

The Perception of Librarians As Sources Of Information On HIV/AIDS By Hotel Patrons In Katsina Metropolis, Nigeria

by
Sani, A. Fari and Joseph, O. Omoniyi

Abstract

HIV/AIDS is a global pandemic and the scourge is spreading very fast in Nigeria. The federal, states, local governments, individuals, groups and international agencies have been intensifying efforts at providing medical remedies against HIV/AIDS infection. Some societies have also mounted awareness campaigns to educate the populace about the disease and how to relate with the people living with the virus. This paper investigated the perception of librarians as sources of information on HIV/AIDS by hotel patrons in Katsina metropolis. Questionnaire was used to obtain information from 750 respondents in 10 selected hotels in the study area. The study showed that respondents had low perception of librarians as sources of information on HIV/AIDS. To enhance their status in among the people, the paper recommended eight areas in which librarians could participate to disseminate information about HIV/AIDS menace in the society.

Introduction

The history of HIV/AIDS and the trends in its spread across the globe as reported in literature are suggestive of the fact that it is one plague that is destined to continue its spread undauntedly if a holistic approach is not taken to stop its advance. The disease has already attracted to itself a popular myth that HIV/AIDS is an unstoppable epidemic. While its presence has posed one of the greatest challenges to mankind, it is a well – acknowledged fact that accepting the view that HIV/AIDS is invincible is to accept self-defeat. Indeed, librarians possess abilities, talents and capabilities that can be appropriately deployed to either stamp out HIV/AIDS scourge from our society or facilitate the slowdown in the spread of the disease and ease the suffering of the infected.

Background to the Study

HIV refers to Human Immunodeficiency Virus, while AIDS is Acquired Immune Deficiency Syndrome. HIV/AIDS is a disease that was first mentioned when the first case of the disease was reportedly seen (Mwahe and Burnard, 1992). The disease was first diagnosed in Nigeria in 1986 and its incidence has been progressive with a lot of devastating effects on the country and its inhabitants (Adara, 2002). Ekwelem and Ukwuoma (2009) gave HIV/AIDS projection rate in Nigeria as: 1.8% (1993), 5.4% (1996), 5.43% (1999), 5.8% (2001), 5% (2003), and in 2005, 2,900,000 people had contracted the virus with adult prevalence rate of 3.9%. The figure might be the largest in the world after South Africa.

Although individuals, researchers and writers have produced literature showing concerted efforts that groups, government, non-governmental agencies and international communities have been making at combating the spread of HIV/AIDS in Nigeria, most of the publications focused more on Medicare and preventive strategies. Little attention seems to have been paid to the role that librarians can play as experts in generating, packaging and disseminating information about HIV/AIDS in the country.

Statement of the problem

To fight HIV/AIDS scourge in this country is a very serious business in which all stake holders must be seen to be active partners. It is to be observed that health personnel and the mass media have been at the vanguard of campaigns against HIV/AIDS epidemics in this country. Librarians have not been seen as active participants in such public activities. Perhaps, that is why some people believe that the role of the librarian is confined to the library. There is, therefore, the need to investigate how some people perceive the librarians in respect of the fight against HIV/AIDS in this country and how librarians could be perceived as one of the potent channel for information generation, packaging and dissemination about the disease.

Objectives of the study

The main objective of this study was to investigate how hotel patrons in Katsina metropolis perceived librarians as sources of information about HIV/AIDS. Specifically, the study was to:

1. Find out if hotel patrons in Katsina metropolis were aware of HIV/AIDS
2. Find out the sources of information on HIV/AIDS to hotel patrons in Katsina metropolis
3. Find out how hotel patrons in Katsina metropolis perceived librarians as channels of information dissemination on HIV/AIDS
4. Find out what librarians could do to become relevant to hotel patrons in Katsina metropolis in the context of HIV/AIDS information dissemination

Review of Related Literature

One of the cardinal responsibilities of librarians is to offer information services that can assist information users to meet their needs at the right time and in the right format. Information dissemination can be viewed as a process-product of communication or exchange between the source of the information and the user of the information through appropriate channels. It can be surmised that how information users seek and react to what is disseminated to them will most likely be dictated by the way they perceive the source(s) of the information.

