HINARI: Providing Access to Scientific Literature in Resource Constrained Settings

**Corresponding Author:**
Dr. P Ravi Shankar,
Professor, Medical Education, Pharmacology, KIST Medical College, PO Box 14142, Kathamndu - Nepal

**Submitting Author:**
Dr. P Ravi Shankar,
Professor, Medical Education, Pharmacology, KIST Medical College, PO Box 14142, Kathamndu - Nepal

**Article ID:** WMC002332
**Article Type:** My opinion
**Submitted on:** 18-Oct-2011, 07:38:03 AM GMT  **Published on:** 18-Oct-2011, 10:42:22 AM GMT
**Article URL:** [http://www.webmedcentral.com/article_view/2332](http://www.webmedcentral.com/article_view/2332)
**Subject Categories:** MEDICAL EDUCATION
**Keywords:** Access, Developing Countries, Health information, HINARI, Nepal

**How to cite the article:** Shankar P. HINARI: Providing Access to Scientific Literature in Resource Constrained Settings. WebmedCentral MEDICAL EDUCATION 2011;2(10):WMC002332
HINARI: Providing Access to Scientific Literature in Resource Constrained Settings

Author(s): Shankar P

My opinion

In resource constrained settings like Nepal access to scientific literature is often difficult. Most institutional libraries provide access to only a very limited number of journals. Also problems of the postal system and other issues result in delay in receipt of biomedical journals and access to recent information. Many libraries are not well organized and access to different materials available in the library can be a problem. In Nepal, the program, Nepal Journals Online (www.nepjol.info) provides free online access to 63 Nepalese journals in the field of medicine and other areas.

A major initiative undertaken by the World Health Organization (WHO) along with major publishers to provide researchers in resource constrained settings access to scientific literature is the Health InterNetwork Access to Research Initiative (HINARI). In 2007, I had written about the HINARI program for the Journal of the Institute of Medicine (Shankar PR. Health InterNetwork Access to Research Initiative (HINARI). Journal of the Institute of Medicine 2007;29:58-9.). In the last five years major developments have taken place in the program and I feel that WebmedCentral as an open access publisher will be an appropriate forum to share with readers in developing nations the advantages and salient features of the HINARI program. I frequently use HINARI and want institutions and researchers in eligible countries to be aware about the program and use it in their academic and other activities.

The HINARI website is www.hinari-gw.who.int. The program provides access to over 8000 information resources to researchers in 105 countries in 30 different languages. HINARI was developed within the framework of the Health InterNetwork, introduced by the United Nations’ Secretary General Kofi Annan at the United Nations (UN) Millennium Summit in the year 2000. The program was started in January 2002 with about 1500 journals from six major publishers. The HINARI program has defined two groups of countries for access (group A and group B). The lists have been created based on three factors: Gross national income (GNI) per capita (World Bank figures), United Nations Least Developed Country (LDCs) List and Human Development Index (HDI). National universities, research institutes, professional schools (medicine, nursing, pharmacy, public health, dentistry), teaching hospitals, government offices and national medical libraries are entitled to access HINARI. In professional schools students can also access the information resources. In our institution interested students often use HINARI to access biomedical literature.

The list of countries with free or low cost access (US$1000 per institution per calendar year) is available on the HINARI website (http://hinari-gw.who.int/whalecomwww.who.int/whalecom/hinari/eligibility/en/index.html). Members of institutions in eligible countries can register for HINARI by completing an online application form. Registered institutions within a country or a geographical area are available from the website. After completing the registration process a common user name and password is made available for all staff in the institution. The librarian of the institution is the preferred contact point. Online training programs for using HINARI and the associated AGORA and OARE programs are available and interested persons can contact the ITOCA staff at moodle@itoca.org to register for the training program. Training videos have been developed and instructions on using the freely downloadable reference management software, Zotero are provided.

Journals in HINARI can be searched by title where journals are arranged alphabetically, or can be accessed by subject category, language of publication or by publisher. There is also an option to search HINARI through Pubmed. Detailed instructions on searching HINARI through Pubmed have been compiled by Vimbai M. Hungwe – Outreach and Training Office and are available at http://hinari-gw.who.int/whalecomwww.who.int/whalecom/hinari/training/HINARI%20Guide%20to%20Using%20PubMed.pdf. Full access to different databases like IMEMR (Index Medicus for the Eastern Mediterranean Region) and IMSEAR (Index Medicus for the Southeast Asian Region), SCOPUS is available. This link to and access to different databases makes HINARI a very powerful tool. HINARI also provides access to different reference sources like the British National Formulary, Cochrane library, One source among others. Links are also provided to free
collections like free books for doctors, PLoS series, Pubmed Central and others.
The listings under each alphabet also includes a growing collection of + books which provides full
access to various books on different subjects. Helpful hints for using HINARI is available at
http://hinari-gw.who.int/hinari/usinghinari/en/. Promotional posters about
HINARI can be downloaded from the website. The world map showing the breakdown of institutions
registered with HINARI in different countries will be of interest
(http://hinari-gw.who.int/hinari/eligibility/Global_HINARI_registered_2011.png). The feedback from users section underscores
the usefulness of HINARI. The HINARI website can be
accessed in six different languages (English, Arabic, Chinese, Spanish, French and Portuguese).
Frequently asked questions section answers many queries which users may have.
The HINARI website is well designed and supports easy navigation. The multiple steps required to access
a particular article makes good internet speed necessary otherwise there can be a long delay. The site recommends a minimum speed of 56 kbps which
now becoming available in most locations however higher speeds may be beneficial. The organization can
be contacted at hinari@who.int.
Disclaimer

This article has been downloaded from WebmedCentral. With our unique author driven post publication peer review, contents posted on this web portal do not undergo any prepublication peer or editorial review. It is completely the responsibility of the authors to ensure not only scientific and ethical standards of the manuscript but also its grammatical accuracy. Authors must ensure that they obtain all the necessary permissions before submitting any information that requires obtaining a consent or approval from a third party. Authors should also ensure not to submit any information which they do not have the copyright of or of which they have transferred the copyrights to a third party.

Contents on WebmedCentral are purely for biomedical researchers and scientists. They are not meant to cater to the needs of an individual patient. The web portal or any content(s) therein is neither designed to support, nor replace, the relationship that exists between a patient/site visitor and his/her physician. Your use of the WebmedCentral site and its contents is entirely at your own risk. We do not take any responsibility for any harm that you may suffer or inflict on a third person by following the contents of this website.