

LAGOS JOURNAL OF LIBRARY & INFORMATION SCIENCE

LJLIS

VOLUME 1

NUMBER 1

SEPT., 2003

NIGERIAN LIBRARY ASSOCIATION
LAGOS STATE CHAPTER
ISSN: 1596 - 9487



Current Practices in Collection Development and Outsourcing in Selected Health Sciences Libraries in Lagos, Nigeria

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Keywords

Collection; Development; Health Sciences; Lagos; Libraries; Nigeria

Abstract

Academic health sciences libraries in Lagos State of Nigeria were surveyed regarding collection development trends including their effect on approval plan and blanket orders and uses of outsourcing over the past ten (10) years. Results of the survey indicated that serials market forces, budgetary constraints, and growth in electronic resources purchasing has resulted in a decline in the acquisition of print items. As a result, approval plan use is being curtailed in most of the academic health sciences libraries. Eighty percent of the libraries had never used blanket order. Only one of the libraries is using them currently. The responding libraries gave several reasons for not using approval plan. The decline of print collections suggests that libraries should explore co-operative collection development. This may require additional effort for sound collection development. Libraries were also surveyed about the use of outsourcing. Some libraries reported outsourcing automation of the libraries but, none reported using outsourcing for resource selection, cataloguing and self preparation of book. The reason given most often for not using outsourcing was that it was not cost effective; it was not part of the library philosophy and certainly not part of the institution's policy. The respondents also reported that 50% of their needs were met through budgetary allocation; 35% by donation; 10% through income generation and 5% through borrowing and gifts and exchange.

INTRODUCTION

Collection development is the term that describes all planning for systematic and rational building of a collection, (Magrill, RM & John Corbin 1989). It has been described as one of the most discussed but least understood areas of Librarianship [Bergen, PI and D. Nemece (1999) and Giambi, M.D (1998)].

Many changes in collection development have occurred in recent years worldwide. Today, Librarians have more journals, such as electronic journals and networked database, to consider when making purchasing decisions. Also, many libraries are now involved in associational/consortial arrangements to acquire new electronic resources. However, many library budgets have not increased enough to support the additional cost of these new resources while retaining the traditional print collection. Most Libraries are also challenged by serials prices, which have risen at a ratio greater than budget increases. The desire to expand into electronic formats, while trying to maintain a print collection during time of great inflation has affected collection development practices in many libraries the world over.

This paper studies the current trends in collection development and out sourcing practices in academic health sciences libraries in Lagos State. The potential effect of these trends are also discussed. The main focus of the survey include trends in resource spending, changes in the use of approval plan and blanket orders over the past ten years, amount of local needs met through borrowing and types of outsourcing used.

An examination of related literature produced several studies documenting outsourcing and approval plan use in academic libraries in the United State and Canada [Baker (1999), Libby K.A and Caudle (1998), Martin.R.S and others (2002)]. Outsourcing is the term given the practice of contacting the services of a company that is not a part of the local library web document (t2003). Bordeianu and Benaud (1997) describes outsourcing as a new name for the old practice of 'contracting out' for services that organization chose not to provide internally with their own staff. The outside company can supplement the library staff or it can replace it. In Nigeria, Ikhizama, B.O. (1995), Adigun, T.A (1995) reported that increasing economic recession with the attendant problem of foreign exchange transactions is forcing Nigeria libraries to depend heavily on gifts and exchange and in-house generated publications. Tamano, F. (1995) posited that planning programming and budgeting system (PPBS) be adopted by Nigeria Libraries to cope with this era of spiral inflation, proliferation of reading resources and increased new informed technological opportunities.

Methodology

Using questionnaires, 6 health sciences libraries in Lagos were interviewed. The questionnaire was a modification of a similar one used by Bleac, D.D. (1990) and was designed to collect information regarding:

1. Programmes and facilities supported by the libraries;
2. General information regarding collection size of expenditures;

3. Current use of approval plans, as improved to use within the last four years;
4. Use of blanket orders;
5. Projects and plans for out sourcing and
6. Estimates of the amount of local needs that are met through borrowing.

