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## **Information communication technology applied to veterinary education in early XXI century**

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### **Abstract**

Veterinary education has profited largely from information communication technology (ICT) advances, mainly, in last two decades. The aims of the present chapter are to describe some important veterinary issues deeply involved with ICTs, their impact and challenges in education field, and the relationships between them and the globalised society. The worldwide Internet use and digital literacy levels importance, regarding veterinary students, teachers and general society perspectives, are reported. Online health and biosciences peer-review and scholar literature quickly increased during the last years. New free or paid accessibility forms were widespread developed. Motivations, constraints and trends of electronic learning are analysed in order to evaluate pedagogical or Institutional and Governmental approaches. Past veterinary and medicine imagery, locally stored, yielded place to Health Computer-Assisted Learning packages and simulation case-based. The Web evolution and advances in wireless and mobile communications associated to biosensor tags or radio-frequency identification technology granted multi-user virtual environments, although in an embryonic veterinary phase. The food chain rastreability and tele-epidemiology, including their real-time monitor and prediction, are also a great ICTs based progress. International regulatory laws accreditation and digital literacy levels improvements, other than technological advances, should be one of the major challenges for veterinary education in a sustainable globalised society.

### **Keywords**

Veterinary Education; Health Informatics; Veterinary Imaging Systems; Online Healthcare; Web-Enabled Veterinary Care; Computer-Based Training; Distance Education; Networked Learning; Virtual Learning

1 **1. Introduction**

2 The rapid development of information communication technology (ICT), in past few years,  
3 allowed a revolution in overall education systems, including medicine [77], veterinary  
4 medicine [80] and animal production field's involvement [46]. The ICT provides new  
5 pedagogical models for under and postgraduate's veterinary students including continuous  
6 professional education, e.g. lifelong learning. The ICT advances, in last years, gives news  
7 opportunities and challenges for biological scientists and teachers, veterinarians, veterinary  
8 technicians, practice managers, veterinary students and veterinary technician students.  
9 However, these elementary advances will be closely related with the future ICT development  
10 in all global society fields.

11 The acquisition of skills and competences in veterinary medicine and animal production fields  
12 was improved, in last decades, regarding the medical and surgical learning, food animal  
13 management, food safety, public health, bioinformatics, genetic, research and many other  
14 areas. The ICTs are present, as a tool, in all of these scientific and technical fields. A  
15 paradigmatic multidisciplinary example can be done by the newest development of the  
16 genomic selection breeding based in thousands of single nucleotide polymorphisms in Ireland.  
17 A genomic (DNA- Deoxyribonucleic acid) databank for Irish dairy and beef cattle was  
18 developed and the program implementation expected during Spring 2009 [41].

19 Many students, veterinarian and related professionals adopt, actually, digital devices for data  
20 storage, computation and communication. The use of Internet for educational and professional  
21 purposes also enhanced their interrelationships with society. The classic use of ancillary  
22 digital devices, connected to computers, personal digital assistants and servers for teaching  
23 and learning purposes in public and private analytical laboratories and veterinary hospitals  
24 was changed to a more active interaction with intra and internet systems. Other than  
25 laboratorial and clinical diagnosis of diseases in domestic, exotic and wild animals or hospital  
26 organizational models, ICTs are also responsible for new paradigms in animal production  
27 regardless food animal safety, public health and environment protection, improved by  
28 geospatial information technologies. The concepts of geographic or personal mobility,  
29 philosophy discussion, professional formation, commercial services and working groups are  
30 now in constant mutation. In next years, their global improvements should be closely related,  
31 other than technical advances, with ethical and regulatory performances considering the  
32 worldwide economic, policy and governmental differences or widespread problems.

33 In order to discover these aspects, the present chapter aim to identify some relevant areas of  
34 veterinary education using ICTs and to determine the impact of new technologies and  
35 challenges in each of them. General society involvement and ethical, regulatory acts and law  
36 implications are also considered in relationship with the veterinary fields.

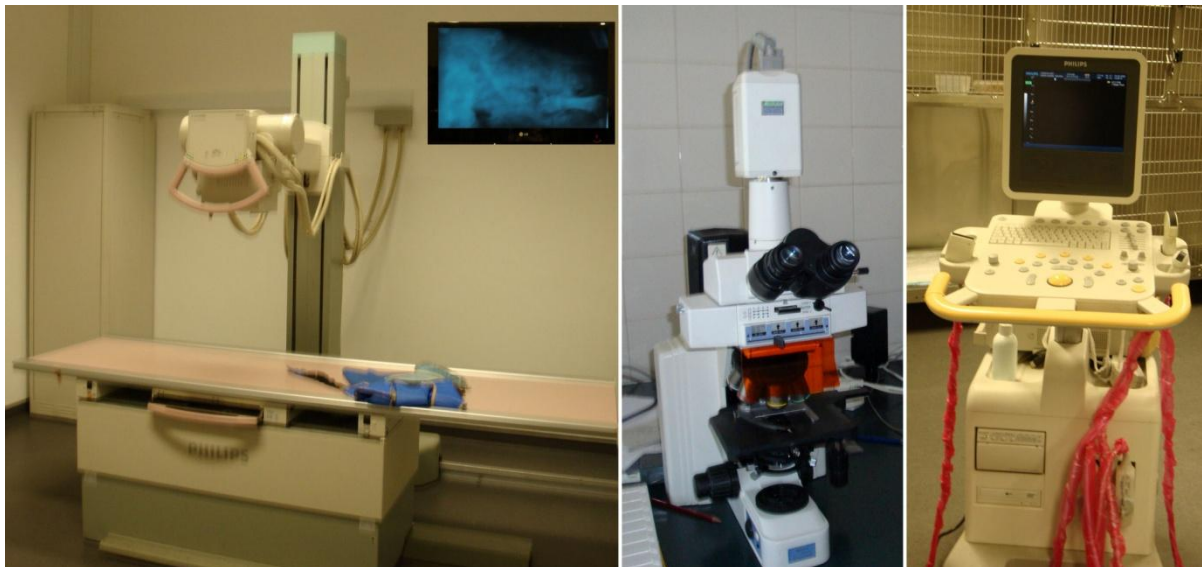
37 In fact, only the worldwide use of technological development applied to research and learn in  
38 all professional fields, according international regulatory directories, can create a sustainable  
39 biodiversity for human and animal lives. Enlarged by the global climatic alterations, the  
40 prediction, control and surveillance of widespread emergent, epizootic and zoonotic diseases  
41 assumes a special relevance for animal production, veterinary and medicine fields.

42

43 **2. Evolution and historical perspective**

44 In the last two decades of XX century, an improvement of electronic and digital devices use  
45 for medical and animal production purposes associated to the networks and computation  
46 development were observed in veterinary field. The ICTs were progressively applied in  
47 research and teaching veterinary schools and medicine institutes or in enterprises related with  
48 these areas. Technological advances, relative decreasing cost of equipments, similitude with

1 human medicine and socioeconomic countries development were some responsible factors for  
2 this evolution and their democratization in all veterinary and animal production fields.  
3 Initially, the majority of these medical and instrumental materials including biosensors was,  
4 usually, only physically connected to a screen or to other similar output signal viewer for  
5 human observation and interpretation. For example, before these two decades, the data of  
6 animal and human imaging diagnoses was stored in analogical devices for learning and  
7 teacher purposes. However, the videodisc technology, in 1980s/1990s, stimulated and was  
8 stimulated by the development of several interactive healthcare centers like the Consortium of  
9 North American Veterinary Interactive New Concept Education (CONVINCE) [83].  
10 Around 1990s, personal computers (PCs) were democratized, at least in developed countries,  
11 induced by technological advances. The veterinary learning and research was widely  
12 enhanced in some fields, using bioinformatics and statistical programs stored in diskette or  
13 local drive, but without significant network connections (intra or internet). In 1991, the first  
14 3W online site takes place in the Conseil Européen pour la Recherche Nucléaire (CERN) by  
15 Timothy John Berners-Lee (see <http://www.w3.org/WWW/>).  
16 These facts originated a revolution in veterinary education, similar to other scientific fields,  
17 opening the door to Internet 1 and Web 1. Initially, workstations, PCs and laptops were used  
18 to access websites primarily text-based by narrowband and dial-up liaisons [28].  
19 In 1994, an experimental free veterinary Web service, the NetVet WebSite  
20 (<http://netvet.wustl.edu/vet.htm>), was launched in order to collect veterinary medicine and  
21 animal welfare resources [11]. The contents were not only text based but integrated veterinary  
22 imagery [19], like the described in figure 1. This service had a Web based and open access  
23 pioneer importance's, in late 1990s, due to the connection to several local veterinary and  
24 governmental institutions (universities and government departments), mainly in United States  
25 of America (US), Canada, Australia and European countries.



