

Is the current open access landscape helping or hindering the international development agenda?

Reflections from a consortium of developing country NGOs Dr Nilam Ashra-McGrath | @NilamAMcGrath | @COMDISResearch





NE	WS

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civil society organisations and charities



consultants and external agencies



independent researchers and think tanks



government staff



public

Civil society organisations and charities

- use academic articles to develop research proposals, business concept notes and research papers
- use online/Google search to access articles using phrases or keywords depending on the subject which I am looking for.
- PubMed usually gives you abstracts articles and if you like the abstract you can click on the full article and access it. PubMed also provides you related articles beside the opened abstract.

"The major difficulty which I face is not getting full articles. When I Google the subject which I want I may get [an] interesting abstract. Then when I try to access the whole article, it may require online registration or payment. So in these cases, I don't prefer [to] make any payment or the registration may be time taking."

• No payment to access articles.

"I had come across with articles which require payments but I had no the fund to cover by myself or I am not sure this would be covered by my organization."

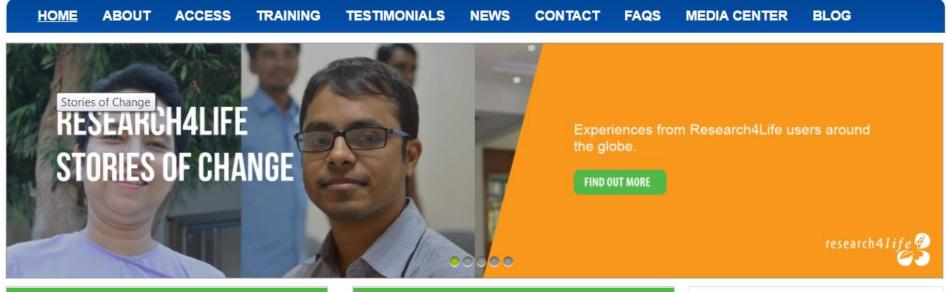
• HINARI password when studying "but I didn't use it so much."







Access to Research in the Developing World



NEWS



is an online co the visibility, access f agricultural data and Elsevier Adds ClinicalKey to Research4Life Access Program for Developing Countries 25th May 2017

Call for Applications ! Online Course on Access to Scientific Information Resources in Agriculture (ASIRA) for Low-Income Countries

BLOG



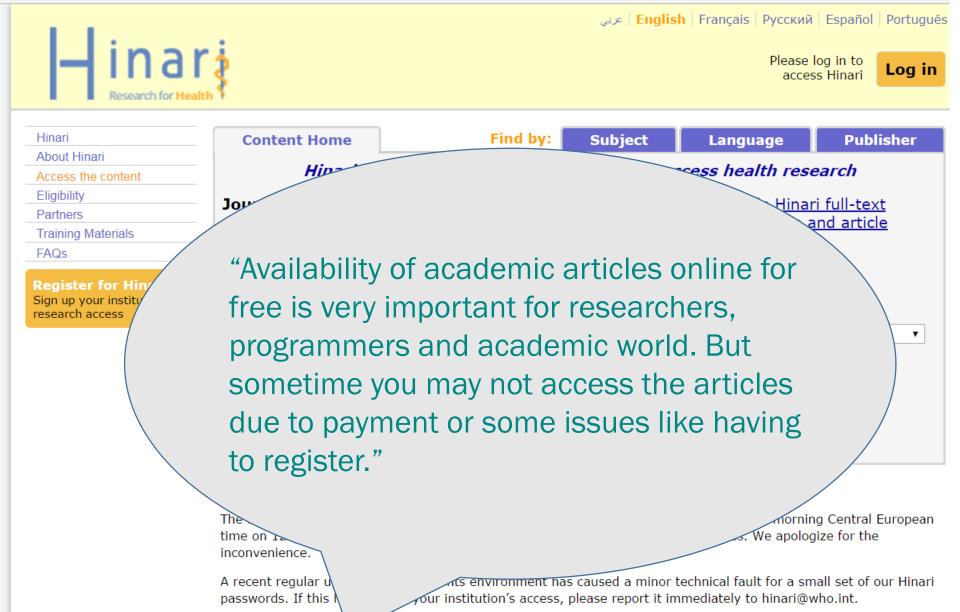


Research4Life/INASP Advocacy Competition Winners Announced





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We are currently exponencing technical difficulties with the resources from the following publishers: AAP Red Book, Allen Press, Australasian Medical Publishing Company, CAB Global Health Archive, deGruyter, Lancet, Medicines Complete-BNF, Nature Publishing Group.