Eysench, Arnold and Meili (1982) explained that perception is a psychological function, which enable the organism to receive and process information by means of the sense organs. They stated further that perception plays a very crucial role in cognition vis a vis the theory of knowledge. According to Davis and Palladino (2001), perception is the process of organized attempt to understand the sensory stimulation that man receives. Haliso and Madukoma (2010) argued that perception is what is immediately experienced by a person. According to them, people's perception influences their behaviour, reactions and attitude towards a specific phenomenon. It also influences the way people look at things, appreciate and evaluate them.

Information that have been emanating from the health experts indicate that HIV attacks the human immune system thereby causing people infected with virus to gradually suffer from various ailments that could have been normally resisted if there were no HIV attacks. Because there is no cure for the disease for now, the rampaging effects of the disease include death, destruction of sane and rational behaviour, discrimination as well as destruction of relationships (Sande and Volbering,1992). The 2004 Human Development Report of the United

Nations Development Programmes as cited by Ekwelem and Ukwuoma (2009) estimated that HIV/AIDS has become an epidemic across Nigeria because the official prevalent rate of the disease was put at 3.5 million people living with the virus, 1.5 million AIDS orphans and 300,000 deaths recorded annually.

A step forward in HIV/AIDS prevention and control in this country begins with accurate data on the disease, the control facilities such as drugs, hospital and health care centers. Data is also required on hospitalization period, the progress achieved in the early diagnosis of patients, activities of traditional health care providers, and general prevention and control activities. Though medical researchers and scholars might have generated large data on the aforementioned, the next step is to ensure that members of the society in the urban and rural areas receive appropriate information about such activities at the earliest time and in the right format. According to Sande and Volberding, members of the public require constant and regular supply of information for increased awareness, improved knowledge and enduring education to reinforce and update the information they have received about HIV/AIDS infection.

Information generation and dissemination tend to be the only vaccine available against HIV/AIDS. Information refers to facts or details that tell you something about a situation, person, events etc. (Longman Dictionary of Contemporary English, 3rd Edition). Although much appears still unknown and learnt about the HIV/AIDS pandemic in the world, nevertheless, what is already known is enough for concrete actions to either eradicate or curtail any further spread of the disease. One of such actions is information generation, packaging and dissemination. Other actions that are crucial for achieving the same objectives are through education and medication sciences (Afe and Egbochukwu, 2004).

Onwubiko (1995) and Uhegbu (2007) opined that information dissemination about HIV/AIDS should pass through local channels such as worship places, markets, colleagues, village meetings, social gatherings, institutions and organizations. According to Imrie and Joshua (2001), health professionals are in a better position to disseminate information about HIV/AIDS because they can provide practical information specifically packaged for a

target audience. In their own view, Calballero et al (1997) stated the mass media, especially, radio and television, reinforced by interpersonal networks of teachers, parents and peer groups are the most feasible channels of HIV/AIDS information dissemination. A study of married women in Bombay in respect of information dissemination about HIV/AIDS, Chartejee (1998) reported that 87% of the women acquired information about the disease through the mass media. Aeree and Mee (2000) reported that Internet was the main source of information about HIV/AIDS to a good number of South Koreans, Europe, America and some Asian countries. Mbanga and Becker reported that the source of information about HIV/AIDS in South Africa was an interplay of visual technologies and the mass media with the latter having the upper hand. On the local scene, Ogunro (2005), Igbo (2005), Uhegbu and Okereke (2006), Nwafor-Orizu and Uhegbu (2006) were unanimous in their reports that information dissemination channels about HIV/AIDS in Nigeria were rural-based sources such as women associations, churches, age grades, town development unions, traditional institutions and the mass media.

