Role of Secretariat - Marketing Strategies 	Nancy Kamau Frederick Gravenir Julia Royall
1.00 p.m. – 2.00 p.m	Lunch	
2.00 p.m – 5.00 p.m	Continuation of Proposal Writing	Group
5.00 p.m	Housekeeping Matters	Frederick Gravenir
6.00 p.m – 7.00 p.m	Dinner	

DAY 3: 29th March, 2012

TIME	ACTIVITY	FACILITATOR
8.30 a. m - 8.45 a. m	Recap	Nancy Kamau
8.45 a.m – 10. 45 a.m	Outreach to other Librarians & Strengthening of AHILA & AHILA country chapters Workshops at AHILA 13 Network as AHILA “resource group”	Grace Ajuwon Nasra Gathoni
10.45 a.m – 11.15 a.m	Tea Break	
11.15 a. m – 1.00 p.m	Strengthening of AHILA contd.	Grace Ajuwon Nasra Gathoni
1.00 p.m. – 2.00 p.m	Lunch	
2.00 p.m – 6.30 p.m	Trip to Nairobi National Park	Isaac Mwangi
7.00 p. m – 8.00 p.m	Dinner	

DAY 4: 1st March, 2012

TIME	ACTIVITY	FACILITATOR
8.30 a. m - 8.45 a. m	Recap	Cristina Horta
8.45 a.m – 10. 45 a.m	Outreach to Medical Journal Editors & Strengthening of	

	Information Flow to Rural Areas	
	Collaboration with Medical Journal Editors	James Tumwine, Alison Kinengyere
10.45 a.m – 11.15 a.m	Tea Break	
11.15 a. m – noon	Continued Info to Rural Areas	Abda Anne
Noon – 1:00 p.m.	Prelude to completion of first draft of proposal	Grace Ajuwon, Becky Lyon
1.00 p.m. – 2.00 p.m	Lunch	
2.00 p.m – 3.15p.m	Complete 1 st Draft of Proposal	Small groups
3.15 p.m – 3.45 p.m	Tea Break	
3.45 p.m – 5.00 p.m	Complete 1 st Draft of Proposal	Small groups
5.00 p.m	Housekeeping Matters	Frederick Gravenir
6.00 p. m – 7.00 p. m	Dinner	

DAY 5: 2nd March, 2012

TIME	ACTIVITY	FACILITATOR
8.30 a. m - 8.45 a. m	Recap	Alison Kinengere
8.45 a.m – 10. 45 a.m	Outreach to Health Professionals who speak French and Portuguese – Details & Budget	Abda Anne Cristina Horta
10.45 a.m – 11.15 a.m	Tea Break	
11.15 a. m – 1.00 p.m	Presentation of Draft Proposal	Christine Kanyengo
1.00 p.m. – 2.00 p.m	Lunch	
2.00 p.m – 3.15p.m	Presentation of Draft Proposal	Christine Kanyengo
3.15 p.m – 3.45 p.m	Tea Break	
3.45 p.m – 5.00 p.m	Workshop Wrap-Up – Clarification of follow up responsibilities re proposal, MEPI, AHILA, journal editors	Abda Anne, Cristina Horta
5.00 p.m	Housekeeping Matters	Frederick Gravenir
6.00 p. m – 7.00 p. m	Dinner	

DAYS 6, 7 & 8: 3rd – 5th March, 2011

TIME	ACTIVITY	FACILITATOR
4.30 a. m - 3.00 p. m	Departures	Frederick Gravenir

2012-02

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<https://library.adhl.africa/handle/123456789/12456>

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