Chapter 4

Knowledge Sharing for Healthcare and Medicine in Developing Countries: Opportunities, Issues, and Experiences

Kgomotso H. Moahi

University of Botswana, Botswana

Kelvin J. Bwalya

University of Johannesburg, South Africa

ABSTRACT

Knowledge sharing has always been used as a platform for cross-pollination of ideas and innovations in a bid to improve and enhance performance thereby increasing competitiveness and responsiveness both in organizations and individual levels. Healthcare systems are not an exception. However, for knowledge sharing to take place there is need for certain factors to be noted and addressed such as the individual, organizational and technological. Further, knowledge sharing goes hand in hand with knowledge management and must become part of the strategic fabric of organizations. This chapter focuses on knowledge sharing by health professionals in healthcare and medicine in developing countries. The chapter covers knowledge management and its link with knowledge sharing; the various methods of knowledge sharing in healthcare; factors that make knowledge sharing an important strategic move for healthcare organizations; and factors and issues that affect or determine knowledge sharing behavior. Finally, a literature search for examples of knowledge sharing in developing or low and middle-income countries was conducted and the results are presented. The chapter shows that developing countries have recognized the value of knowledge sharing in healthcare systems and there are tangible signs that this is going to shape cross-pollination of ideas and innovations in the health systems in the foreseeable future.

DOI: 10.4018/978-1-5225-2262-1.ch004

INTRODUCTION

Healthcare is information and knowledge intensive. It is characterized by rapid developments in medical knowledge that are generated as new conditions and diseases arise. It is not a secret that research and development in the pharmaceutical and in the biomedical fields yields vast amounts of information and knowledge. To deliver high quality, cost-effective services, healthcare professionals must have access to and use this knowledge. Healthcare organizations such as hospitals have turned to knowledge management to enable knowledge access, translation, sharing, and use. To be able to keep up-to-date, professionals must engage in robust knowledge sharing activities – which can only happen if knowledge itself is adequately managed. Whilst it is recognized that knowledge is important and valuable, Lefika and Mearns (2014) make the point that without sharing, knowledge has no value – it must be shared for its value to be fully recognized. Apart from value, sharing of knowledge ensures that knowledge is peer-reviewed culminating into added inferences and interpretations given different contextual settings. Sharing of knowledge practices and approaches is very important for replication and cross-pollination of knowledge translating into improved medical practice.

Healthcare professionals in developing countries are faced with a litany of problems that affect their ability to effectively share knowledge. They are invariably overworked with large patient loads due to a shortage of doctors, nurses, and other auxilliary health workers. Attending to patients leaves very little time for knowledge sharing, let alone even updating what they know on their own. Further, the infrastructure that might enable knowledge sharing – such as computing, Internet connectivity, and other modes of communication is in most cases obsolete and not adequate. Many healthcare workers in such countries find themselves in rural areas where the infrastructure is not as developed as in urban areas. and have been reported to feel isolated and away from current practices in the field (Pakenham-Walsh & Bukachi, 2009). Pakenham-Walsh & Bukachi (2009) conducted a review of the literature on the information needs of healthcare workers in Africa. They noted that most healthcare workers face isolation because they are mostly operating in rural areas that have limited information infrastructure, and they are swamped by huge workloads due to the shortage of healthcare workers in general. They identified the dire consequences to patient safety when healthcare workers' needs are unmet; their research identified issues such as a sizeable lack of knowledge of the basics of how to diagnose and manage common diseases. Not only do healthcare professionals not get the most recent and up-to-date research findings that would be useful in their work, but a gap between scientific evidence and its use in developing countries has been identified (Dagenais et al (2015).

This chapter focuses on knowledge sharing by health professionals in healthcare and medicine in developing countries and explores other prerequisite conditions for effective knowledge sharing. The chapter covers knowledge management and its link with knowledge sharing; the various methods of knowledge sharing in healthcare; factors that make knowledge sharing an important strategic move for healthcare organizations; and factors and issues that affect or determine knowledge sharing behavior. Finally, a literature search for examples of knowledge sharing in developing or low and middle-income countries was conducted and the results are presented. The search for literature was carried out on the following databases: PubMed, CINAHL, Library Information & Technology Abstracts, ERIC, Academic Search Premier, Africa-Wide Information, SocINDEX – all of them on EBSCOhost.

16 more pages are available in the full version of this document, which may be purchased using the "Add to Cart" button on the publisher's webpage:

www.igi-global.com/chapter/knowledge-sharing-for-healthcare-and-medicine-in-developing-countries/178679

Related Content

Use of Predictive and Simulation Models to Develop Strategies for Better Access Specialists Care

Siang Li Chuaand Wai Leng Chow (2020). *Impacts of Information Technology on Patient Care and Empowerment (pp. 109-136).*

www.irma-international.org/chapter/use-of-predictive-and-simulation-models-to-develop-strategies-for-better-access-specialists-care/235956

Decreasing Social Isolation in Older Adults and Stereotypes in Students: Experiential Learning Creates Gerontological Providers

Dana C. Branson (2023). *Acceleration of the Biopsychosocial Model in Public Health (pp. 168-193)*. www.irma-international.org/chapter/decreasing-social-isolation-in-older-adults-and-stereotypes-in-students/319160

Al-Enhanced Healthcare and Eldercare Delivery Using Non-Intrusive Sensors and Physical Robots: An Exploratory Study

Yordanka Karayaneva, Sara Sharifzadeh, Ala Szczepura, Yanguo Jingand Bo Tan (2025). *Impact of Digital Solutions for Improved Healthcare Delivery (pp. 1-34).*

www.irma-international.org/chapter/ai-enhanced-healthcare-and-eldercare-delivery-using-non-intrusive-sensors-and-physical-robots/360989

Media Awareness Preferences for Information on Sickle Cell Disorder Among University Students in Southwestern Nigeria

Cynthia Omoseyitan Ojomoand Taye Babaleye Babaleye (2022). Research Anthology on Improving Health Literacy Through Patient Communication and Mass Media (pp. 469-480).

www.irma-international.org/chapter/media-awareness-preferences-for-information-on-sickle-cell-disorder-among-university-students-in-southwestern-nigeria/285427

Timing of the First Antenatal Care Visit and Associated Risk Factors in Rural Parts of Ethiopia

Lema Abate Adulo, Sali Suleman Hassenand Asrat Chernet (2022). *International Journal of Applied Research on Public Health Management (pp. 1-12).*

www.irma-international.org/article/timing-of-the-first-antenatal-care-visit-and-associated-risk-factors-in-rural-parts-of-ethiopia/282746