28  
29 **Figure 1.** Veterinary Diagnostic Imaging. The democratization, in last years, of electronic and digital devices  
30 conceiving digital or digitalized imagery for radiologic (left image), histologic (central image) and echographic  
31 (right image) diagnoses in veterinary centers, improved animal care, teacher and learning contents, and  
32 decreased costs. Imaging diagnosis was one of the more important pioneer ICTs use in Medicine and Veterinary  
33 fields. Many telemedicine services image-based, like echocardiography analysis, were firstly launched according  
34 the Web development feasibility.

1 In this last decade (1990s), hard books or journals and Compact Disc Read - Only Memory  
2 (CD-ROM) were the main vehicles for technical and scientific information, preserving  
3 copyrights and royalties. Additionally, in the 1994, the Web was also used by commercial  
4 librarians in order to buy and share health sciences resources, located on the Internet [35],  
5 essentially for scholar and research purposes.

6 During these years, the veterinary literature and some biomedical software were initially  
7 stored in limited digital support distribution like diskettes, CD-ROMs and DVD-ROMs  
8 (Digital Video Discs) for data and multimedia uses in classrooms or at home [80].  
9 Progressively, an enhancement to intra and internet server storages was observed, including  
10 scientific database search. Every day, more paid or free publications are disseminated,  
11 indexed to several scientific and scholar databases, and accessible from the Web.

12 In fact, the improvement of computing power associated to a quickly evolution of the  
13 broadband, greater than 512 KB/s, and structural development toward internet 2  
14 (<http://www.internet2.edu/>) were achieved. A complex network using various tools to create,  
15 aggregate and share dynamic contents was observed throughout these last ten years, and in  
16 2004 the term Web 2.0 was created to refer an emerging social environment, more interactive  
17 than the simple Web browser navigation [21].

18 In 1986, the National Library of Medicine (NLM) of US began the online public domain  
19 Visible Human Project® ([http://www.nlm.nih.gov/research/visible/visible\\_human.html](http://www.nlm.nih.gov/research/visible/visible_human.html)) in  
20 order to create three-dimensional representations of the normal male and female human  
21 bodies. In 1991, the University of Colorado acquired these pixel-based data [1]. Today, the  
22 University of Colorado Health Sciences Center (<http://www.uchsc.edu/sm/chs/>) is a important  
23 provider of this technology [7].

24 More recently, in biology field, the online Cell Centered Database (CCDB;  
25 <http://donor.ucsd.edu/CCDB/enter.shtml>) was created in 2002 with the objective to store high  
26 resolution 3D light and electron microscopic images of cells and subcellular structures [57].  
27 Other example, is the Digital Atlas of Video Education project (DAVE;  
28 <http://daveproject.org/index.cfm>) that as an online human medicine gastrointestinal  
29 endoscopy video atlas [13].

30 From 1993 to 1996, the Computer-aided Learning in Veterinary Education (CLIVE), a  
31 consortium of six United Kingdom (UK) veterinary schools and 14 international Associate  
32 Member Schools was funded by the UK Higher Education Funding Councils' Teaching and  
33 Learning Technology Programme [23]. This consortium makes Computer-Assisted Learning  
34 (CAL) packages, e.g. biomedical veterinary and templates & multimedia contents, for  
35 veterinary undergraduate and postgraduate education, in all subjects of the veterinary  
36 curriculum (see <http://www.clive.ed.ac.uk>).

37 Around 2000s, some establishments like the Australian Murdoch University stimulated  
38 veterinary curriculums advancement in diagnostic imaging veterinary subject. In this  
39 University, ICTs enhancements for the correspondent curricular unit contemplated the use of  
40 digital interactive images with the Apple's QuickTime Virtual Reality software, interactive  
41 self-tests, submission of assignments, asynchronous discussion of cases and electronic  
42 whiteboard [74]. Virtual microscopes, based in slide digitisation and software images viewers,  
43 were also introduced in histology and pathology disciplines of medical courses: firstly, in  
44 2000, with intranet-based access at US University of Iowa [39], followed by Leeds University  
45 (UK), in 2005, and by Murdoch University [47].

46 However, electronic learning, also called e-learning or elearning, have different  
47 interpretations, and the mobility learning is only a consequence. To clarify this concept, four  
48 e-learning dimensions were proposed by Phillips [72]: student - student (individual or social)  
49 interactions; student – (present or absent) teacher interactions; student – (traditional or digital

1 based) resource interactions; and student – (passive or interactive) computer interactions. To  
2 illustrate these dimensions concepts 3 examples were reported [73]:

- 3 1. **Simulation learning object** - the student is likely to work individually and interacts  
4 with the computer in presence of teacher and with workbooks;
- 5 2. **Corporate training CD-ROM** - the student work individually and is likely to interacts  
6 with the computer with digital resources and without the teacher;
- 7 3. **Open (university) online course** - students are likely to work socially through  
8 networks with passive (only navigation) Web page use.

9 These online courses or contents were commonly based in the Blackboard Learning System  
10 (WebCT; <http://www.webct.com/>) or the open source Modular Object-Oriented Dynamic  
11 Learning Environment (Moodle; <http://moodle.org/>) based platform.

12 More recently, the **interactive approach** can be done by simulation technology for teaching  
13 and assessment. This technology was progressively increased and is leaderships in health  
14 learn and training in human medicine. The contact limitation of students with real case-patient  
15 based, quickly health care delivery changes, patient safety improvement, medical errors  
16 minimization, and the out-door demonstration of professional competence and clinical safety  
17 assessment contributed for this development [77].

18 At parallel time, the physical and wireless connections of electronic sensors with computers  
19 were improved for learn, research [9], public health, animal health cares and commercial  
20 purposes. From the last few years, due to automatic identification and data capture, the Radio-  
21 Frequency Identification (RFID) technology associated to miniaturized tags can provides  
22 continuous or periodical evaluations of biomedical parameters according to the biosensor  
23 features. Several training in clinical and chirurgical rooms for animals can take place using  
24 these tags [48]. When associated with simulation technology and social networks can  
25 represent the onset of Multi-User Virtual Environments (MUVE) interfaces, like the predicted  
26 by Dede [24]. In large animals, several studies contributed to food animal chain traceability  
27 using these technologies [34,78,84].

28 Other than RFID technology, the image capture by remote sensing's (satellite images)  
29 associated with geographic information systems (GISs) are also used for epidemiological  
30 surveillance to predict, monitor and control epizootic diseases in large scale of the globe [76].  
31 Many biological agents of diseases need intermediate hosts or vectors to complete their life  
32 cycle and/or infection, respectively. This assumes a greater importance for geographic  
33 dissemination of enzootic and zoonotic diseases when climatic changes are considered.

34 Some dangers and constraints of ICTs use in veterinary education were reported, mainly in  
35 research and learning aspects. Short [80] consider that small research and academic centers  
36 may do not have capacity to compete with large academic centers or some veterinary  
37 practices are difficult to replicate by computers. There are also some evidences of poor digital  
38 results due to insufficient technologies development or to different student's impact using  
39 new technologies [47]. For example, a novel user interface device was tested by Treanor et al.  
40 [86] in order to approach efficiency between optical and virtual microscope for learning  
41 purposes.

42 However, the major problem in all education fields is the internet accessibility and use in  
43 different countries, and the digital and linguistic literacy background human population's  
44 differences. An interaction and parallel actions face-to-face with different ICTs  
45 methodologies for researchers and students [48] may be the response for persons, academic  
46 centers and countries with different backgrounds, socioeconomic developments and future  
47 aspirations, e.g., the dynamic integration of e-learning, blended learning and, more recently,

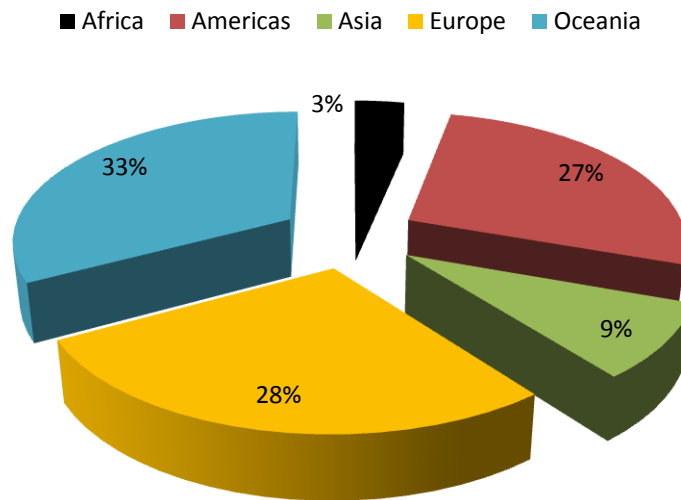
1 the t-learning (interactivity associated to the universal digital decoders). The governmental  
 2 and international cooperation to regulate a global education may be the higher challenge for  
 3 our civilization. The veterinary education may be only one area, but is the bridge between  
 4 animal and human health, and to contribute for animal food production and environment  
 5 preservation.

