

Information Needs of People Living with HIV/AIDS in Ibadan Metropolis

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Abstract

It is no longer news that the horrific grip of HIV/AIDS has claimed more lives than those killed in world wars one and two. In Nigeria, a developing economy with high prevalence of HIV/AIDS, cases of HIV/AIDS have been reported in all the 36 states of the federation including the Federal Capital Territory, Abuja. This research sought out to enumerate the varying information needs of these special people positively living with HIV. In order to achieve this objective, fifty Persons Living With HIV/AIDS (PLWHA) responded to the questionnaire designed to reveal their information needs across nine different local government areas in Ibadan, Nigeria with the view to know their information sources and the barriers inhibiting access to HIV/AIDS information. However, the findings revealed that relevant information which should meet the varying needs of PLWHA are not available due to poverty, non involvement of the positive people at HIV/AIDS- related programmes, including the selection of HIV/AIDS information, stigmatization and discrimination often faced by PLWHA. While 62% of the respondents consulted the media, 62% turned to Churches and Mosques where the clergies were scarcely trained in HIV/AIDS related activities. Other sources of information were hardly consulted. It is recommended that religious leaders can be a very good channel in reaching out to PLWHA if trained as peer educators. PLWHA should be included in the various selection committees not to only provide relevant information, but also to give sense of belonging in meeting their psychological needs. NGOs on HIV/AIDS-information dissemination should be encouraged as well.

Keywords: HIV/AIDS, Information needs, user information, health information.

Introduction

Sub-Saharan Africa continues to bear an inordinate share of the global HIV burden: 23 million people living with HIV/AIDS (PLWHA) make their homes in the region. Though the number of new infections on the continent seems to have peaked in the mid-1990s, the epidemic continues to be a major challenge to the health and development of many African nations (USAID, 2011).

Combating the scourge of HIV/AIDS has become a major challenge for mankind in the 21st century because of the pandemic's devastating negative, social and economic impact. The alarming rate of the spread of the disease especially in the sub-Saharan Africa had been of high concern not only within the continent, but also in the entire globe. An estimated four million Nigerians were reported to have been infected with HIV/AIDS making the country, the fourth largest in the world as at 2006 (Shokunbi et al, 2006; Ojeme, 2011) and by 2011, Nigeria's profile had risen to the third position on the countries with the highest prevalence of HIV/AIDS in the world (Ajayi and Omotayo, 2011).

The United Nations Organization (UNO) in the realization of the importance to combat its spread had in year 2000 committed about 196 heads of states in the crusade of what became the 6th Millennium Development Goal (MDG). The target given for the realization of the goals is 2015, which is just less than four year from now (2012).

However, as the reality of HIV/AIDS continues to stare a man in the face considering the proximity to 2015- the target set to combat HIV/AIDS amongst other deadly diseases. In Nigeria as well as some other developing nations, the possibility of achieving the goal is nearly impossible.

PLWHA are integral members of the Nigerian society despite the stigmatization and isolation being experienced by them. As a matter of fact, the National Policy on HIV/AIDS (2003) asserts that the government of the Federal Republic of Nigeria shall guarantee equal access of every Nigerian citizen to empowerment, housing, health, education and support community-level efforts designed to provide a social safety net for the PLWHA. The success of any country's participation in this information society will depend greatly on how development programme like the Millennium Development Goals are met by such countries. A symbiotic relationship can be established between development plans such the MDGs of individual countries, libraries and

the information society (Ochogwu 2007). Therefore, the place of information in curbing the astronomical rise of the pandemic cannot be overemphasized (Bharat and Kendra, 2006).

Recognizing the importance of the need to have national support, the Federal Government of Nigeria in its National Policy on HIV/AIDS made commitment to ensure that existing legislation and new laws shall be enacted in the following areas:

1. HIV/AIDS legislation in the workplace: protection of workers' rights on the job for those infected.
2. HIV/AIDS legislation in the workplace: protection of workers rights on the job from being infected as a result of their work.
3. Legislation on legal rights and property ownership of persons infected and affected by HIV/AIDS.
4. Legislation to improve access to legal services, and care and support for person infected or affected by HIV/AIDS.
5. Legislation to protect the rights of victims of sexual violence.
6. The establishment and codification of the Nation's HIV/AIDS response, structure.
7. The codification of HIV/AIDS relevant legislation (National Policy on HIV/AIDS, 2003).

The needs of PLWHA are numerous but can be classified and categorized in four interrelated section which include the medical needs; socio-economic needs; psychological needs; human rights and legal needs (Family Health Institute, 2008).

The comprehensive care meets not the just the need of the PLWHA but also their families and communities (UNOC, 2003).

