

Information that strengthen primary health care

# IIfPHC-E Resource Center collection development policy

International Institute for Primary Health Care - Ethiopia April 2019

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# I. INTRODUCTION

The purpose of this collection policy is to provide guidance to assist selectors in developing the IIfPHC-E Resource Center (RC) expectations and preferences. The information in the document includes the following areas:

- Collection policy statement
- Purpose
- Audience for the RC collection
- User needs assessment
- Scope of the collection
- Thematic focus
- Geographic focus
- Sources
- Languages
- How currency is maintained
- Electronic resources
- Management of the collection

#### 2. COLLECTION POLICY STATEMENT

The International Institute for Primary Health Care - Ethiopia (IIfPHC-E) intends to advance capacity building training, knowledge management, health systems/implementation research and practice as well as advocacy and partnership to strengthen primary health care systems in low and middle income countries. The Institute supports countries and settings where the full benefits of primary health have yet to be realized. In addition, IIfPHC-E supports in the design and implementation of primary health care programs at scale that is closely linked to a national program to improve the health outcomes of the nations. The IIfPHC-E Resource Center assists in the overall goal of the organisation by collecting, organising and disseminating information on primary health care (PHC). The vision of the Resource Center is to serve as an information hub on primary health care for Ethiopia and beyond.

The Resource Center provides information to increase knowledge on primary health care and to accelerate progress in improving PHC. Central to this mission is the development of a collection that supports primary health care research and practice, training and scholarship. The Resource Center is dedicated to supporting the information needs of users. It provides access to vast information resources so that users may expand their knowledge and flourish individually and as a community.

# 3. PURPOSE

The collection development policy is produced to help the Resource Center to provide guidelines for the selection, acquisition and management of information resources to support professional practice, capacity building training, research and learning. The policy will inform users about the collection resources available to them, including the subject areas covered, the breadth and coverage and the types of materials collected.

# 4. AUDIENCE FOR THE IIFPHC-E RESOURCE CENTER COLLECTION

The IIfPHC-E Resource Center serves diverse audience and meets the needs of the Institute's staff, trainees, graduates, trainers, researchers, students as well as policy makers, health program designers, health workers, program managers, lower-level health personnel from government and non-governmental organizations and anyone else working in, or interested in primary health care. The Resource Center has developed its collections with the needs of this diverse professional audience in mind.

# 5. USER NEEDS ASSESSMENT

The IIfPHC-E Resource Center developed and distributed a survey questionnaire to determine current conditions and to ensure that the Resource Center provides services that users find useful. Based on the information and feedback gathered, the subject categories are included in the selection of materials for the Resource Center and forms part of the scope of the collection. For subjects and thematic areas identified under the main subjects in primary health care see Annex I. This list will serve as key priority and will constitute primary documents. The second category of information identified by users that they wish be contained in the RC falls under general reference materials and will constitute secondary documents. The third category identified falls under community development, and will be considered as tertiary documents.

The understanding of primary health care is constantly evolving, with new focus areas added. The needs assessment survey will be regularly conducted to address the needs of users and expand the focus areas.

# 6. SCOPE OF THE COLLECTION

As indicated above, the collection of the Resource Center will focus on primary health care (PHC), which is a broad concept. PHC has been recognized as a core component of effective health systems since the early part of the twentieth century. The Alma Ata Declaration of 1978 has a larger perspective on PHC, which is what the IIfPHC-E is built on. The Alma Ata vision defined PHC as:

...essential health care based on practical, scientifically sound and socially acceptable methods and technology made universally accessible to individuals and families in the community through their full participation and at a cost that the community and country can afford to maintain at every stage of their development in the spirit of self-reliance and self-determination. It forms an integral part both of the country's health system, of which it is the central

function and main focus, and of the overall social and economic development of the community. It is the first level of contact of individuals, the family and community with the national health system bringing health care as close as possible to where people live and work, and constitutes the first element of a continuing health care process.