6  
 7 **3. The veterinary higher education and training in the global information society**

8 **3.1. The importance of Internet use and digital literacy levels in education: a premise!**

9 The Internet access and use are premises for info-inclusion. According the International  
 10 Telecommunication Union (see <http://www.itu.int/>), the worldwide Internet user penetration  
 11 estimative rate was around 20.2% in 2007. However, 55.4% of users were located in  
 12 developed regions and 12.8% in developing countries [44]. The figure 2 reports each  
 13 continent contribution. Major user contributors are located in developed countries of Oceania,  
 14 American and European continents. This represents a greater handicap for developing  
 15 countries due to a lack of infrastructures.

16



A total of 1 395 768 300 users in the world was estimated .

17

18 **Figure 2.** Estimation of Internet users (%) from each continent, in 2007. Data collected from ICT Eye 2007  
 19 database (<http://www.itu.int/ITU-D/ICTEYE/>), on 2009 Mars [43, 45].

20

21 Small computer devices and universal mobile telecommunications system (UMTS) creating a  
 22 global mobile network system, at low acquisition and operational costs, are a feasible solution  
 23 in these countries for health education purposes [60]. This visionary education project was  
 24 intended by the non-profit association One Laptop per Child (OLPC; <http://laptop.org/>). This  
 25 association was founded by Professor Nicholas Negroponte of Massachusetts Institute of  
 26 Technology and a core of Media Lab veterans in 2005. Before, in 1980, Negroponte also  
 27 conceived the MIT Media Lab (<http://www.media.mit.edu>) in Cambridge, Massachusetts  
 28 [17], a leading research center in several areas improving, for example, de RFID technology.  
 29 The Web accessibility is a necessary but not sufficient condition to profit and create  
 30 educational tools, and improve the productivity. The digital literacy levels of society are the  
 31 central point to innovate in a competitive world. In fact, the definition provided by Martin  
 32 [57] elicit this aspect: “*Digital literacy is the awareness, attitude and ability of individuals to*

1 *appropriately use digital tools and facilities to identify, access, manage, integrate, evaluate,*  
 2 *analyse and synthesise digital resources, construct new knowledge, create media expressions,*  
 3 *and communicate with others in the context of specific life situations, in order to enable*  
 4 *constructive social action; and to reflect upon this process”* (pp. 135-136).

5 According to Haasis et al. [36], the ICT sector accounted for almost 50% of the European  
 6 Union (EU) total productivity upturn, during 2007, with more than 250 million of regular  
 7 Europeans Internet users. In fact, the Education Audiovisual and Culture Executive Agency  
 8 (EACEA) was created by European Commission by Decision 2005/56/EC, after the Decision  
 9 No 2318/2003/EC, in order to reinforce and promote lifelong learning, including essential  
 10 ICTs programs (<http://eacea.ec.europa.eu/index.htm>).

11 Initially, the MINERVA project was created in 2002 by EU, in order to access and preserve  
 12 the cultural and scientific digitalised documentation. In 2006, this project was enlarged to  
 13 MINERVA EC with the objective to improve cultural, scientific and scholarly online network  
 14 contents (<http://www.minervaeurope.org>) with a probable highly impact in future European  
 15 education.

16 In fact, any profession or private and public services can't apply successfully ICTs without  
 17 adequate digital literacy levels of their citizens. This is an important problem in developed  
 18 and developing regions. However, some dilemmas in ICTs use persists in society and in the  
 19 relationships between citizens and governments, like the described by Dutton and Peltu [28]  
 20 in table 1.

21 **Table 1.** Policy dilemmas in employing ICTs to governments. Modified from Dutton and Peltu [28].

| Main tension                     | Description  |
|----------------------------------|--|
| <b>Privacy–trust</b>             | The Internet's open design that has enabled the user creativity fuelling Web innovations can also undermine trust, safety and security by opening virtual doors to malicious intrusions into citizens' and government's cyberspaces.   |
| <b>Control–freedom</b>           | Government needs to maintain some controls to ensure its special position in society is not abused. However, such controls are often seen as intrusive restrictions by citizens.   |
| <b>Central–devolved power</b>    | Fear of a loss of control could lead government to present itself as a monolith in cyberspace, rather than allowing each public service to create its own presence within a flexible framework. But devolution could lead to poor coordination, inefficiency and patchy results. |
| <b>Experimentation–stability</b> | Risk-taking is central to the 'Google generation' spirit, but government must be cautious about the impact of its experiments on citizens and  |
| <b>Speed–deliberation</b>        | Instantaneous communication from almost anywhere at any time is accelerating many democratic and government processes in beneficial ways. However, speed can undermine policy making that requires more studied deliberation.  |
| <b>Efficiency–surveillance</b>   | ICTs can improve administrative coordination and public services by sharing access to information. But 'Big Brother' fears about abuses of that access can block such sharing.   |
| <b>Protective–enabling</b>       | Legislation and regulation aiming to protect against e-network abuses also needs to support as much Web innovation as possible, although that could create new threats as well as delivering new benefits.   |
| <b>Promotion–overhyping</b>      | Many citizens need to be encouraged to go online, but over-exaggeration of the benefits of new ICTs and underplaying of the continuing value of other channels can lead to resistance to some innovations.   |

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 24  
 25 One of the more interesting interactive social Web services should be the health care provider  
 26 due to the quality life enhancement importance. Usually, the Internet health access is used for  
 27 some interactive services like self-help (information) activities, order health products and

1 interact with Web doctor or other health professional, with or without previously consultation.  
2 However, the online patient-provider communication appear remain low.  
3 In US, 6% of Internet users, that had used this service, were estimated in 2001 [6], 7% in  
4 2003 and 10% in 2005 [8]. Baker et al. [6] reported a survey that only 39.7% of US self-  
5 reported Internet users, aged 21+, used the Web for advice or information about human health  
6 or health care in 2001.  
7 In Germany, this percentage was 27.3% for respondent aged 16+ [42]. Four year after, in  
8 2005, they had grown to 53.1%, but the sample considered people aged between 15 and 80  
9 years [27]. Other survey in seven European countries, reported by Andreassen et al. [4],  
10 showed that the health-related use of the Internet, in 2005, was most frequent in the Northern  
11 countries. These researchers related 62% health use in Denmark, 59% in Norway, 49% in  
12 Germany, 30% in Portugal and 23% in Greece. However, an Internet health use increase  
13 between 2005 and 2007 in some of these countries (Denmark: 9.8%; Norway - 6.6%;  
14 Germany – 12.2%; Portugal – 9.1%; Greece – 8.9%) were reporter by Kummervold et al.  
15 [50].  
16 In EU, the Strategic Project Management Tool-Kit for Creating Digital Literacy Initiatives  
17 (SPreaD; <http://www.spread-digital-literacy.eu/>) was developed between March 2007 and  
18 October 2008 with the aim to evaluate and determine policies digital literacy initiatives,  
19 especially in learning subject, at regional, national or European level [36]. The early results of  
20 this work showed that in some regions the use of ICT is relatively low, especially among  
21 adults, and in other regions the digital literacy is widely developed. This discrepancy is  
22 important for curricula aspects in order to determine the use of basic and progressive ICTs or  
23 innovative technologies such as Web 2.0 or mobile learning. However, a large and active  
24 network, with several institutions of same fields, to achieve projects sustainability and reach  
25 the target groups is necessary [65].  
26 We empathize that the ICTs application in a specific professional task need a personal  
27 technical skill development and competence. However, usually, non-specialized competences  
28 in informatics fields should be sufficient for a feasible and profitable professional use, other  
29 than the technological advances and general interactivity networks knowledge.

30

### 31 **3.2. The organization of scientific and technical veterinary literature in the Web**

32 The electronic digital computers use for publications and online scientific databases literature  
33 search had their origin in the second half of XX century. In 1967, the Ohio College Library  
34 Center (OCLC) developed a regional computerized system to share resources and reduce  
35 academic costs, in US. Actually, this system serves more than 71,000 libraries of all scientific  
36 fields in 113 countries and territories around the world (see <http://www.oclc.org/>). Some years  
37 before that, the NLM website ([www.nlm.nih.gov/](http://www.nlm.nih.gov/)) had explored the use of computers for  
38 these purposes and the Medical Literature Analysis and Retrieval System (MEDLARS) was  
39 created and evolved to a online system [54,63].

40 Now, the NLM in collaboration with the National Institutes of Health (NIH;  
41 <http://www.nih.gov>) and National Resource for Molecular Biology Information (NCBI) play,  
42 also, an important role for free online biomedical information database search, like the  
43 PubMed services (<http://www.nih.gov/about/index.html>). This database includes over 18  
44 million citations from Medical Literature Analysis and Retrieval System Online (MEDLINE -  
45 a largest component of PubMed) and other bioscience articles back to 1948. MEDLINE “is  
46 the National Library of Medicine's premier bibliographic database covering the fields of  
47 medicine, nursing, dentistry, veterinary medicine, the health care system, and the preclinical  
48 sciences” [66]. In NCBI site, other major databases, including the Nucleotide and Protein  
49 Sequences, Protein Structures, Complete Genomes and Taxonomy, can be freely accessed.