The National Library of Nigeria had in 2005 set up a section of the Library to catre for the information needs of PLWHA in Nigeria in realization of the need to have HIV/AIDS information across to people. However, it is important to know that not all the branches of the National Library through out the nations that has this section despite the fact that HIV/AIDS has been recorded in all the states of the federation. This is besides the fact only few individuals who are literate can make use of the library. In the process, a reasonable number of Nigerians are disenfranchised.

Hunter (2005) in his study in Tennessee suggested HIV/AIDS education and awareness as key approaches in addressing the spread of HIV/AIDS. This is because of the power of information in achieving behavioral change in any given society.

In providing a well-utilized information packages for the PLWHA, some aspects of the Library Bill of Rights, 7th edition as enunciated by Barbara (2008) includes may be adopted. They include:

1. Protecting the privacy of the library patrons.
2. Developing a policy on how to protect the patrons
3. How to promote the use of internet in libraries
4. Policies for promoting the use of internet in libraries
5. Library services for you.

Hogan and Palmer (2005) believe that information seeking in an important activity in the lives of PLWHA. Therefore, information as an indispensable tool should be made available in a user friendly environment, should that any user can walk up to the shelf with the fear of discrimination.

Statement of Problem

PLWHA have varying needs which several researches in the time past have centred on. Zhang (1998) had established that a thorough understanding of user information needs and behaviour are fundamental to the successful information services. However, in the area of HIV/AIDS in Nigeria, not much attention has been given to the information needs, amongst other well-researched needs of the People Living with HIV/AIDS. This research sought to delve into this neglected area of study, thereby, providing what will be a useful guide in the various selection and dissemination activities of several libraries and information centres that intend to catre for PLWHA.

Objectives of the study

The main objective of this study is to find out the information needs of the PLWHA in Ibadan metropolis.

The specific objectives are to determine:

- The type of information that PLWHA desire?
- How the PLWHA obtain or source for their information.
- The problems often encountered in the process of trying to access HIV/AIDS information by the PLWHA in Ibadan.

Research questions

This study will provide answers to the following questions:

- What are the information needs of PLWHA in Ibadan?

- What are the sources of information to PLWHA?
- What are the inhibitions to obtaining HIV/AIDS information?

Methodology

The primary source of data for this research was a four-part questionnaire. Although, sixty questionnaires were to be administered, however, because of the issue of confidentiality and other ethical matters relating to HIV/AIDS, the possibility of getting more than 50 respondents was slim. The entire respondents were persons living with HIV/AIDS. They were randomly selected from nine out of the eleven local government areas of Ibadan, Oyo State. The data obtained were later analyzed using frequency table and simple percentages.

Discussion of findings

Table 1: Distribution of Respondents by marital status across the local government areas.

Local Government Area	Single	Married	Separated	Divorced	Widowed	Total
Ido	4 44.4%	3 33.3%			2 22.2%	9 100%
Ibadan North West	5 56%	4 44%				9 100%
Ibadan North East	3 75%	1 25%				4 100%
Egbeda	1 20%	3 60%			1 20%	5 100%
Ona-Ara	1 14.3%	2 28.6%	1 14.3%	1 14.3%	2 28.6%	7 100%
Akinyele	1 50%		1 50%			2 100%
Ibadan North		1 50%		1 50%		2 100%
Ibadan South West	1 14.3%	4 57.1%			2 28.6%	7 100%
Ibadan North East		1 20%		1 20%	3 60%	5 100%

From Table 1 above, the respondents from Ido Local Government area were 9. While 4(44.4%) were single, 3(33.3%) were married and 2(22.2%) widowed. At Ibadan North East Local Government area, there were also 9 respondents. 5 (56%) were single and 4 (44%) married. Egbeda Local Government area had 5 respondents. 1(20%) respondent single, 3(60%) married and 1(20%) widowed. In Ona-Ara Local Government area, out of the 7 respondents, 1(14.3%) is single, (28.6%) married, 1(14.3%) separated, 1(14.3) divorced and 2(28.6%) widowed. However, in Akinyele Local Government area, while 1(50%) respondent was single and the other 1(50%) respondent separated. In Ibadan North Local Government area, out of the two respondents, 1(50%) was married and the other 1(50%) respondent divorced. Ibadan South West Local Government had 7 respondents in all. 1(14.3%) single, 4(57.1%) married and 2(28.6%) widowed. In Ibadan North East out of the 5 respondents, 1(20%) was married, another 1(20%) divorced and the last 3(60%) respondents widowed. The spread of the respondents across different marital strata is an indication that HIV is breaks the barriers of age, sex and marital status.

Research Question 1: What are the information needs of PLWHA?