Dr. Henry Perry has expounded upon this original definition in a 2013 white paper to reflect today's global health landscape:

Primary health care consists of those services that people seek and that providers (individual and organizational) deliver to protect health and to treat basic and uncomplicated illness, disease and injuries – especially those that are public health priorities in terms of disease burden that can be alleviated through cost-effective and affordable interventions and programs. These services include those that can be provided in communities outside of facilities by community-based workers as well as services provided at facilities by frontline health workers (including auxiliary nurses, graduate nurses, and physicians) without advanced specialized training and without expensive diagnostic and laboratory support. An ideal primary health care system focused on improving health care of underserved populations in low-income countries must include:

- disease prevention
- screening for priority infectious diseases and other health-related conditions,
- detection and treatment of priority infectious diseases HIV/AIDS, tuberculosis and malaria
- health promotion
- basic and essential services for women, mothers and children
- Appropriate treatment of common diseases and injuries
- Basic and essential surgical care
- Community engagement
- Attention to the social determinants of ill health (illiteracy and lack of education, lack of an adequate food supply and adequate housing).

Despite notable progress, there remains a large gap between what individuals and communities need and the quality and effectiveness of care delivered. Thus, there is no static list of 'topics' in developing the collection. However, users may make reference to the PHC thematic list of topics that included the Alma Ata concept in Annex I. This list indicates the Resource Center's broad and extensive collection level for each topic, which falls under primary documents.

# 7. GEOGRAPHIC FOCUS

The collection of the resources will have worldwide focus since the sharing of knowledge, effective models and best practices is important to catalyze improvements in PHC delivery and outcomes, particularly in low- and middle-income countries. Cross-country learning can

accelerate effective health systems strengthening interventions and improvements in PHC delivery. The resources collected will provide countries and implementers with tools to assess the current state of their PHC delivery system and to identify where the gaps are, and to understand how to make it work in their contexts and settings.

The collection policy seeks to define collection levels for all countries in a way which allows the Resource Center to be consistent in building up and maintaining a core collection across all nations.

Country/ Region	Collection level
Ethiopia	-Strong collection of PHC materials to support trainees, health designers, implementers, policy makers, students and others -systematic collection of general information (core government information on health policies, strategies; health & politics; economics; development/poverty reduction strategy; population statistics; MDGs/SDGs) -extensive collection of local journals, monographs and research output -collection of materials on community development
Sub-Saharan	-Systematic collection of core government documents ( health policies;
Africa (mainly Anglophone)	strategies, health & politics; development/poverty reduction strategy; population statistics; MDGs/SDGs) for each country
	-collection of main subjects in PHC (see Annex I): journals, research output; reports; public health & community development
North Africa	<ul> <li>Systematic collection of core government documents ( health policies; strategies, health &amp; politics; development/poverty reduction strategy; population statistics; MDGs/SDGs) for each country</li> <li>collection of main subjects in PHC (see Annex I): journals, research output; reports; public health &amp; community development) for each country</li> </ul>
East and South- East Asia	- Systematic collection of core government documents ( health policies; strategies, health & politics; development/poverty reduction strategy; population statistics; MDGs/SDGs) for each country -collection of main subjects in PHC (see Annex I): journals, research
Latin America &	output; reports; public health & community development
the Caribbean	<ul> <li>Systematic collection of core government documents (health policies; strategies, health &amp; politics; development/poverty reduction strategy; population statistics; MDGs/SDGs status) for each country</li> <li>-collection of main subjects in PHC (see Annex I): journals, research output; reports; public health &amp; community development</li> </ul>

# 8. COLLECTIONS FRAMEWORK

North America	<ul> <li>-systematic collection of core government health policies and statistics for each country</li> <li>-collection of main subjects in PHC (see Annex I): journals, research output; reports; universal health coverage; public health</li> </ul>
Europe	<ul> <li>-systematic collection of core government health policies and statistics for each country</li> <li>-collection of main subjects in PHC (see Annex I); journals research output; PHC implementation reports; universal health coverage; public health</li> </ul>
UN agencies	Materials on health policies and strategies; PHC & health-related resources; declarations; MDGs/SDGs; international development
Global materials	Collection of material with a global focus to inform users with a global perspectives, including global health; universal health coverage/health for all agendas

# 9. SOURCES

This collection policy will be used to acquire and collect materials in support of the Institute's local and international capacity building training, knowledge management and advocacy. The resources are drawn from the disciplines of public health, health science, medicine and related disciplines, taking into consideration the integrated nature of PHC. The majority of the resources will originate from the South and low-income settings for sharing experience and learning. Materials are selected on the basis of their subject content, following the collection policy.