1 However, other than governmental databases plays an important role. Today, fifty years after  
2 birth (1960), the Institute for Scientific Information (ISI), now called the ISI Web of  
3 Knowledge, is the more important commercial online scientific and academic database  
4 platform (<http://www.webofknowledge.com/>), in part due to academic recognition of they  
5 scientific journals evaluation. This database service covers all scientific fields and is provided,  
6 after 2008, by the Thomson Reuters enterprise (<http://www.thomsonreuters.com>). The Web of  
7 Science, ISI Proceeding, Biological Biosis, Biosis, Previews and Zoological Record (Biosis)  
8 are the mains databases incorporating biological, agricultural, and animal and human health  
9 fields hosted in the ISI Web of Knowledge. The access to full charged articles is, in part,  
10 provided by commercial libraries like ScienceDirect (<http://www.sciencedirect.com/>;  
11 Elsevier, The Netherlands).

12 Other important science-based but non-profit organization, in these fields, is the CABI  
13 (<http://www.cabi.org>). They story began in early XX century for agricultural development in  
14 British Commonwealth. Now, they also develop several animal production and health fields  
15 with digital resources from 1970s.

16 An effort for online free or very low cost access, in developing countries, to these paid  
17 scientific journals was performed, in 2000, by the United Nations, using the World Health  
18 Organization and Food and Agriculture Organization with the support of Cornell and Yale  
19 university libraries [68]. In fact, the Health InterNetwork Access to Research Initiative  
20 (HINARI; was launched in 2002 with 1500 journals from 6 major publishers (Blackwell,  
21 Elsevier Science, the Harcourt Worldwide STM Group, Wolters Kluwer International Health  
22 & Science, Springer Verlag and John Wiley). According to HINARI site  
23 (<http://www.who.int/hinari/>), in 2009, more than 6200 journal titles were available for health  
24 institutions in 108 countries. Like this, but in the food, agriculture and environmental sciences  
25 fields, the Access to Global Online Research in Agriculture project (AGORA) was launched  
26 in 2003. Actually, 1278 journals in institutions of 107 countries are provided by AGORA  
27 (<http://www.aginternetwork.org/>).

28 In 2006, the public-private consortium Online Access to Research in the Environment  
29 (OARE) was created. The main aim was to improve the quality and effectiveness of  
30 environmental science research, education and training, also in developing countries and is  
31 coordinated by United Nations Environment Programme (UNEP), Yale University and  
32 science and technology publishers of several fields (<http://www.oaresciences.org>).

33 The Bioline International (<http://www.bioline.org.br>), a not-for-profit electronic publishing,  
34 was launched in 1993 by Brazil and UK (now in association with the University of Toronto)  
35 and was pioneer in open access to peer-reviewed bioscience journals of developing countries  
36 in the world. Nigeria, Brazil and Iran are the most active countries.

37 The Scientific Electronic Library Online (SciELO; <http://www.scielo.org/>) is a corporative  
38 model, birth in 1997/1998 Brazil, for free full text peer-review articles of online scientific  
39 journal of developing countries with specially incidence in Latin America and Caribbean  
40 regions [87]. Their main aim is to prepare, store, disseminate and evaluate scientific literature  
41 in electronic format regarding a homogeneous methodology using different languages, with  
42 Spanish and Portuguese prevalence. This project was initially developed by the Fundação de  
43 Amparo à Pesquisa do Estado de São Paulo (FAPESP; <http://www.fapesp.br/>) with the Latin  
44 American and Caribbean Center on Health Sciences Information partnerships (BIREME;  
45 <http://www.bireme.br>). At Mars 2009, they had 612 listed journals from several fields  
46 including, agronomy, zootechny, veterinary and medicine. Other main initiatives and database  
47 for Ibero-American countries (Spanish, Portuguese and English languages) are the e-  
48 Revist@s, founded in 2004-2006 (<http://www.erevistas.csic.es/>), Redalyc (2002-;  
49 <http://redalyc.uaemex.mx/>) and Latindex (1997-; <http://www.latindex.unam.mx/>).

1 For more specific African and Asian continents, other scholar and scientific online libraries  
2 were developed. The African Journals OnLine (AJOL) “provides free hosting for over 340  
3 peer-reviewed journals from 25 African countries. These journals cover the full range of  
4 academic disciplines with strong sections on health, education, agriculture, science and  
5 technology, the environment, and arts and culture” (<http://www.ajol.info/>). This project was  
6 initiated in 1998 by the International Network for the Availability of Scientific Publication  
7 (INASP). After two re-launches (2000 and 2004), he was moved to South Africa, in 2005, as a  
8 non-profit-company. In 2004, INASP (<http://www.inasp.info>) was registered as UK charity  
9 after they creation, in 1992, by the International Council for Science (ICSU;  
10 <http://www.icsu.org/index.php>). They are present in Asian, African and also American  
11 developing countries with the objective to stimulate the local development as communication,  
12 knowledge and networks fields.

13 Due, in part, to a quickly increase of researches and results, publication accessibility  
14 technology and their impact in world development, the open access feasible initiatives (an old  
15 concept) surged in last years.

16 The Budapest Open Access Initiative (BOAI; <http://www.soros.org/openaccess/read.shtml>)  
17 was convened by the philanthropic Open Society Institute (OSI; <http://www.soros.org/>) in  
18 December, 2001. The main aim was to make an international effort with the collaboration of  
19 several institutions in order to available free, from internet, research and a scholar articles in  
20 all academic fields. Other major initiatives to improve the open access were performed with  
21 the Berlin Declaration on Open Access 2003 (<http://oa.mpg.de/>), Bethesda Statement on Open  
22 Access Publishing 2003 (<http://www.earlham.edu/~peters/fos/bethesda.htm>) and more  
23 recently, the Brisbane Declaration on Open Access 2008 for Australian citizens (Brisbane  
24 Declaration, 2008).

25 In agreement with this philosophy, the Directory of Open Access Journals (DOAJ) was  
26 launched in May 2003, with 300 journals, in order to increase the visibility and easily use of  
27 open access peer-review scientific and scholarly multi-language journals. The DOAJ is hosted  
28 and partially funded by Lund University Libraries (<http://www.lub.lu.se/>). Other important  
29 financial resources were or are supplied by the Open Society Institute, Scholarly Publishing  
30 and Academic Resources Coalition (SPAR; <http://www.arl.org/sparc/>), SPARC Europe;  
31 <http://www.sparceurope.org/>) and BIBSAM program of the National Library of Sweden  
32 (<http://www.kb.se/>). On March 24<sup>th</sup>, 2009, a total of 3940 journals, with 1410 journals  
33 searchable at article level and 264 695 articles were included in the DOAJ, according to the  
34 home page information. The animal sciences section had, at this time, 57 journals, and that  
35 includes the veterinary field.

36 The PubMed Central (<http://www.pubmedcentral.nih.gov/>) is a NIH / NCBI / NLM free  
37 digital archive of biomedical and life sciences journal literature. The PubMed Central was  
38 initiated the public service in February 2000 with publications of the Molecular Biology of  
39 the Cell journal (American Society for Cell Biology) and PNAS: Proceedings of the National  
40 Academy of Sciences. Now, several hundred other journals (see list at  
41 [http://publicaccess.nih.gov/submit\\_process\\_journals.htm](http://publicaccess.nih.gov/submit_process_journals.htm)) were directly deposit here. They  
42 entire final published version are provided by NIH-funded research, in agreement with NIH  
43 [14].

44 In fact, in 2008, the open access mandate for the NIH [22] began and required that all  
45 researches, funded with public (NIH) support, put they per-review accepted manuscripts in an  
46 open access form. This mandate directly deposits the manuscripts in an open access  
47 repository: the PubMed Central. If these articles were previously published in peer-review  
48 journals, embargo permission up to 12 months can be occur. This mandate required  
49 compliance with copyright law. NIH retains the right to act in accordance with the NIH policy

