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Librarians and Health Workers: Partnering and Collaborating to Support Free Access to Health Information in Nigeria

Abstract

The well-being of individuals and communities depend on accessibility to accurate health information. A recent study shows the many communities in some regions of Nigeria lack accessibility to this information. Building on the success of partnerships between librarians and health care workers in the delivery of health information in other parts of the world, the Nigerian situation could be greatly improved through a number of strategies, as suggested.

Keywords

Health information, Librarians, Health workers, Nigeria, Collaboration.

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Abstract

The well-being of individuals and communities depend on accessibility to accurate health information. A recent study shows the many communities in some regions of Nigeria lack accessibility to this information. Building on the success of partnerships between librarians and health care workers in the delivery of health information in other parts of the world, the Nigerian situation could be greatly improved through a number of strategies, as suggested.

Keywords: Health information, Librarians, Health workers, Nigeria, Collaboration.

Introduction

The benefits of equitable access to health information cannot be overemphasised. Access to the right kind of information at the right time and in the right format could avert an epidemic, even a pandemic, and save many lives. Health, according to World Health Organisation is "a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity."¹ Good health consists of low morbidity and low mortality rates and a reasonable or a high quality of life. Good health enables people to lead individual, social and economically productive lives and contributes to the socio-economic growth and development of communities and nations. Health information in this context is defined as "information on a continuum between health education and health promotion."² Health information is the published and unpublished knowledge of all aspects of health and health care. Inadequate access to health information and diminished awareness of preventive health measures, little knowledge of, or incorrect information on, medical conditions and treatments not only have negative results for individuals but also for their communities and for the larger society.

Public access to health information is vital in the developing world, especially in those regions of Africa where societies grapple with daunting health problems. In this part of the world, even at governmental levels, information is often be-

fuddled and unreliable. A great many communities in Africa, and throughout Nigeria as a case in point, lack access to reliable and timely health information; community members are often unable to make informed health decisions for themselves or for those under their care. In light of this problem, delegates at the 10th Conference of the Association of Health information and Libraries for Africa (AHILA) resolved that through their country chapters their members will work closely with their public libraries and other stakeholders to ensure that health information is adequately disseminated to rural populations.³

In Nigeria, primary health care centres have a mission to provide health information to their communities. In addition to access to information, their services, free of charge, cover maternity care, immunisation, treatment of general common sicknesses such as malaria, measles, chicken pox, cholera and diarrhoea. Although the centres provide these services, the majority of Nigerians lack access to adequate health information.⁴ Given newly realized imperatives for health care centres and public libraries to work together in the delivery of health care information, now a global phenomenon, there are new opportunities and new urgencies for these to occur, especially in Nigeria.

The Survey and Study

The survey and resulting analysis consist of the following five objectives: 1) to investigate the forms of partnerships and collaborations of information access existing between the public libraries and primary health centres in Nigeria; 2) to identify formats of health information and health information resources provided to communities at the grassroots level by librarians and health workers in key areas of the country; 3) to identify potential areas for partnerships and collaborations in these regions; 4) to identify barriers to these initiatives; 5) to offer recommendations based on this study.

It is hoped that this study will help policy makers, healthcare providers, health workers, information providers, library and information professionals, and other stakeholders in the healthcare sector, embrace greater partnerships and collaborative relationships that achieve broader free access to health information. It is also hoped that this study will promote improved health care information and library partnerships in Nigeria and elsewhere.

The Broad Context

Unequal and inequitable information distribution and variation in the quality of healthcare information have plagued the African continent for decades. In Nigeria, this has led to two unequal information cultures – as the “information rich” and “information poor.” This disparity is found particularly between the rural and the urban health care consumers. According to Umashanie Reddy from the University of Calgary in Canada, this information inequity has created ethical dilemmas for librarians, namely, how to achieve “fairness in information justice” by helping persons achieve equitable skills in accessing information through customized services.⁵ Thankfully, some progress has been made on this front in some parts of the world.⁶ The Global Healthcare Information Network launched an international campaign, “Healthcare Information for All by 2015.” On its website it is stated, “We live in the information age, but the reality is that tens of thousands of people die every day, often for the simple reason that the parent or health worker lacks the information and knowledge they need to save them.”⁷

Public libraries, as noted by Susan Murray, a librarian responsible for Consumer Health Information Services at the Toronto Public Library, are often the first point of access for people seeking health information.⁸ While this may be true in developed nations of the world, it is generally not the case in Nigeria and in most other developing nations of Africa. With the majority of the population in the rural areas functionally illiterate, perhaps the sole – certainly the most common – source of health information is the government operated primary health care centres.