Holding in the collection include:

- materials produced in Ethiopia
- materials produced by Sub-Saharan government bodies,
- materials produced by non-government organizations; advocacy groups, private sector and many others working on the health
- materials produced by donor governments, agencies, and UN system bodies
- materials produced by universities, university centers/departments; research institutes and
- materials produced by international, regional and national organizations; and
- commercial publications

# 10. ACCESS

The RC has a digital library of information that can be accessed at all hours, from any location via the Internet: http://iifphc.org/iifpch-resource-center/

## II. LANGUAGES

Collection is predominantly in English and with some in Amharic or other local languages widely spoken in Ethiopia. However, other local languages spoken in Ethiopia will be added. If a source contains resources in more than one language, this will be indicated for the user.

# 12. CURRENCY

The IIfPHC-E aims to collect the most current material. As a general rule, the selection process of materials should be no more than 5 years from publication date. Collection is also informed by the content of any particular title, as well as by individual requests for specific titles.

However, it should be noted that materials that provide historical background will be kept in the Resource Center for sharing experience and best practice within countries.

# **13. ELECTRONIC RESOURCES**

#### ELECTRONIC JOURNALS

A significant number of e-journals that have free open access and freely available are collected and external links are provided by the Resource Center. Some e-journals will be purchased in electronic format, taking into account cost considerations and availability through other sources. The Resource Center has some print copy of Ethiopian electronic journals.

#### ELECTRONIC BOOKS

Some books are available to be used onsite. E-books/books in high demand will be purchased and added in the collection, gradually. As usage of the resources is limited, e- copies will be purchased where demand necessitates.

#### ELECTRONIC DATABASES

A considerable number of e-databases that have open access are available in the Resource Center. Databases that require subscription are also included for information. In the future, databases will be purchased taking into account the cost combined with the relevance of the content to users.

#### FREELY AVAILABLE E-RESOURCES

A significant number of e-resources are identified and are linked to their website resource pages. These include resources of local, regional and international health organizations and eLearning resources.

#### 14. MANAGEMENT OF THE COLLECTION

The IIfPHC-E Resource Center staff is the authority in charge of selecting the materials. They are responsible for adhering to this policy. Staff members are expected to use their professional judgment on issues of price, quality and reputation of the author and /or publisher.

#### DONATIONS

People can make donations of print, non-print and related gifts of general and special nature to the Resource Center. Donated items may need to benefit learners and researchers, and should fit into the policy defined in this document. The Resource Center should check if the gift fits the Resource Center collections intellectually; if it has the space to house the gift, from initial storage to final processing as well as if the RC has the staff and ancillary resources to process the gift in a timely fashion. The collection development staff will balance the value (in research / knowledge terms) of the donation against the costs of cataloguing, processing, storing and conserving the material. Donated items not added to the collection may be donated to other libraries that may use them.

# NUMBER OF COPIES

Only one copy of each title is generally purchased, with a few exceptions where the Resource Center anticipates a high demand before purchase. If the Resource Center receives items by gift or donation which is already in stock, the Center will decide on an individual basis. A duplicate copy, or copies, will be obtained where demand becomes an issue. Print copy journals can be available in multiple copies.

#### USER REQUESTS

The Resource Center will try to respond positively to requests from users which fit into its selection criteria. However, the Center might take cost, currency, quantity of material available on the topic, online availability and potential usage, into consideration in making such decisions.

#### INTERLIBRARY LOANS

The Resource Center will establish interlibrary loan service in the thematic areas that the RC does not hold, both from Ethiopia and beyond, whenever possible.

#### ARCHIVES

Going forward, archive materials from different sources, both published and unpublished, will be deposited in the Institutional Repository. The RC aims to collect all material produced by any research staff member at IIfPHC-E and by postgraduate/doctoral students who received small research grants by the Institute. Hard copy materials will be digitized and added to these collections.