1 (<http://publicaccess.nih.gov/>), even if all the other rights are transferred to the publisher [85].  
 2 However, some problems related with US law exclusive rights of copyrights remained  
 3 polemic, at least until the first semester 2009.  
 4 An UK PubMed Central (<http://ukpmc.ac.uk/>) was also launched in 2007. This free digital  
 5 archive of biomedical and life sciences journal literature, aimed to mirror the PubMed Central  
 6 [55]. Similar procedure was adopted by PubMed Central Canada (University of Ottawa;  
 7 <http://uottawa.ca.libguides.com/>).  
 8 Simultaneousness to PubMed Central, BioMed Central launched the BMC series of journals  
 9 in May 2000 [40]. This is an UK-based for-profit scientific BioMed Central  
 10 (<http://www.biomedcentral.com>) that publish Science, Technology and Medicine (open  
 11 access) field's journals with a new model, fee by the authors or their institutions, and they  
 12 retains the copyright. In 2009, 60 journals were published by BioMed Central and the impact  
 13 factor and other citation-based Scientific Metrics were an important point for them.  
 14 Other major open access non-profit, the Public Library of Science (PloS; <http://www.plos.org>)  
 15 fully began in 2003 and published, in 2009, a few life and health science journals (PLoS One  
 16 PLoS Biology, PLoS Medicine, PLoS Computational Biology, PLoS Genetics, PLoS  
 17 Pathogens and PLoS Neglected Tropical Diseases). However, they also charges a publication  
 18 fee to be paid by the author or some else (e.g. academic and research institutions).  
 19 The Directory of Open Access Repositories (OpenDOAR; <http://www.opendoar.org/>) is an  
 20 important directory of academic, local institutional and subject-based repositories. It was  
 21 initially developed, in 2006, by the Universities of Lund and Nottingham. In April 8 2009,  
 22 according to they site, OpenDOAR had 1375 repositories managed by the University of  
 23 Nottingham under SHERPA umbrella (<http://www.sherpa.ac.uk>). Institutional or  
 24 departmental repositories (Institutional) represented 80% (1106), cross-institutional subject  
 25 repository (Disciplinary) 13% (81), aggregating data from several subsidiary repositories  
 26 (Aggregating) 4% (60) and governmental repository data (Governmental) 2% (8) of total [69].  
 27 The Open Archives Initiative (OIA; <http://www.openarchives.org/>) was developed after 1998,  
 28 in order to promote interoperability standards for digital contents dissemination. The 2<sup>nd</sup>  
 29 version of Open Archives Initiative Protocol for Metadata Harvesting (OAI-PMH) is actually  
 30 used to carry these open access repositories and journal literature, e.g. for eScholarship,  
 31 eLearning, and eScience purposes.  
 32 In fact, an important aspect of ICTs use, for publication purpose, is the literature accessibility.  
 33 The success of this accessibility is confirmed by Pelzer and William [71] that determinate  
 34 only 6.38% of gray or fugitive literature in twelve core veterinary journals analysis in OCLC  
 35 during 2000. However, Jack W. Snyder (Associate Director of the NLM between August 25,  
 36 2002 and March 2, 2007), considered up to 20% of veterinary gray literature, because it is not  
 37 indexed in Pubmed or other information services [61]. A primary consensus definition was  
 38 obtained at the Third International Conference on Grey Literature assumed in Luxembourg in  
 39 1997 [30]: "*Grey literature is that which is produced by government, academies, business,*  
 40 *and industries, both in print and electronic formats, but which is not controlled by*  
 41 *commercial publishing interests and where publishing is not the primary activity of the*  
 42 *organization*" (p. 179).  
 43 Actually, the full access to publish in internet tends to decrease this literature type. In fact  
 44 several free science-specific search engines on the Internet were arising, and thousands of  
 45 governmental, scientific and scholar accurate web pages were indexed, other than peer-review  
 46 articles. A System for Information on Grey Literature (SIGLE) was created in 1980 aiming  
 47 the availability of this literature type in European Community. In 2005, the SIGLE database  
 48 was transferred to an online open access, on a DSpace platform (<http://www.dspace.org/>) and  
 49 renamed the OpenSIGLE that as accessed at <http://opensigle.inist.fr/>.

1 The Science.gov project was launched in December 2002 by US government science  
 2 organizations and the last version (5.0) emerged in 2008. In April 2009, this search engine  
 3 provided government science information from over 38 databases, involving more than 1950  
 4 agencies and 200 million of Web page, via one query, at <http://www.science.gov/index.html>.  
 5 The Office of Scientific and Technical Information (OSTI; <http://www.osti.gov/>) also hosted  
 6 the WorldWideScience.org, a global science gateway involving over 40 databases and portals  
 7 from more than 50 countries, launched in June 2007 and accessible from  
 8 <http://worldwidescience.org/indextext.html>.  
 9 Other free, but privates, scholar and scientific search engines are widespread used. Major  
 10 Websites are represented by the Google Scholar (<http://scholar.google.com/>) and Scirus  
 11 (<http://www.scirus.com/>).  
 12 However, the emergence of online closed community forums and specialized restricted  
 13 discussion groups of researchers or veterinarian can create new types of gray literature. These  
 14 new implications and grey literature definitions are largely updated in (annual) International  
 15 Conferences on Grey Literature (see <http://www.textrelease.com> and  
 16 <http://www.greynet.org/>).

17

18 **3.3. Constraints and challenges of veterinary e-learning development**

19 The veterinary students and veterinary nurse and technician students' attitudes toward the  
 20 "classical" (CD-ROMs based) CALs and their enhancement, regarding international animal-  
 21 health issues programs, play a fundamental role to future tendencies on professional field. A  
 22 study, performed by French et al. [32], evidenced that the students' at some veterinary  
 23 European and US schools, in 2004, considered informative the interactive CD-ROMs fact-  
 24 based or case-based with parasite database/encyclopaedia and International Animal Health  
 25 (scenarios from Chile, South Africa and Mexico) contents, respectively. However, any  
 26 changing students' attitudes toward the international veterinary medicine, in this study, were  
 27 demonstrated.

28 With Internet technological advances, veterinarian, veterinary schools or colleges [80] and  
 29 other institutions are expanding their interactivity with Web sites. In fact, according to Dede  
 30 [24], in the next years, three complementary technologies interfaces should be present in  
 31 learning and specific education forms: the classical "world to the desktop" interface, the  
 32 interfaces for "ubiquitous computing" and ("Alice-in-Wonderland") Multi-User Virtual  
 33 Environments (MUVE) interfaces (see table 2).

34

35 **Table 2.** Main (predictive) categories for ICTs development in general education and training. Data collected  
 36 from Dede [24].

| Interfaces   | Description / Use   |
|--|---|
| <b>"World to the desktop"</b>                                | The computer desktop providing access to distant experts and archives, enabling collaborations, mentoring relationships and virtual communities-of-practice.<br>The Internet 2 is an important tool for these purposes.                                 |
| <b>"Ubiquitous computing"</b>                                | Portable wireless devices infuse virtual resources as we move through the real world. The early stages of "augmented reality" interfaces are characterized by research on the role of "smart objects" and "intelligent contexts" in learning and doing. |
| <b>"Alice-in-Wonderland" multi-user virtual environments</b> | Participants' avatars interact with computer-based agents and digital artifacts in virtual contexts.<br>The initial stages of studies on shared virtual environments are characterized by advances in Internet games and work in virtual reality.       |

37

1 The interactive veterinary software (using local disks or Web 2) can be applied to case-based  
2 scenarios, like heard health management, epidemiological and clinical studies in all animal  
3 species or in many other fields. These resources have great advantages for learning and  
4 practices training: student's can take decisions face to a normal, urgent or emergent scenario;  
5 no live animals are required, the simulations can be infinitively repeated in any time and any  
6 local with different decisions.

7 The CALs packages can be also authored by students under teacher's staff supervision and  
8 can provide a complementation or alternative to classical didactic teaching with more  
9 performances examinations results [25].