Akunyili (2005) and Uhegbu and Okereke (2006) however argued that the channels of information dissemination about HIV/AIDS in Nigeria are inefficient and faulty; otherwise, there should have been greater awareness of the scourge among the people which should therefore lead to reduction of infections. Nevertheless, it is an incontrovertible fact that, the federal, state and local governments have devoted enormous financial and material resources to combat the scourge through HIV/AIDS committees such as National Action Committee on Aids (NACA), State Action Committee on AIDS (SACA) and Local Action Committee on AIDS (LACA). The committees have been doing a lot through enlightenment campaigns, seminars, workshops and conference activities to stem the spread of HIV/AIDS. These researchers are of the opinion that the kind of information that HIV/AIDS victims require is for medical instruction and reassurance while that which those who have not been infected with the virus enlightenment, awareness and education.

Research Methodology

The population of the study consisted of those who patronized hotels in Katsina metropolis. However, the sampled population of seven

hundred and fifty respondents drawn from ten(10) hotels in the study area through stratified sampling comprised ten(10) sex workers, fifteen(15) female patrons and fifty(50) male patrons were drawn from each hotel. Questionnaire was the main instrument used to obtain information from respondents while oral interview of illiterate respondents also took place. Frequency counts, Mean and Standard Deviation technique was use to analyze the data. A Mean of 2.50 and above was taken as an index of agreement while a Mean of below 2.50 was taken as an index of disagreement.

Data Analysis and Interpretation

The data obtained from the respondents in this study was analyzed in tables followed by the interpretation of the analysis as shown below.

Table 1: frequency counts and percentage distribution of respondents

RESPONDENT	Freq	%
Sex workers	100	13.0
Male	500	67.0
Female	150	20.1
TOTAL	750	100

The table (1) above shows that the male patrons of the hotels utilized in this study were 500(63%) and consisted the majority respondents, female patrons 150(20%) and the sex workers 100(13%). The disparity in distribution of respondents was not by design, rather it was by chance.

Table 2: Frequency counts and percentage distribution of hotel patrons' responses to awareness of HIV/AIDS.

RESPONSE	Freq	%
Yes	730	97.0
No	20	3.0
Total	750	100

From the table (2) above, 730(97%) respondents were aware of HIV/AIDS but 20(3%) respondents were not aware of HIV/AIDS. By this analysis, it can be said that the majority (730) of the respondents obtained information about HIV/AIDS.

Table 3: Mean and Standard Deviation of responses on sources of awareness on HIV/AIDS in Katsina metropolis.

Sources	Mean(x)	SD
Radio and Television	3.84	1.62
Newspapers	3.68	1.59
Health officers	3.64	1.71
Friends and Customers	3.63	1.68
Government Information Unit	3.58	1.84
Workshop Places	2.94	1.20
Books, journals	2.30	1.12
Librarians	1.86	0.09

Table(3) above reveals that respondents who obtained information about HIV/AIDS through radio and television ranked highest with the mean and standard deviation of (x=3.84, SD=1.62), followed by those who obtained same through news papers (x=3.68, SD=1.59); this is followed by those whose sources of information were health workers (x=3.64,SD=1.71), friends and customers (x=3.63,SD1.68), government information unit (x=3.58,SD=1.84), worship places (x=2.94,SD=1.20), books and journals (x=2.30, SD=1.12) and librarians (x=1.86,SD=0.09).

The pattern of ranking of channels of HIV/AIDS information dissemination in the data analysis above is suggestive of the way in which hotel patrons in Katsina metropolis perceived the channels as sources of information available to them.

Question 3: How did hotel patrons in Katsina metropolis perceive librarians as sources of information on HIV/AIDS?

Table 4: Mean and standard deviation on the perception of librarians as sources as information on HIV/AIDS.

RESPONSES	MEAN(X)	SD
Librarians work in the library	3.60	1.04
Do not know about librarians at all	3.47	1.09
Librarians cannot provide health information	3.45	1.20
Librarians deals with books only	3.23	1.30
Librarians have business with HIV/AIDS awareness	1.25	1.47
Librarians also contract HIV/AIDS, so they cannot talk about the disease.	2.98	1.56

From the table (4) above, respondents perceived librarians as library personnel (x=3.60,SD=0.04). this is followed by respondents' claim that they did not know what Librarians connotes(x=3.47,SD=1.09), Librarians are not health providers(x=3.45, SD=1.20), Librarians are book providers(x=3.23, SD=1.30), Librarians are also HIV/AIDS victims and cannot be a channel of information dissemination on the disease(x=2.98, SD=1.56), Librarians can also provide information about HIV/AIDS(x=1.25, SD=1.47). On the bases of the interpretation of the data analysis above, the conjecture is that hotel patrons in Katsina metropolis had little knowledge of who is a Librarian.