The problem is not a lack of information; the AFRO Library and Documentation Centre revealed that there is a wealth of untapped information in books, reports and studies from international development agencies, nongovernmental organizations and local institutions. The problem is access.⁹ It is here that public libraries have conspicuous roles to play in ensuring free and equitable access to health information. In fact, such a role is recognized in the substantive report by the American Association for the Advancement of Science, “Consumer Health Information Service in Public Libraries.”¹⁰ By partnering with healthcare professionals, librarians can meet this expectation through a variety of means, including outreach programmes, exhibitions of one kind or another, by sponsoring public discussions on health issues, and by using mass media to increase awareness of health information resources. Some impressive results in various parts of the world have been reported.¹¹ The Asia Pacific Association of the Medical Journal Editors similarly recommends such partnerships,¹² but much remains to be done, especially in Africa and most certainly in Nigeria. Given this context, a group of librarians at the University of Lagos, Nigeria, developed a survey on these issues.

Survey Methodology

A survey research design and purposive sampling method was adopted for this study. In Nigeria, the Southwestern zone is made up of six states namely: Lagos, Ekiti, Ogun, Ondo, Osun and Oyo. For the purpose of this study, three states, Lagos, Oyo and Ogun, were selected. Public libraries in these regions were selected

because each coexists geographically with a primary health centre. The survey population consisted of 23 librarians and 10 health workers in their respective institutions. A questionnaire constituted the main instrument for data collection. To complement the questionnaire, interviews were also conducted with key administrative officers in the two types of institutions. The data collected were presented as descriptive statistical analyses using percentages and frequency counts.

Findings and Discussion

The major findings of the survey are presented below.

Table 1. Existence of partnership and collaboration between public libraries and primary health centres aimed at supporting free access to health information.

Relationship	Existing	Not Existing	No Response
Partnership	-	33 (100%)	-
Collaboration	-	31 (93.9%)	2 (6.1%)

From the table above, all the respondents from both the public libraries and primary health centres indicated that there exists no partnership relationship between the two types of institutions. While 31 respondents comprising 93.9% of the entire population of the study indicated the absence of any collaborative initiative, 2 respondents, being 6.1% did not respond to this question.

These results show that neither a partnership nor a collaborative relationship aimed at supporting free access to health information presently exists between public libraries and primary health centres in these regions of Nigeria. However, responses from key officers from health centres and libraries revealed an awareness of the fact that such relationships would tremendously enhance health information access for the populations served.

Table 2 (on the next page) reveals that the most commonly available format of health information provided by the libraries are books and oral information (all the libraries reported this). On

the side of the primary health centres, they all claimed to be providing health information in posters, handbills and oral information formats. Eight out of the 23 libraries studied (34.8% of the total libraries) claimed they provide health information in pamphlet formats while 7 primary health centres out of the 10 studied attested to this. The study also revealed that 12 libraries out of the 23 under study have posters on health issues pasted within their libraries while 14 have internet access which users also utilize in searching for needed information. All the other formats of health information resources were not provided by the libraries nor by the primary health centres surveyed.

From the interviews conducted, the librarians stated that handbills on health issues are rarely sent to the libraries since their administrators believe it is the responsibility of the hospitals and primary health centres to distribute them. On the issue of electronic resources such as e-books, online journals and databases, librarians reported that insufficient funding has made it impossible for libraries to acquire or subscribe to these materials. Managers of the primary health care centres involved in the study stated that it is the responsibility of the libraries to acquire such materials and not that of the centre. It was encouraging to have librarians report their willingness to deliver health information to the community beyond the walls of the library.

In short, a great number of communities in various regions of Nigeria do not have access to adequate health care information. There is an obvious need for such information and there exists considerable potential for library-health centre partnership and collaboration.