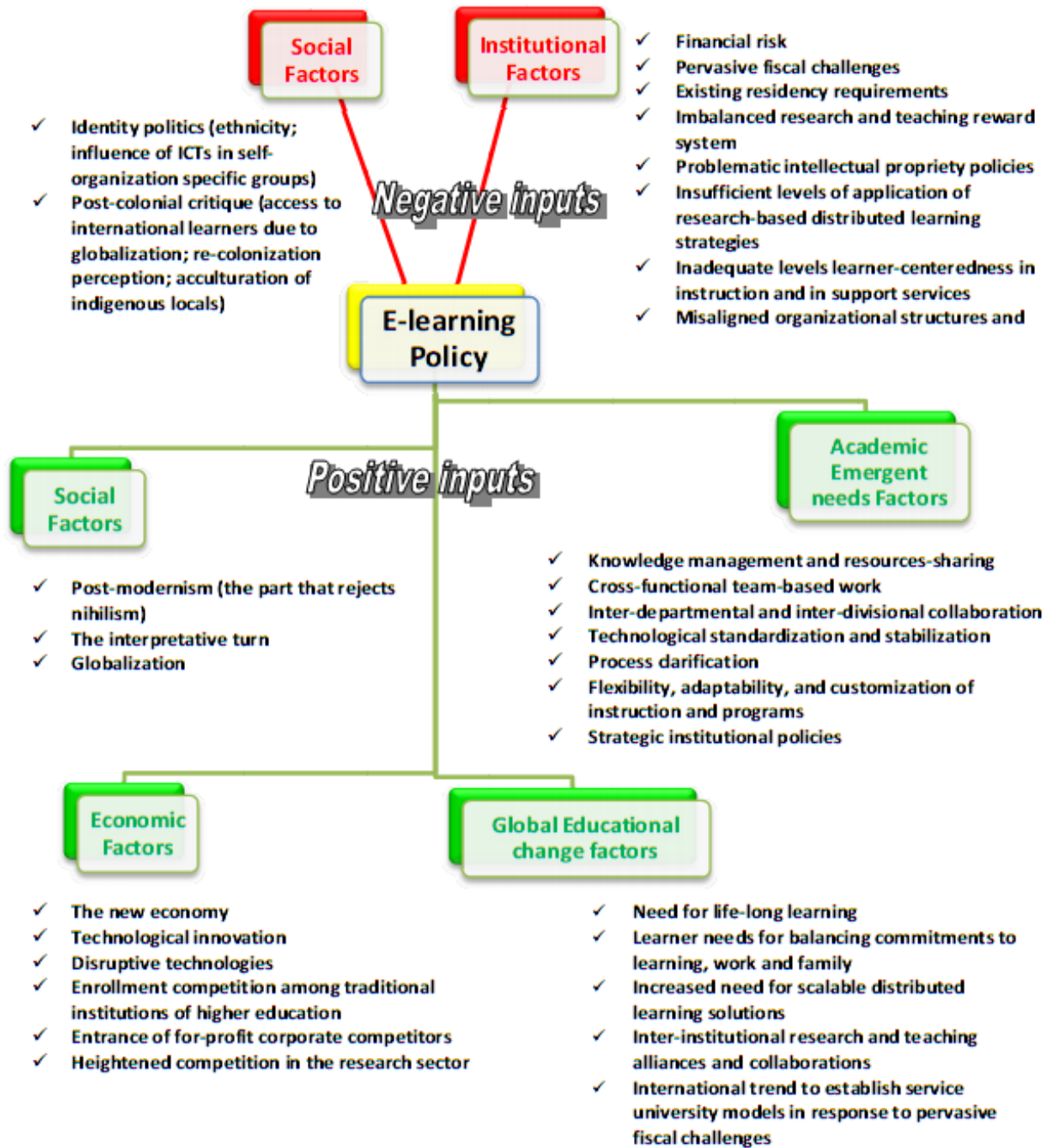
10 Obviously, the use of CALs can't definitively eliminates the animal use for teacher and  
11 researcher proposes, but can training students before they use in the classroom or at veterinary  
12 hospital. This represents a rational management criterion with a responsible and limited  
13 animal use. Consequently, the human ethical behaviour and animal welfare are improved.

14 Some problems could be finding in these CALs, like the partial capacity to develop and  
15 present several probable or improbable scenarios according to the student decisions.  
16 Consequently, the full simulation of a dynamic environment, like in real situations may be not  
17 possible.

18 Many CALs created in last decade were based in CD-ROMs storage. However, the quickly  
19 interactive and platform technological advances, and the medicine veterinary developments  
20 implicate hardware upgrades and software updates for these programs or/and the creation of  
21 expensive new programs. For the generality of teachers is not possible to create or modify  
22 CALs for curriculums adaptation due to they limited occupational time and skills in this  
23 authoring informatics field [25]. To resolve these situations, the RECAL project was founded,  
24 at the University of Edinburgh, in order to create a sustainable learning objects approach  
25 (<http://www.recal.mvm.ed.ac.uk>). The process was well described by Dewhurst et al. [25]: the  
26 existing CALs are disaggregated into smaller-sized learning independent objects that can be  
27 easily reorganized and used by teachers or other personal for pedagogical adaptation. A  
28 multitude of veterinary learning scenarios can be created with this methodology. In other  
29 hand, students can be stimulated to contribute for the CALs reorganization in other to  
30 stimulate their cognition development.

31 Moreover, the CALs can interact, reinforce or accomplish the mobility students' programs for  
32 learning and training purposes. In agreement to the referred above, Erasmus, Erasmus  
33 Mundus (2009-2013), Leonardo da Vinci and VETNNET (Veterinary European Transnational  
34 Network for Nursing Education and Training) have a great importance in Europe (see  
35 [http://ec.europa.eu/education/index\\_en.htm](http://ec.europa.eu/education/index_en.htm); <http://eacea.ec.europa.eu/index.htm>; and  
36 <http://www.vetnnet.com/>). An integrated higher education network system is in development  
37 in Europe. A European Credit Transfer System (ECTS) was created in order to improve the  
38 student's mobility with accreditation [31]. Consequently to Bologna process, mostly  
39 veterinary courses opted for a veterinary Masters degree.

40 However, like in traditional mobility programs students, the linguistics differences between  
41 the first and second languages have an important role to literacy skills and competences [18].  
42 In the digital world, that problem persists, but the use of social networking sites associated  
43 with mobile digital devices is an important tool to improve cross-linguistic effectiveness [62].  
44 Other than linguistics differences, important positive or negative potential social and  
45 economical forces can influence the implementation of scalable and sustainable e-learning  
46 academic or scholarship systems. Using social field theories, a general e-learning policy field  
47 for the academy was proposed by Parchoma [70]. This author considers two principal  
48 potential restraining and four driving vector forces in order to implement a feasible e-learning  
49 system (fig. 3).



**Figure 3.** Mains potential positive and negative factors to affect e-learning strategies in academic systems. Modified from Parchoma [70].

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 5 In the University of Copenhagen (Denmark), an e-learning platform with access at  
 6 <https://absalon.ku.dk> was recently developed with the LIFE (IT Learning Center;  
 7 <http://www.itlc.life.ku.dk/>) in order to provide basic clinical skills like small animal's physical  
 8 examination and basic surgery. The on-line teaching, (face-to-face) video-cases and video-  
 9 performances were applied in veterinary curriculum. The teachers refers that can dispense  
 10 more time for a closely and individual student approach and practical classes and make sure,  
 11 that the students are both theoretically and practically prepared [52].

1 Similar to related by Ketelhut and Niemi [48] in animal laboratory, ubiquitous computing  
2 technology could be also adapted to small and large animals using RFID tags and biosensors  
3 for standard operating procedure, in leaning and research activities. Biosensors attached to the  
4 animal, for electrocardiogram, blood pressure, and oxygenation / anaesthetic control could  
5 monitor the animal motion (fig. 4). This information, other than the pre- intra- and  
6 postoperative real-time monitor situation, can be processed and anywhere disseminated by the  
7 Web into desktop and portable computers, and other wireless digital devices.

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11 **Figure 4.** Veterinary operating room for small animals (proposed scenario). Other than biosensor tags to monitor  
12 animal anaesthesia during the chirurgical act (central and right up screens), all of this information, including the  
13 digital video records (left up screen), can be stored in an intranet server (right server and router) and used for  
14 research and learning purposes. Edited or real-time information can be used in classroom, university campus  
15 (wireless zone) or at house.

16

17 Today, in human medicine, almost all modern medical cares relies on electronic medical  
18 devices [5]. These electronic and digital integrative devices allowed the creation of operating  
19 rooms like the innovative CIMIT project (<http://www.cimit.org/>) at Massachusetts General  
20 Hospital [53]. For learn and training purpose, they use several simulator types: passive  
21 simulators in order to imitate real cases as clinical and chirurgical aspects, and based in  
22 anatomic 3-D representations of body parts; active or interactive computer-enhanced  
23 mannequins also reproducing normal and pathophysiologic functions; and finally the newly  
24 MUVE. Both last two simulator type can be employed for examination, surgical, and

1 endoscopic procedures training and assessment, and evaluated both individual and  
 2 collaborative skills [77].  
 3 However, researches for learning and training procedures are need in order to effective and  
 4 validate the simulation-based cases, similar to the described by Lammers et al. [51] for  
 5 emergency medicine in humans. In fact, the (US) Society for Academic Emergency Medicine  
 6 (<http://www.saem.org/>) stimulated a consensus group to discuss some trends for the use of  
 7 simulation in order to develop expertise clinicians: a) teaching strategies optimizations; b)  
 8 evaluation behaviour of experts in simulation environment; c) high-speed clinician's  
 9 competence improvement; d) simulation use to manage performance problems, and; e)  
 10 bridging the gap between simulation and real works [10].

11 The MUVE can provide an interactive environment, on shared virtual environments, with  
 12 immediate feedback from interface devices to one or several operators (students or  
 13 professionals) with different backgrounds, like veterinarian, veterinary nurses, technicians and  
 14 managers or scientists and teachers. A software for a "Virtual Veterinary Emergency Room"  
 15 in order to present dynamics and medical scenarios and simulate real situations was  
 16 developed and proposed by Schlachter [79] in they Master of Science Thesis.

17 In 2001, a 3D immersive virtual world project - the AET Zone - was launched by the  
 18 Instructional Technology program at (US) Appalachian State University  
 19 (<http://www.lesn.appstate.edu/aetz/default.htm>) in order to create a "social constructivist  
 20 learning online campus". A new denominated *Presence Pedagogy* (P2) scheme was created  
 21 (table 3), based in social aspects of teaching and learning, building a true online environment  
 22 community of practice [16].