In January 2000 the questionnaire was distributed to the heads of various libraries or sometimes to the Acquisitions Librarians about two weeks later a couple were returned by staff of those libraries to the researcher. Four Medical Libraries and two allied health Libraries were surveyed. 5 of them completed and returned the questionnaire. All these questionnaires were usable resulting in (83%) response note. Data was calculated in percentages. While most of the surveys returned were completed, there was at least one non- respondent for each question. Percentages given in this paper were based on the total number of respondents to each question.

Result

To develop a profile of the type and size of Libraries responding to the questionnaire, respondents were asked to indicate which type of Academic programmes and facilities they supported. Three (50%) of the Libraries supported medical programmes (17%) supported nursing and the other (7%) pharmacy.

Profile of monograph collection and budget size of health science Libraries.

Questions were included to determine the appropriate

size of each Library's monograph collection and budget, excluding standing orders. A comparison of monograph size and budget is highlighted on table 1.

No correlation between the size of a Library's monographs collection and its budget was evident. Libraries with monograph budget of N100,000 to N300,000 reported collections of still less than 50,000 volumes. The number of years a Library has been in existence past monograph budgets and weekly repairs policies may have a greater impact on monograph collection than current budgets. Over two thirds of the respondents (83%) reported spending an average of (70%) of their Library materials budget on serials. Also on the average the Medical Libraries spent 20% of their budget on books. 5% of the budget was spent on Audiovisual equipment and materials, while 4% was used for other services like exchange scheme and Library information Binding attended the average of 1% of the material budget of the Medical Libraries under study.

The questions on approximated percent of budget is spent on the following library materials, revealed that about 43% were spent on serials while only 4% was spent on audio-visuals. See table 2 for details. In reply to question 7 that sought to find out whether in the last 4 years increasing percentage of library budget is spent on serials attracted 67% yes and 33% no answers from the respondents respectively. All the respondents were unanimous in their answer that their Library materials budget has not kept pace with inflation and price increase.

Respondents were asked to compare current materials

Table 1: A profile of monograph collection and budget size of health science libraries

Monograph collection size				
Monograph budget	Less than 50,000	50,000	10,000-15900	More than 150,000 vols
Less than N25,000	1	-	-	-
N25,000-49,999	1	-	-	-
N50,000-99,999	3	-	-	-
N100,000-N300,000	-	-	-	-
Over N3,000.00	-	-	-	-

Table 2: % of budget spent on library materials.

Serials	43%
Monographs	20%
Binding	2%
A.V.	5%
Other services e.g. exchange scheme/library automation	4%

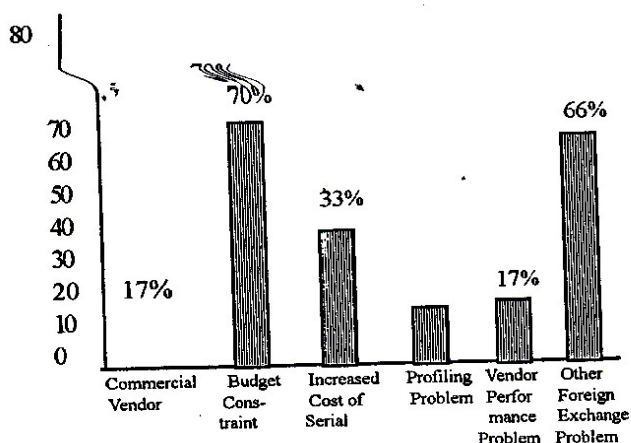
expenditures with expenditures 4 years ago; results are summarized on Table 3. The majority Libraries reported purchasing fewer monographs, serials, and study orders. The same, were true for Thirty-three percent of the respondents. The A-V titles while for 67% CD Rom resources increased. 33% also claimed to have Internet database access. Only 16% local consortia purchases of electronic products was revealed.

Table 3: Comparison of title acquisition in the last 4 years

Title	Fewer	Same	More
Monograph acquisition	100		
Serial titles received	83		
Titles on standing order	83		
Audiovisuals	-	33	-
CD-Rom. Resources	16	-	67
Local database	-	66	-
Internet database access	-	-	33
Products Via consorts	16	-	-

Information was gathered regarding approval plan use in health science Libraries for the purpose of the survey. An approval plan was defined as "an agreement with a commercial vendor to purchase and supply all publications fitting Library's collection profile (subject, publisher, price, format language etc.) subject in return privilege. Eighty percent of the Libraries had never used blanket order before. Twenty percent of the Libraries claimed to have used it. These Libraries concealed their commercial vendor approval plan for the past 4 years because of budget constraints [70%] and foreign exchange constraints. Profiling problems [10%] were the least reason for the lack of use of approval plan. The Libraries did not comment on the status of its approval plan use [figure 1].