# 15. STOCK WITHDRAWAL POLICY

All areas of the collection of the RC are mainly e-resources and with some print materials. Items and serial runs to be weeded will be judged on an individual basis, taking account of a number of factors based upon the selection policy and perceived usefulness to the RC. Some questions which will inform the decision-making process include:

- the use of the material in current/future research;
- if the material is needed for training;
- if it is unique to the collection;
- if content is out of date; and
- if material is available online.

# ANNEX I

# **IIfPHC-E** collection development policy

# Capacity building training and knowledge management (research and learning)

The collection includes major source materials required for capacity building training and research that IIfPHC-E and its' partners conduct. The Resourc center undertakes to provide essential readings on Ethiopia's health extension program and community-based primary health care to local and international trainees. The Center will liaise with all key partners to add materials. The majority of individual readings (articles and chapters) are made available to trainees online via a virtual learning environment via the training webpage of the IIfPHC-E.

It is intended to include all important reference works and a wide selection of specialized monographs, extensive collection of journals in PHC research. Older material is usually retained for historical research and is actively preserved.

The collection supports:

- Materials useful to trainees, trainers, health designers and implementers, and researchers (presentation materials, research reporting, new findings and so on)
- Important reference works
- Wide selection of specialized monographs
- Extensive collection of journals
- Older materials for historical research

#### Study or self-learning support

The Resource Center will provide basic resources on subjects to support independent learning activities. The collection imparts knowledge about a subject in a systematic way. It includes a wide range of basic works in appropriate formats, book chapters, key journals on primary and secondary topics. Appropriate e-documents and reference tools will be available pertaining to the subject. The collection is adequate to support independent study and learning needs of the user.

The collection includes:

- basic works about a subject catagory
- Key journals on primary topics/selection of journals for secondary topics
- Selection of specialised monographs
- Selection of e-Learning materials pertaining to the subject

# General information

A collection of materials that serves to introduce and define a subject will be available. This may include access to appropriate bibliographic database, survey, handbooks, and periodicals, adequate to support basic information needs.

# Selection guidelines by subject and thematic areas

The themes listed under refer to the IIfPHC-E Resource Center current collection policy.

# PRIMARY DOCUMENTS

# MAIN AND SUBSIDIARY SUBECTS IN PRIMARY HEALTH CARE

#### PRIMARY HEALTH CARE

- . Primary health care- general
- . Primary health care Ethiopia
- . Primary health care Africa
- . Primary health care global perspective

#### COMMUNITY HEALTH CARE

- . Community health care general
- . Health extension program Ethiopia
- . Community health care/health workers Africa
- . Community health care/community health workers global perspective

### DISEASES/DISEASE CONTROL

- . Disease and disease control general
- . Diagnosis and management
- . Immunization vaccine safety
- . Infections control

#### COMMUNICABLE DISEASES

- . Communicable diseases general (infectious diseases; disease outbreaks; emerging communicable diseases)
- . Tuberculosis
- . Sexually transmitted infections
- . HIV/AIDS
- . Hepatitis
- . Water-borne diseases
- . Diarrheal diseases
- . Respiratory diseases
- . Parasitic diseases
- . Malaria
- . Polio
- . etc

#### NON-COMMUNICABLE DISEASES (NCDs)

- . Non-communicable diseases- general
- . Cancer (breast cancer; cervical; colorectal; prostate; skin; lung; oropharyngeal cancer)
- . cardiovascular diseases heart disease; hypertension; stroke
- . congenital conditions

- . diabetes endocrinology
- . rheumatism/arthritis
- . Musculoskeletal disorders
- . Renal & urinary tract diseases
- . Oral health/dentistry
- . Vision & hearing
- . Podiatric health
- . etc

#### MENTAL HEALTH & PSYCHO-SOCIAL SERVICES

- . Mental health & psycho-social services general
- . Depression and anxiety
- . Substance abuse (alcohol, etc)
- . Tobacco use and control
- . Trauma recovery

#### **INJURIES**

- For more resources on injuries, see Limb loss or impairment
- . Injuries general
- . Road accidents/injuries
- .3Physical rehabilitation

#### NEGLECTED TROPICAL DISEASES (NTDs)

- . NTDs-general
- . Eye health (Trachoma; Onchocerciasis /river blindness)
  - For more resources on eye health, see Visual impairment and blindness
- . Lymphatic filariasis
- . Soil-transmitted helminthes/schistosomiasis
- . Pondoconiosis
- . Dracunculiasis (guinea-worm disease)
- . Leishmaniases
- . Leprosy
- . Rabies
- . etc