23  
 24 **Table 3.** Tenets of Presence Pedagogy (P2) for education virtual environments. Adapted from Bronack et al.  
 25 [16].

| P2 Principle   | P2 Practice  |
|--|--|
| <b>Ask questions and correct misconceptions</b>        | <ul style="list-style-type: none"> <li>• Interactions with faculty and students</li> <li>• Both peers and "experts" serve as catalysts to promote explicit learning</li> </ul>   |
| <b>Stimulate background knowledge and expertise</b>    | <ul style="list-style-type: none"> <li>• Activities that require sharing of personal an professional experiences</li> <li>• Recognition of background knowledge and expertise</li> <li>• Acknowledgement of and engagement in a Community of Practice</li> <li>• Cross-course, cross-cohort, cross-program, and cross department interactions</li> </ul> |
| <b>Capitalize on the presence of others</b>            | <ul style="list-style-type: none"> <li>• Activities that promote cross -cohort, -program, and –department interaction</li> <li>• Naming convention to identify student cohort, program, and nationality</li> <li>• Shared faculty responsibility of supporting students across programs</li> </ul>   |
| <b>Facilitate interactions and encourage community</b> | <ul style="list-style-type: none"> <li>• Team teaching</li> <li>• Naming convention to identify faculty and staff</li> <li>• Interdisciplinary lesson/unit planning</li> <li>• Activities to capitalize on notion of Distributed Cognition</li> <li>• Interdisciplinary Community of Practice</li> <li>• Text and voice tools for interaction</li> </ul> |
| <b>Support distributed cognition</b>                   | <ul style="list-style-type: none"> <li>• Multiple manifestations of Presence</li> <li>• Creation of open space in which students and faculty of various backgrounds and levels of expertise can interact.</li> <li>• Expertise shared by students and faculty</li> </ul>   |



|  |   |
|--|---|
| <b>Share tools and resources</b>                             | <ul style="list-style-type: none"> <li>• Students and faculty identification of relevant tools and resources</li> <li>• Availability of tools and resources in shared space open to all students</li> </ul>   |
| <b>Encourage exploration and discovery</b>                   | <ul style="list-style-type: none"> <li>• Engagement in authentic activity</li> <li>• Creation of open, resource rich environment</li> <li>• Activities that promote exploration of shared tools and knowledge base</li> </ul>   |
| <b>Delineate context and goals</b>                           | <ul style="list-style-type: none"> <li>• Authentic, action-oriented projects and assignments that have personal meaning and relevance for the students</li> <li>• Visual cues to facilitate organization of and accessibility to tools and resources</li> <li>• Use of avatars and metaphors</li> </ul> |
| <b>Foster reflective practice</b>                            | <ul style="list-style-type: none"> <li>• Periodic assignments requiring ongoing, guided reflection</li> <li>• The "So What?" question</li> <li>• Frequent public presentations</li> </ul>   |
| <b>Utilize technology to achieve and disseminate results</b> | <ul style="list-style-type: none"> <li>• Activities that require utilization of in-world tools and resources</li> <li>• Persistent presence of a living curriculum</li> <li>• Multiple presentations across programs, cohorts, courses, and sections</li> </ul>   |

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The researches in this, or similar, pedagogical forms will be very important, because can provide experience for human and animal health applications. Some healthcare professional education examples or experimental projects were reported by Hansen [37]: a) the Advanced Learning and Immersive Virtual Environment (ALIVE) at the University of Southern Queensland (USQ - Australia) stimulate the development of learning contents, using the non-proprietary open AliveX3D program (<http://www.alivex3d.org/default.htm>); b) the Second Health Project (<http://secondhealth.wordpress.com/>), based in a detailed hospital comes to life in Second life virtual world (<http://secondlife.com/>), and developed by the Imperial College in London and the National Physical Lab in UK, and; c) the experiential 3-D learning tool PULSE!! project (<http://www.sp.tamucc.edu/pulse/home.asp>), funded by the Office of Naval Research and US Congress, aimed learn clinical skills and increase diagnostic thought processes. In fact, a new paradigm for local, regional and global health interdisciplinary approaches are building due to migrations of people, animals, and germs thought globalization in last two decades. Social or socio-professional networks and professional representations in virtual worlds can contribute to this new worldwide socio-economic statement. For example, in US, the University of Wisconsin interact between schools of human medicine and public health, nursing, pharmacy or veterinary medicine present in their Madison campus and a division of international studies on major world regions coordinated by an International Health Advisory Committee. Main outcome measures policies and global health core competencies are listed in table 4. The final goal of this Center for Global Health is the creation of an effective and functional Certificate in Global Health as a synergic profit for several countries partnerships [38]. However, several social, economic and legal constrains referred above for worldwide e-learning should be attenuating these health global projects. The international lawful homogeneity will be profitable in order to widespread veterinary and medicine elearning systems.

1 **Table 4.** Outcomes measures and core competences for a Global Health Center in University of Wisconsin  
 2 (UW). Modified from Haq et al. [38].

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|---|--|--|
| <b>Categories and criteria for outcome measures</b> | <b>Educational outcomes</b>                    | <ul style="list-style-type: none"> <li>• Number and location of global health courses and field experiences</li> <li>• Number and types of participants</li> <li>• Graduates with a Certificate in Global Health</li> <li>• Development of a global health track in the UW Masters of Public Health program</li> <li>• Course evaluations by students, UW–Madison faculty, and international partner</li> </ul>  |
|   | <b>Research outcomes</b>                       | <ul style="list-style-type: none"> <li>• Number and type of global health research projects</li> <li>• Number and types of participants (on campus and abroad)</li> <li>• Research funding</li> <li>• Research findings, outcomes, and health impacts</li> <li>• Publications and presentations</li> </ul>   |
|   | <b>Partnerships service projects exchanges</b> | <ul style="list-style-type: none"> <li>• Number and locations of international partnerships</li> <li>• Feedback and evaluation from international partners</li> <li>• Number and categories of affiliates</li> <li>• Feedback from affiliates regarding the value of the UW–Madison Center for Global Health</li> <li>• Number and type of service projects and exchanges</li> <li>• Funding generated to support global health efforts</li> <li>• Health outcomes for target populations (before and after interventions)</li> </ul>  |
|   | <b>Administrative outcomes</b>                 | <ul style="list-style-type: none"> <li>• Assessment of program and activities by participating units</li> <li>• Feedback from steering committee members</li> <li>• Financial self-sufficiency</li> </ul>  |
| <b>Core Competencies</b>                            | <b>Knowledge</b>                               | <ul style="list-style-type: none"> <li>• Describe complex determinants of health</li> <li>• Recognize human–animal–environment interactions that affect health</li> <li>• Access evidence-based information on the epidemiology of health and disease</li> <li>• Identify population-based strategies for health promotion and disease prevention</li> <li>• Describe the organization and basic features of health care systems</li> <li>• Describe the roles and functions of nongovernmental organizations in health care</li> <li>• Discuss diverse belief systems as they relate to health</li> <li>• Explain the relationship between health and human rights</li> <li>• Adhere to ethical practice regardless of context</li> </ul> |
|   | <b>Communications kills</b>                    | <ul style="list-style-type: none"> <li>• Use active listening and communicate effectively in diverse settings</li> <li>• Collaborate and form interdisciplinary partnerships to promote health</li> <li>• Demonstrate humility and engage in effective conflict resolution</li> </ul>  |
|   | <b>Attitudes</b>                               | <ul style="list-style-type: none"> <li>• Promote equity and access to health care for all</li> <li>• Appreciate diversity and promote health across cultures and health belief systems</li> <li>• Demonstrate professionalism regardless of context</li> <li>• Appreciate contributions of various disciplines to health</li> <li>• Exhibit flexibility and accommodation to a variety of circumstances</li> <li>• Value sustainable solutions to promote health now and for generations to follow</li> </ul>  |

### 3.4. Animal production, veterinary epidemiology and diseases control

In animal production and for commercial purpose, the individual electronic identification of livestock animal has special importance in the chain food traceability due to food safety and public health controls. This identification type also can provide a simple and quickly system to identify each live animal during zootecnic or sanitary and clinical veterinary interventions. In US, the National Animal Identification System (<http://animalid.aphis.usda.gov/nais/>) recommends the utilization of International Standards Organization devices compliant (ISO 11784 and 11785 norms; <http://www.iso.org>) in cows and other food animals. These ear tags low frequency electronic identification device are relatively inexpensive, but read-only [84].

In EU, similar procedures were developed, and an effort to RFID use in several species was made in order to prevent epizootic diseases and food safety in livestock animals or public health problems in dogs. Additionally, the ISO 3166 norm defines the Country Code for each Member State. The Regulation (EC) No 21/2004, EU Commission Decision 2006/968/CE of 15 December 2006, Regulation (EC) No 1560/2007 and Regulation (EC) No 933/2008 provide conditions and laws in order to disseminate RFID use in small ruminants, until 2010/2012. The possibility to use electronic identification in bovines was described in the COM/2005/0009 Report [29] and in equines born after 2009, in Council Directive 90/426 of 26 June. In swine's, some studies for electronic ear tags and subcutaneous transponders comparison were performed [34]. In pets, the Regulation (EC) N° 998/2003 of 26 May normalizes the subcutaneous transponders.