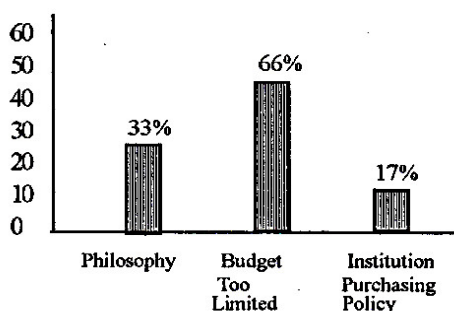
Fig. 1: Reasons for concealed approval plan with commercial vendors.



The responding libraries also answered in the negative on the question about whether they had received books from one or more individual publishers according to a subject profile. They not did fail to include that in the 4 years there had been reduction in the items received by the Library.

Figure 2. Details of the reason given by the responding Libraries for not using approval plan. The major reason was because their budget was too limited (52%). The least excuse given was the institution purchasing Policy (17%). Hence, the majority (67%) of Libraries, interviewed have for not used approval plans because it was cheaper in their circumstance (where they only manage to buy 1-2 titles for each discipline they supply book vendors supply the needed materials. Also a process where transfer of foreign exchange to oversee countries was almost like passing through an "eye of the needle" this appeared to be the only option left.

Fig. 2: Reasons for not using Approval Plan



Another area of interest to the researcher, was whether the Medical Libraries were using outsourcing service and if so in what ways. Outsourcing was defined as "contracting with an external agent to perform select processes as designed by the Library". The closest any of the Libraries came to outsourcing was to employ/invite a computer analyst to automatic their Libraries. In this regard, 33% of the Libraries interviewed used this method of outsourcing.

The final questions of the survey looked at the Library purchasing power and its ability to meet local needs. Overall, 10% of the respondents expressed the opinion the current purchasing power does not permit their

Library to support all institutional programmes adequately. This state was particularly evident in Libraries with monograph budget of N25,00-N50,000. Sixty percent of the respondents offered qualifying comments regarding the issue of adequate support. A respondent reported that the Library budget was not adequate for books let alone other local needs. Another stated that financial support was not at the level desired but every effort was made to maintain core collections.

Respondents were also asked to estimate what percentage of their needs were being met in house as opposed to borrowing from other Libraries. Of 60% of the respondents, who answered the question, 10% of their needs were met in house through income generation (50%) and budgetary. Borrowing/exchange met 5% of the needs, while 35% of the needs were met through donations.

Table 4. Sources for meeting financial needs

Sources	Percentage
Budget	50%
Income	10%
Borrowing & exchange	5%
Donations	35%
Total	100%

CONCLUSION

Several market forces, budgetary constraints and the need to expand collections to include electronic resources have resulted in fewer print items being collected at most health sciences Libraries in Lagos. To maintain adequate coverage and to preserve materials for future generations, co-operative collection development maybe considered within the state. Co-operative serials and electronic collection development can improve access to serials in the state. With increase in new journal published each year, co-operation will ensure that at least one copy of each needed serial is available within the health science Libraries in the state. Hence, co-operative collection development of monographs and serials in the health science should be serious considered. It has been done in the State of Illinois USA (Biecic etal (1999) and it can work in Lagos State with a little effort by the health Libraries in the State.

The survey documents that many Libraries in Lagos State have not embraced the labour saving practice of approval plan use to allow greater budgetary flexibility. At a time of increased demands for budgetary resources this art requires individuals to review and ordering items that formally would arrive on approval which is micro management of publishers offering instead of macro management. Because resources are scarce and coverage needs to be maintained more precision in collection development is needed to maintain adequate coverage in all subject areas. Co-operative collection development will help to supplement coverage. In summary as Libraries purchase fewer print materials, the effort required for sound collection development should actually increase rather than decrease.

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