Question 4: What could have been the role of Librarians in information dissemination about HIV/AIDS in Katsina metropolis?

Table 5: Mean and Standard Deviation distribution of responses on the role of Librarians in HIV/AIDS information distribution.

Responses	Mean(x)	SD
Librarians had no role to play	3.92	1.78
Librarians to provide books on HIV/AIDS	3.64	1.82
Librarians could join other information providers	2.73	1.32
Librarians could provide information about HIV/AIDS more efficiently than other people	2.16	0.96

In table five above, respondents did not see any role the Librarian could play in respect of information dissemination on HIV/ADS($x=3.92$, $SD=1.78$), followed by the role of the Librarian was to provide books on the disease($x=3.64$, $SD=1.82$); this is followed by Librarians could join other information providers ($x=2.73$, $SD=1.32$). Respondents disagreed that Librarians could provide HIV/AIDS information more effectively than others($x=2.16$, $SD=0.96$). The suggestion on the basis of the data interpretation above is that hotel patrons in Katsina metropolis did not perceive Librarians as information providers on HIV/AIDS.

Discussion of Findings and implications

The majority of respondents were male hotel patrons (500). This is followed by female patrons (150) and sex workers (100). Both male patrons and sex workers were not inclined to discuss HIV/AIDS issues, perhaps, to avoid being tagged victims of the dreaded disease. This observation tends to confirm Nwafor-Orizu and Uhegbu (2007) who reported that fear of being branded an HIV/AIDS carrier stands out as the major obstacle that frustrates free flow of HIV/AIDS information among people.

It was also found that hotel patrons in the study area were aware of HIV/AIDS disease. This implies that hotel patrons obtained sufficient information through a variety of means. This finding is in tandem with the submission of Adamu (2003) that information dissemination is the antidote for HIV/AIDS through which members of the society will be fully aware of the dangers that the disease poses to humanity.

Hotel patrons in Katsina metropolis did not perceive librarians as one of the sources of information about HIV/AIDS. This finding is suggestive of the low image and recognition accorded librarians in health-related services to the people. To think that librarians' relevance begins and ends in the confines of the library building is erroneous because, as social animators, they have a lot of responsibilities to take information services for the well being of the people to their door steps. This position tends to agree with Pienaar (1995)

who submitted that librarians are in a better position to be of good service in information concerning HIV/AIDS pandemic because over the years, librarians have remained repositories of knowledge serving people of all ages and from all walks of life.

Conclusion

It can be concluded that there is the need for holistic mass enlightenment campaigns on how to prevent the spread of HIV/AIDS in our communities. The educational and information roles of librarians and how they can contribute to the fight against the dreaded scourge in Nigeria therefore become imperative.

However, the implication of this study suggests low perception of librarians by the public. This is buttressed by the fact that librarians appear to still command low status and recognition in Nigeria. In the order of official protocol in the academic setting, for instance, the librarian's position appears at the rear after the Head of the institution, the Registrar and the Bursar. Indeed, the conjecture is that most Nigerians still have a gloomy and depressing perception of librarians in relation to other professionals like accountants, lawyers, engineers, health personnel, among others. This submission tends to be in tandem with Rashid (1997) who aptly stated that people have not yet fully realized the importance, value and functions of a librarian. A librarian is still considered as a storekeeper of documents and is often scorned or considered a figure of fun in relation to other professionals.

As professionals in information handling, librarians should be brought on board the fight against HIV/AIDS to enable them approach the campaigns against the menace using the following strategies:

Oral delivery: This involves information dissemination by the librarian through the words of mouth, particularly, among a population of those who cannot write and read in Western style. By this strategy, any information that is to be delivered to the people is potent and efficacious in salvaging the terrible HIV/AIDS prevalence among the people.