The TRAdE Control and Expert System (TRACES) was developed by European Union in order to make more efficient the tracing monitor of animal movements and animal products [49], enhancing the existing systems, with electronic online data transfer capacity.

Simultaneously, a rapid ability to examine spatial patterns and processes based in informatics tools was provided by geographic information systems (GIS) and applied to epidemiology researches and diseases surveillance [64]. Geo-references can be done by Cartesian coordinates, administrative tools and other spatial references. In agreement with other variables, like diseases diffusion (incidence and prevalence), factors and geographic risks can be studied or evaluated [67]. They use can provide a spatial (3D) - temporal relation observation and wireless mobile devices can play an important role. The management approach, cost-effective actions and prediction of epizootic diseases can be possible with these technologies [12]. Shared with world network systems, monitor or research programs can take place, like the initiated by the "Integrated Consortium on Ticks and Tick-borne Diseases" (ICTTD-3; European Union funded) on tick-borne diseases with the involvement of 29 countries (<http://wwwold.ictd.nl/>), and initially with India, Iraq, Iran, China, Central Asia, Bangladesh, and Turkey [2]. In intensive animal production, GISs can be also used in emergency management and nutrient waste disposal [20].

In other hand, the tele-epidemiology consist in the combination between data of earth-orbiting satellites (e.g. vegetation indexes, winds and cloud masses, wave height, rivers and reservoirs water levels) and the collected from animals clinical data [56]. Remote sensing (study of objects without any direct contact, through image capture) and GISs can be used for epidemiological surveillance to predict, monitor and control epizootic diseases in large scale of the globe [76]. An example was the application of remote sensing satellite imaging in East Africa to predict Rift Valley fever in cattle. FAO's Special Programme Emergency Prevention System for Transboundary Animal and Plant Pests and Diseases (EMPRES) in agreement with appropriate early warning systems for specific diseases can be effective to predict and control they emergence and dissemination [58].

1 GIS-driven integrated real-time surveillance pilot (open technology) systems, with online  
 2 surveillance, are other important tools for animal and human diseases [81]. An Australian  
 3 example for agronomic field is the Australian Soil Resource Information System (ASRIS)  
 4 located at <http://www.csiro.au/services/ASRIS.html>. In human medicine, the online  
 5 geographic information system (EpiScanGIS), launched in Germany 2006,  
 6 (<http://episcangis.hygiene.uni-wuerzburg.de/>) was open source based and monitor the  
 7 meningococcal disease [75].

8 All of these technologies applied in real situations are or will be important tools for e-learning  
 9 and research purposes, integrated control centers, universities and other research institutions.

10  
 11 **3.5. General future trends of ICT involving veterinary fields**

12 The future of ICTs in veterinary or any other professional field will be closely related with the  
 13 Internet and Web changes and their interactions with the global society, international  
 14 regulations and laws.

15 The Pew Internet & American Life Project (<http://www.pewinternet.org/>), which studied the  
 16 social impact of the internet in US and the world, accomplished an online survey about the  
 17 future prediction of the Internet at 2020s. The deep interaction between mobility, personal,  
 18 professional or social factors and the global network was predicted (table 5). However, is  
 19 probable that legal and ethical forms of ICTs uses will remain a sensible subject associated to  
 20 a forgiveness or social tolerance lower development [3].

21  
 22 **Table 5.** Expected future of social, political, and economic impact of the Internet around 2020s in the world.  
 23 Data collected from Anderson and Rainie [3].  
 24

**Expectation in Internet development \***

**The mobile computer device** will be the dominant internet connection tool due to universal international standards existence.

**User interfaces will offer advanced talk, touch, and typing options.** A thought-based interface-neural networks offering mind-controlled human-computer interaction will be also possible. The current architecture of Internet will be improved, but not changed to a new global network. Separated Internet spaces will be created or refined by corporations and governments in order to maintain network control regarding the crime, piracy, terror and other security problems and their consequences naturally improved by an open system.

**The division between personal and professional time will tend to disappear** due to hyperconnected future with more freedom, flexibility and life enhancements. The challenging of family and social life and increasing of individual stress can be a damaging consequence.

**Virtual worlds, mirror worlds and augmented reality** will be enhanced with smartphones and GPS, social networks and other technical improvements, including genetic engineering. New opportunities for conferencing, teaching and 3-D modelling can be offer. Adverse effects like increase in violence and obesity, in network dependence (more potential for addiction or overload) and new extensions of the digital divide.

**The transparency caused by network processes** will increase with the internet and web development, but that will not necessarily yield more personal integrity, social tolerance, or forgiveness. Sharing information can profit people and organizations or can turn them more vulnerable. Personal privacy and reputation concept will be enhanced with ubiquitous information dissemination. Multiple or none digital identities can be created.

**Control of intellectual property and they policy regulating** will still inaccurate for some situations, in part due to non global agreement. New economic models are need in regard to the service or merchandise commerce and classified as paid content, free offer or exchange.

\* The online survey was performed by *Pew Internet & American Life Project* from 1,196 expert participants (578 leading Internet activists, builders and commentators and 618 stakeholders) and is not a randomly study of a representative world sample.

1 Some of these predictions are dependent of Web 3 evolution: Probably, the semantic  
2 (meaning) organizational information will take place using metadata - data about data, e.g. a  
3 giant database [33] and an intelligent Web who computers can intercommunicate performing,  
4 independently, news tasks.

5 The Web-based interactivity works of veterinary students, teachers and veterinarian appears  
6 to will play a fundamental role for veterinary education. The mobility provided by small  
7 wireless devises, as a tool, tends to increase this interactivity. A multitude of CALs and  
8 MUVES can be created according pedagogical purposes.

9 Consequently, scientific and technical literature accessibility, socio-professional networks  
10 development, including in research fields and the shared work will be increased at low cost.  
11 This global competition and sharing can contribute for a rational human and natural world's  
12 resources.

13 The prediction, management and control of epizootic and zoonotic diseases can be achieved  
14 in large regions of the earth.

15 Environmental and genotypic animal production optimization, including food safety will be  
16 controlled with more accuracy.

17 Global or international regulatory laws like the professional accreditation and intellectual and  
18 proprietary patents uses should be improved. The academic or professional e-learning systems  
19 should be articulated according to their local and/or global objectives.

20 A deep pro-active involvement of developing countries in these knowledge networks will be  
21 essential for a sustainable worldwide development [82]. Global consortiums' for specific  
22 widespread sanitary or educational problems, under international authorities, like the United  
23 Nations, provided by multilateral governments or by international corporations should be  
24 improved.

25

#### 26 **4. Conclusion**

27 The quickly technological digital devices, Web and wireless communications developments  
28 created non-imaginable implications in animal, veterinary and medicine fields in the last  
29 decade (2000s). The use of technological advances, forced by the global commerce (products  
30 and services), easy and low cost communications and professional competition, including in  
31 learn and research fields, was effortlessly adopted in these areas, mainly, in developed  
32 countries.

33 The digital scholar, scientific, academic and government literature access about animal  
34 production, veterinary and human medicine was quickly growing and worldwide expanded.  
35 Moreover, a full open access increasing to this literature type with reasonable copyrights  
36 preservation was verified.

37 The CALs and RECALs are, presently, important tools in other to stimulate veterinarian,  
38 students and teachers learning. Simulation case-based and MUVES projects are in an  
39 embryonic stage in the veterinary area and should be developed.

40 E-learnings systems, regarding the veterinary curricula and new pedagogical forms were  
41 idealised and tested. Their feasible applications to distance high health and animal production  
42 education are in continuous development. Nevertheless, their accreditation and legal  
43 regulatory implications need a worldwide expression.

44 The globalisation, people, animal and products migrations, intensification of long-term  
45 unsustainable animal production created new global challenges for animal and public health.  
46 Other than national regulatory laws to implant electronic animal identification and food chain  
47 rastreability, these new realities involves newest assessment forms to predict and control  
48 diseases applied to a large scale.

1 However, serious problems of ICTs worldwide use persist. In developing countries without  
2 technological structures, a great effort was made in order to provide wireless Web access with  
3 low cost computers for information accessibility, but effectiveness results should be needed.  
4 The developed countries aimed to improve the digital literacy for their citizens, and several  
5 projects were implanted.  
6 Finally, specific regulatory laws in sustainable animal production, veterinary and medicine  
7 fields for interactive local and global actions, using ICTs, are one of the more important  
8 challenges. In XXI century, the (health) information access will not be the principal barrier.  
9 The capacity to understand the consequences of their utilisation should be a critical point for  
10 individual persons and human societies, e.g. their digital literacy levels and their innovation  
11 aptitude to solve old and new problems.

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