#### NUTRITION

- . Nutrition general (
- . Child nutrition/malnutrition
  - For more resources on child health, see Child health; Mother and child health
- . Adolescent nutrition/malnutrition
- . Adult nutrition/malnutrition
  - . Obesity; eating disorders; over/underweight

#### WOMEN'S HEALTH

- For more information, see Gender-based violence
- . Women's health general

# . Maternal health

For more information, see; Reproductive and sexual health

- Maternal health general
- Maternal morbidity/mortality reduction
- Breast-feeding
- For more resource, see Child nutrition/malnutrition; Child health
- Maternal nutrition

For more resource, see Mental health and psychosocial services

# CHILD HEALTH

- . Child health general
  - For more resource, see Child nutrition; Diarrheal diseases; Immunization
- . Neonatal morbidity/ mortality
  - For more resource, see Maternal health
- . Health promotion in schools

#### MOTHER, NEWBORN AND CHILD HEALTH

- . Mother, newborn and child health general
  - For more resources, see Child health; Maternal health; Reproductive and sexual health

#### **MEN'S HEALTH**

Men's health - general

For more resource, see Mental health and psychosocial services

#### ADOLESCENT HEALTH

- . Adolescents' health general
- . For more resource, see Reproductive and sexual health

# ELDER HEALTH

- . Elder health general
- . Aging

# **REFUGEE & IMMIGRANT HEALTH**

. Refugee & immigrant health - general

# **DISASTER MANAGEMENT & EMERGENCY SERVICES**

- . Disaster management & emergency services general
- . Emergency health services
- . Disaster & emergency preparedness
- . Natural disasters

#### REPRODUCTIVE AND SEXUAL HEALTH

- . Reproductive health and sexual health general
- . Reproductive health/family planning
  - For more resource, see HIV/AIDS; Sexually transmitted infections

# TRADITIONAL HEALTH CARE AND ALTERNATIVE THERAPIES

- . Traditional health care & alternative therapies general
- . Incorporating traditional healers into formal health system
- . Traditional and herbal medicines

# DISABILITY AND REHABILIATION

- . Disability and rehabilitation general
- . Social services and provisions for disabilities
- . Visual impairment and blindness
  - For more resource, see Eye health
- . Limb loss or impairment
  - For more resource, see Injuries
- . Prosthetic limbs
- . Intellectual disabilities/ brain impairment
- . Hearing impairment
- . Epilepsy

# MEDICAL SERVICES

- For more resource, see Health services
- . Medical services general
- . Medical equipment and health facilities

For more resource, see Health information technology and information management

. Health infrastructure (hospitals, health centers and health posts)

For more resource, see Health personnel and training

- . Pharmaceutical and medical supplies
- . Emergency medical services (information on ambulance, call systems etc)

# HEALTH INFORMATION TECHNOLOGY AND INFORMATION MANAGEMENT

- . Health information technology & management- general
- . Electronic medical records (EMR)
- . Health information system (HMIS)
- . Integrated Financial Management Information System (IFMIS)
- . Integrated Pharmaceuticals logistics System (IPLS)

For more resource, see Pharmaceutical and medical supplies

# HEALTH PLANNING AND MANAGEMENT

For more resources, see Health strategies and policies; Health sector implementation guidelines & procedures in the Repository

- . Health planning and management general
- . Leadership, management and governance
- . Health care financing/resource mobilization
  - Development partners in the health sector
    - For more resources, see Health organizations webpages
  - Community based health insurance
- . Supply chain and logistics management (eg. PFSA)

For more resources, see Pharmaceutical and medical supplies

- . Integrated community case management (ICCM)
- . Systematic reviews and evidence-based practices
- . Health systems & policy
- . Health economics

#### ENVIRONMENTAL HEALTH

For more resources, see WASH; Energy

. Environmental health – general

- (Toxicology; ecology; environmental epidemiology...)
- . Climate change/climate related hazards
- . Environmental pollution (hazardous chemicals; air pollution, water pollution; soil pollution; land pollution; industrial pollution; waste water management; noise pollution; buildings & health; indoor pollution; food protection; safe drinking water)
- . Natural disasters