Potential Areas for Partnership and Collaboration

The study identified the following potential areas of partnership and collaboration: partnering in the organization of outreach programmes; partnering in advertising and in broadcasting via mass media; collaborating on research dealing with health matters; collaborating on exhibits and public discussions on health issues; jointly developing health programmes; sharing



Table 2. Formats of health information provided by the two types of institutions

S/No	Health Information Formats	Public Libraries		Primary Health Centres		Total
		Available	Not Available	Available	Not Available	
1	Handbills	-	23 (69.7%)	10 (30.3%)	-	33(100%)
2	Pamphlets	8 (24.2%)	15 (45.5%)	7 (21.2%)	3 (9.1%)	33(100%)
3	Posters	12(36.4%)	11(33.3%)	10(30.3%)	-	33(100%)
4	Printed Books	23(69.7%)	-	-	10(30.3%)	33(100%)
5	Electronic Books	-	23(69.7%)	-	10(30.3%)	33(100%)
6	Audio Books	-	23(69.7%)	-	10(30.3%)	33(100%)
7	Printed Journals	2 (6.0%)	21(63.7%)	-	10(30.3%)	33(100%)
8	Electronic Journals	-	23(69.7%)	-	10(30.3%)	33(100%)
9	Electronic Database	-	23(69.7%)	-	10(30.3%)	33(100%)
10	Internet Access	14(42.4%)	9(27.3%)	-	10(30.3%)	33(100%)
11	Video Tapes	-	23(69.7%)	-	10(30.3%)	33(100%)
12	Audio Tapes	-	23(69.7%)	-	10(30.3%)	33(100%)
13	Photographs	-	23(69.7%)	8 (24.3%)	2 (6.0%)	33(100%)
14	Oral Information	23(69.7%)	-	10(30.3%)	-	33(100%)

in the distribution of health information resources like handbills and pamphlets.

Given these potentials for collaboration, however, there exist certain barriers that need to be recognised. These include: professional differences among health care providers and librarians; inadequate funding; absence of policy guiding such relationships; lack of support from the senior administrators and managers – both of libraries and health centres; sustainability of collaborative efforts (in funding and personnel); inadequate numbers of staff; fear of leadership conflicts from the library side or from the health centre side; belief that information delivery is the responsibility of some other government agency; the fact that adequate health information resources are simply not available; a lack of facilities and equipment needed such as computers and PowerPoint projection, videos and screening, and other basic infrastructure services.

Recommendations

Given the rather grim situation in Nigeria, there are some recommendations that could be considered to improve access to health information.

- 1. Outreach programmes:** Health workers could collaborate with librarians in organizing outreach programmes on health issues since they are professionally trained in information repackaging and dissemination. This will help in providing adequate health information in the format best understood. As a side benefit to libraries, communities would become more enlightened on the purpose and resources of their public libraries.
- 2. Repackaging of information:** This could take the form of repackaging some printed information as audio or audio-visual resources (by transferring health information already in analogue format into digital format) or by translating information written in a foreign language into a local language.

3. **Collaborative research on health matters:** Health workers could start collaborating with librarians on research projects related to health issues, especially pertaining to information seeking behaviours. Librarians are particularly suited for this kind of research given their professional focus on knowledge and information.
4. **Exhibitions:** Jointly sponsor exhibitions and discussions on health issues and use of the facilities of centres and libraries as gathering places in the community.
5. **Government support:** Government agencies managing or funding the primary health care centres and the public libraries should encourage partnerships among these entities. This could take the form of promoting joint packaging of information, broadcasting public service announcements, advertising through local media, and mandating policy development that supports such collaborations.
6. **Staff training and provision of facilities:** Administrators of both libraries and primary health centres could initiate training programmes that help staff become familiar with, comfortably in, and committed to, this type of collaboration.

Conclusion

The findings of this study show the absence of partnership and collaborative relationships between librarians and health workers in providing free access to health information. It also revealed a lack of access to adequate, up-to-date, relevant health related information in Nigeria. A majority of the people at the community level have access only to oral health information through primary health care centres. This situation calls for meaningful partnerships and collaborations between librarians and health workers. As these two bodies champion the type of partnerships outlined in the recommendations, positive and impressive results could be achieved by way of improved access to health information, improved health of individuals, and an enhanced well-being of Nigeria's communities overall.

Endnotes

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