Introduction

The issue of "Zeszyty Naukowe Ochrony Zdrowia. Zdrowie Publiczne i Zarządzanie" ("Scientific Issues of Health Protection. Public Health and Governance") you are reading is devoted to the problems of information and communication in health care. Both lines of research are very important for the quality of health care, effective measures in the area of disease prevention, organizational solutions, in fact – for everything we do in the health care sector. Without good distribution and effective dissemination of research results and other kinds of data, as well as without efficient communication between professionals and patients, scientific achievements, our knowledge, and even the best ideas can remain unknown, unused forever. We all know how significant that is, but still there are not enough investigations in this field, even fewer implementations, despite the fact that so much is being told about the information era, knowledge society, and evidence-based decision making.

So many basic questions arise. Why do specialists in public health institutions in Poland do not have free access to the only (and publicly financed) database of scientific publications in our field, Polish Medline – Polish Medical Bibliography? Medical professionals can use PubMed, but what about health promotors, health managers, health economists who often need research data to be well-grounded in local reality? Do we know what sources of information they use, how they cope with its lack, what barriers they encounter?

Why the specialized libraries operating in Polish hospitals until the 1990s, have never been re-established according to contemporary standards? A remark that "something like this" should be in a hospital, brings a smile of disbelief to the participants of the continuing education course in Health Care Institutions Management, who usually know the realities of such institutions all too well. After all, we expect evidence-based treatment, evidence-based procedures, and our doctors and nurses to have reliable and up-to-date knowledge.

To find and to use the existing evidence we need developments, tools and intermediaries. Anybody who has attempted to glean layers of research, sometimes looking for information in vain, knows what I mean. Often we get discouraged and settle for what we have found via Google, and which can turn out to be well-positioned promotional information, not necessarily the best, most appropriate or reliable. And definitely incomplete. Do we have the skills necessary to search for, evaluate and adjust information to our real needs? That is why we need intermediaries – health information specialists, information brokers, and scientific information processing and dissemination infrastructure. In Poland we have an institution whose goal is to provide research information for the needs of health policy making – The Agency for Health Technology Assessment and Tariff System, we have a budding Cochrane Collaboration centre at the Jagiellonian University Medical College – is this enough? Surely not.

Another problem is that although much is said about the low level of health literacy of our society and the bad consequences of self-treatment, do we ask ourselves what we are doing in order for our citizens to reach sources of good, up-to-date and trustful knowledge about health and treatment? Do we have a publicly available, obvious to everyone, website which provide basic, one-hundred percent reliable health information? There is no such source of information, although it would certainly bring tangible benefits both for the health of our society and the health care budget, and possibly would contribute to improving citizens' health competency.

Let us lose ourselves in the world of fantasy for a moment. Let us imagine that in our hospitals doctors and nurses have the time and space to access research evidence during their work hours, on site, and, in case of doubt, they can count on the assistance of an information science specialist, who will provide them with necessary publications/data and supply it to their desk; that they have such desks, that we have institutions which process and disseminate scientific data, just like the British York Centre for Reviews and Dissemination; that we have scientific journals addressed not to scientists but to practitioners; that before we withdraw sweet buns from school cafeterias we study recommendations developed by scientists, saying how we effectively change nutrition behaviour of children; that our decision-makers, before they implement a specific solution they will read a systematic review of research or natural experiments, and on this basis they will choose the optimal solution, etc. It would be nice, wouldn't it? Is it possible? Yes. But, under the condition that we study and learn about information needs, that we facilitate access to selected high-quality and easy-to-use knowledge, that we raise information skills and communication skills, that we establish institutions which process scientific information and that we educate health information professionals the way they are educated in many countries.

Dear Readers, please forgive me that this introduction is more of a list of deficiencies, complaints and dreams rather than an overview of accomplishments. But that is the reality. However, I do hope that research in the area of information processing, its dissemination and use will flourish. I also hope that those who need information will exert more pressure and insist that more effort be put into changing this rather unsatisfactory state of affairs.

In this issue you will find articles reporting specific research and analyses in the area of scientific information dissemination, communication or computerization in health care. I am certain there will be more to come!

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