For more resources, see Injuries; Trauma recovery

#### **OCCUPATIONAL HEALTH & SAFETY**

- . Occupational health & safety general
  - For more resources, see Injuries
- . Industrial hygiene

# HEALTH WORKFORCE AND TRAINING

- . Health workforce general
- . Pre-service education
  - Health extension workers training programs
- . In-service training and continuing professional development (CPD)
- . Mental health and job satisfaction for health care workers

For more resources, see Mental health and psychosocial services

#### HEALTH COMMUNICATION/INFORMATION

. Health communication/information – general

For more resources, see Health information technology

- . Telemedicine/Tele education
- . Social behavior change communication (SBCC)
- 322.4 Health behavior change

# **HEALTH PROMOTION & EDUCATION**

- . Health promotion & education general
- . Health promotion & education in community setting; school setting; worksite setting
- . Health advocacy

# HEALTH SERVICES

- For more resources, see Medical services
- . Health services general
- . Public health emergency
  - For more resources, see Disease/disease control; Ethiopian Public Health Institute
- . Health care in humanitarian emergencies
- . Quality health services
- . Health monitoring and evaluation
- . Health equity

For more resources, see Gender equity/women's empowerment

. Regulation of health care (services, personnel, facilities, product safety)

# URBAN HEALTH

- . Urban health general
- . Clean cities
- . Urban planning/built environment and public health
  - For more resources, see Environmental health

#### RURAL HEALTH

. Rural health - general

# PUBLIC HEALTH

- . Epidemiology (risk assessment; population-based health research)
- . Biostatistics (statistical methods & theory)

#### Main subjects related to IIfPHC-E

#### **GENERAL INFORMATION**

- . Newsletters and brochures
- . Press releases & keynote speeches

## CAPACITY BUILDING

- . Field visits & trip reports
- . IIfPHC-E training resources
- . Proceedings & reports

#### PHC IMPLEMENTATION RESEARCH

- . IIfPHC-E publications
- . Research work (unpublished)

# SECONDARY DOCUMENTS

- GENERAL REFERENCE MATERIALS
- . ETHIOPIA HEALTH MILLENNIUM DEVELOPMENT GOALS (MDGS)
- . ETHIOPIA HEALTH STRATEGIES & POLICIES
  - . Health strategies & policies- general
  - . HSDP
  - . HSTP (Envisioning....)
- . ETHIOPIA HEALTH SUSTAINABLE DEVELOPMENT GOALS (MDGS
- . HEALTH SECTOR IMPLEMENTATION GUIDELINES, STANDARDS & PROCEDURES
  - . Implementation guidelines & procedures general
  - . Implementation guidelines & procedures Health Extension Program
- . HEALTH INDICATORS
- . MANUALS AND PROCEDURES
- . MINISTRY OF HEALTH REPORTS AND BULLETINS
- . MINISTRY OF HEALTH TRAINING/PRESENTATION MATERIALS
- . HEALTH STATISTICS

# TERITIARY DOCUMENTS

# COMMUNITY DEVELOPMENT

# ENERGY

- For more resources, see Environmental health
- . Energy general
- . Household energy (clean)

# WATER, HYGIENE AND SANIATION (WASH)

- . WASH general
- . Integrated Urban Sanitation and Hygiene (IUSH)
- . Community-Led Total Sanitation (CLTS)
- . WASH infrastructure (latrines, wells, etc)

# GENDER AND DEVELOPMENT

For more resource, see Health equity . Gender and development - general

- . Gender equity/women's empowerment . Gender based violence in health facilities

# FOOD PRODUCTION AND AGRICULTURE

- . Food production and agriculture general
- . Food security
  - For more resource, see Nutrition

# **Review of the policy**

This policy will be reviewed as needed to ensure that the policy is serving the mission of IIfPHC-E. It is the Resource Center's responsibility to ensure that the collection retains relevance to changing user needs. It will regularly seek the opinion and expertise of professional, scholarly, and scientific stakeholders in the Resource Center's collection development program planning efforts.

This document was prepared by:

Emebet Zerfu Resource Center Officer IIfPHC-E April 2019