Indirect contacts: The librarian can reach out to the HIV/AIDS victims indirectly through the health workers on the field. As in the case of oral information generation/dissemination, the information that the librarian wants to deliver indirectly to the field sites should focus on what can be done to combat HIV/AIDS. Such information should have been collated from various print and non-print sources by librarians.

Referral services: Librarians are to collaborate with health care personnel in contact points such as hospitals, dispensaries, maternities, clinics, etc for dissemination of referral information services about HIV/AIDS etiology, management and control.

Information resources: Librarians can package information on measures for HIV/AIDS control and prevention using posters, charts, graphic and illustrated comic type of publications mounted on strategic places and locations. This strategy is to convey ideas about HIV/AIDS health services, or to illustrate hospital operations and other HIV/AIDS health activities..

Exhibitions/Displays: Librarians can mount exhibitions and awareness displays during health fairs, HIV/AIDS victims shows/fetes, hospital visitations and during religious or social gatherings. These opportunities serve as an avenue for instructing, educating and enlightening the public about the preventive and control measures that they should take against HIV/AIDS scourge.

Audio – Visuals: This involves the use of audio – visual facilities such as pre-recorded rhythmic jingles, songs, short messages on cassettes or attractive tunes and words arranged on motion pictures, television, the mobile cinema, and projected visuals to project and demonstrate prevalent issues, problems, and solutions to the devastating nature of HIV/AIDS.

Outreaching: Outreach programme and activities such as lectures, community meetings, literacy projects, youth, women and HIV/AIDS health clubs are effective strategies for information dissemination on how to prevent HIV/AIDS outbreak. The librarian is in a better position to initiate such outreach activities regularly for the purpose of informing and educating the public about HIV/AIDS prevention and control measures.

Collaboration: Librarians can collaborate with professionals in other disciplines and occupations such as Medicine, Guidance and Counseling, Sociology, Mass Media and Oral arts for joint action against HIV/AIDS.

Recommendations

Governments at all levels, individuals, groups and non-governmental agencies including the

international communities are the main players in the fight against HIV/AIDS. All hands must, therefore, be on deck to ensure that all efforts at eradicating, preventing or controlling the disease using the instrument of information generation, packaging and dissemination yield the desired dividends. To this end, the following steps are recommended for consideration by all the stakeholders in the fight against HIV/AIDS in Nigeria:

1. The Federal Government of Nigeria should dedicate some money for HIV/AIDS information generation, packaging and dissemination. Such funds should be entrusted in the hands of a trustee to avoid illegal disappearance or misappropriation through sharp corrupt practices.
2. State and local governments should establish HIV/AIDS Information liason centers in the State and Local Government headquarters to be headed by a librarian under the direct supervision of National Agency for the Control of Aids. The agency should not only co-ordinate and control the information generation, packaging and dissemination activities of the centers; it should also be responsible for recruitment and welfare of information field workers in the centers.
3. Sufficient funds should be made available to HIV/AIDS information liaison centers to enable them procure information processing tools and other support facilities so that information generation, packaging and dissemination will be less cumbersome.
4. Librarians should be re-trained regularly on the modern techniques for generating appropriate information to fight HIV/AIDS. Such training could be through attendance at seminars, workshops, or in-house training programmes to be organized by relevant experts on HIV/AIDS eradication/prevention/control.
5. Librarians should be versed in oral skills to be able to generate, package and disseminate information about HIV/AIDS in the rural communities. Similar services to the urban dwellers would naturally be rendered through the print and electronic media. In this case, the librarian has to collaborate with the mass media and other professionals such as publishers and writers, etc for effective generation, packaging and dissemination of information on HIV/AIDS knowledge.
6. Librarians should collaborate with exports in Educational Technologist to design and produce eye – catchy illustrated pictures, photographs, and newspaper cuttings on HIV/AIDS education for distribution in public institutions such as

clubs, societies, worship places, town halls, market places, hotels, hospitals, bus stops, railway stations, banks and schools, etc.

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