PubMed has recently moved to secure web communications and this has disrupted the function connecting Hinari

Journalists, consultants and other external agencies

- Use them for investigative reports
- Media outlet doesn't provide funding for subscription or access to research findings.
- Can use some of the journals on R4L website.
- Primarily websites of universities to look for academic articles.

"In my experience, some universities outside and inside the Philippines and research organizations usually require subscription and registration to access their academic papers. Those uploaded for the use of the public are usually outdated.

Whenever I encounter this difficulty I [ask] experts/professors instead of referring to academic articles. This practice has a negative implication because sometimes those experts that we interview haven't conducted any study/research about the topic I am working on

Some universities and think tanks in the Philippines conduct public forum about their academic paper or published work but because of the busy schedule of journalists we find it difficult to attend such events...

I have experienced going to a library, with a letter of recommendation to use the library facilities from a student or a professor of that university, just to access academic journals.

This method is time consuming and taxing for journalists."



Independent researchers, think tanks

- Uni email = golden pass (ac.uk .edu .edu.au etc)
- Curtails the progress of research and the careers of researchers
- Large research organisation has to monitor their quota = complicated administrative workaround whereby staff have to check internal folders first or contact the author and then download
- Broadly, very time consuming and highly administrative

Government staff

We know they like briefings – short 2-4 page documents







Cardiovascular disease risk reduction in rural China



RESEARCH BRIEF: INTERIM FINDINGS

Hypertension and diabetes are major risk factors for cardiovascular disease (CVD), but in rural areas management is poor. Our study assessed whether a standard package of CVD care interventions in rural China was being delivered effectively, and if it was associated improved lifestyle and biomedical indicators.



Key findings



Better drug adherence in the intervention arm (66% vs. 47%);



Smoking rates were significantly reduced in the intervention arm (4% reduced vs. 2% increased);

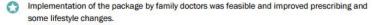


More patients in the intervention arm took less salt (50% vs. 34%);

Patients in the intervention arm reported drinking less alcohol and had more exercise (32% vs. 15%, and 31% vs. 18%, respectively); and

Prescribing and taking of statins and aspirin, and prescribing (but not taking) of anti-hypertensives, were substantially higher.

Key conclusions



Additional measures such as reducing medication costs and patient education are required.

5 recommendations for policy and practice



1. Decentralisation in other regions of Swaziland

Due to the effectiveness of our pilot in clinics across the Lubombo region, we recommend that decentralisation should begin in other regions of Swaziland. The deskguide, training manual and recording templates have been made available for this purpose.



4. Revisit agreements between Central Medical Stores and rural clinics

Our pilot highlighted frequent medication stock-outs where clinics have been without certain medications for months. We recommend that the contract between Central Medical Stores and rural clinics be revisited to evaluate their medication needs and procedures on what to do in the event of stock-outs.

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Several outreach programmes already exist at GSH for TB, HIV, and home-based care. With adequate support, outreach programmes that include mentoring and monitoring of rural clinics can be expanded to include NCDs.



2. Implement integrated regional outreach programmes for mentoring and monitoring of rural clinics

Continued mentoring can help

address issues with medication stock outs or old, faulty equipment, as well as ensure consistent recordkeeping. Several outreach programmes already exist at GSH for TB, HIV, and homebased care. With support, outreach programmes that include mentoring and monitoring of rural clinics can be expanded to include NCDs.

prompts for appropriate care.

5. Encourage consistent record-keeping through wide use of patient-held and clinic-held treatment cards



service.



TB counsellor, Tivelele Khoza (left) testing a patient for diabetes and hypertension as part of the screening programme in a TB clinic at GSH

Decentralising non-communicable disease care in Swaziland

www.comdis-hsd.leeds.ac.uk



We are confident that

assessments for

community clinic nurses are

able to undertake baseline

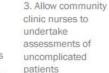
uncomplicated patients, as

seen in the Lubombo pilot.

complications should still be

However, patients with

referred to a doctor-led



Government staff

- We know they like briefings short 2-4 page documents
- Have to be careful about how and when we can share findings
- Many journals have embargos, but this is not consistent across publishers
- Would be useful to be able to share our work freely in briefs, particularly as we are the researchers and authors

General public

- Beyond Google, where do they go?
- How do we tell them about the research without the help of the media, policymakers and researchers?







Is the current open access landscape helping or hindering the international development agenda?

- OA is necessary for democracy and to progress the SDGs
- OA does not, unfortunately, level the playing field
- Still an exclusive club
- I can't offer a solution, but I would ask that institutions that have the power to grant access to other sections of society begin doing that more effectively
- Research is, after all, for the public benefit

Further questions:

- Is what we've experienced typical for NGOs in developing countries? Would like to do more research on this.
- Can the F1000 model for the international development sector provide a useful model for sharing?



Thank you for listening to our experiences

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