Information needs of PLWHA in Ibadan

49(98%) respondents wanted information of the availability of antiretroviral drugs (ARV). This shows the importance of ARV to the PLWHA. 50(100%) respondents were curious to know the latest development on the vaccines to cure HIV/AIDS. 44(88%) respondents required information on the exercise to take, while 49(98%) needed information to satisfy their nutritional needs, the kind of food that will boost their immunity. 43(86%) wanted to know the appropriate time to take meals while 48(96%) wanted information on the kind of food that would raise their appetite. The importance of nutrition to general well being was advocated by Mabawonku (1998).

50(100%) respondents needed information on Non Governmental Organizations (NGOs) with support to PLWHA. 49 (98%) however wanted information on support groups and International Organizations with support to PLWHA. 43(86%) respondents required information on grants, aids, supports and scholarship available to PLWHA and their relatives taking care of them.

49(98%) respondents would want information on availability of suitable jobs which their health status would permit them to do. 35(75%) respondents needed information on their sexual interaction with their spouses. 22 (44%) of the respondents wanted information on the proper use of condom. 41(82%) wanted information on family planning because of the fear of having HIV infected children. 60% demanded information on the possibility of having HIV-free children. The entire 50(100%) respondents demanded information on a healthy living lifestyle that will help them ensure that others do not become infected of HIV virus through them.

43(86%) desired information on government's policies and plans towards the PLWHA. 31(62%) needed information on how to seek redress in the event of discrimination and other infringements of their rights. 45(92%) wanted to know if there are provisions to offer free medical services to take care of opportunistic

infections faced by PLWHA apart from the ARV often provided freely by the government.

Research Question 2: What are the sources of HIV/AIDS Information?

Sources of HIV/AIDS information

Table 2: Distribution of Respondents by Sources of HIV/AIDS Information

Statement	Daily	Weekly	Twice a month	Yearly	invalid
Media- Radio, Television, Newspaper	31 (62%)				19 (38%)
Friends/Relatives/ Colleagues	6 (12%)	16 (24%)			28 (56%)
Health Workers/ Hospitals/ Clinics	2 (4%)				48 (96%)
NGO activities	1 (2%)				49 (98%)
Religious affiliations (like Church, Mosque)	4 (8%)	30 (60%)			16 (32%)
Internet					50 (100%)
Libraries	1 (2%)				49 (98%)
Counselors					50 (100%)

From the table 2 above, it can be seen that 31 (62%) respondents sourced information on HIV/AIDS from the media on daily basis using the radio, television and newspaper. These sources of information do not actually require the user to meet with any one. This may be as a result of stigmatization often faced while trying to use other sources of information. The media often protects the identity of the users. 6 (12%) of the respondents sourced information on weekly basis while 16(32%) searched information on weekly basis from close associates like friends, colleagues and relatives. Regrettably, only 2(4%) respondents consulted information through the Health Workers and Hospitals on daily basis. 1(2%) of the respondents relied on the NGOs. Another 1(2%) saw the library as a repository of information on HIV/AIDS which they can use from time to time. This result supports the findings of Gosh (2006) that information resources in library are lacking in appropriateness and limited in number. None of the respondents visited the Counsellors. The entire 50(100%) respondents visited religious organizations where the clerics are scarcely trained on HIV/AIDS. This case is not only unfortunate; it is like the case of the blind leading another blind man. In this case, religious leaders who do not have much information on HIV/AIDS will have less information to give, hence the Latin dictum “*nemo dat quod abet*” meaning “*you cannot give what you do not have*”.

Research Question 3: What are the barriers to HIV/AIDS information?

Barriers top HIV/AIDS Information

Distribution of respondents by barriers to access to HIV/AIDS information

Barriers	Yes	Invalid
Poverty	47 (94%)	3 (6%)
Lack of suitable information to meet my needs	47 (94%)	3 (6%)
Stigmatization	46 (92%)	4 (8%)
Most information do not meet information needs	50 (100%)	
Non involvement of PLWHA in the provision of information	50 (100%)	

47(94%) respondents could not access their needed information due to poverty. This is in agreement with the opinion of Shokunbi et al (2006) and UNOC (2003) that there existed a positive relationship poverty and the spread of HIV/AIDS. 47(94%) respondents attributed their barrier to HIV/AIDS information to lack of suitable information materials. Stigmatization as established by Douglas and Pinsky (1987) is what 46(92%) respondents believed was a factor. 50(100%) saw that the available information did not meet their HIV/AIDS information needs, while also of the opinion that People Living with HIV/AIDS were not involved in the provision of information to the PLWHA. This is contrast with the views of Aina (2004) and Nwalor (2003) who had earlier advocated the need for the users to have input in information management so that only relevant information can be acquired.

Conclusions

There is dearth of HIV/AIDS to meet the information needs of PLWHA in Ibadan. Poverty, discrimination, stigmatization have indeed hindered accessibility and utilization in Ibadan. Although since the opening of a centre for information on AIDS in Abuja, Nigeria, many other branches have been opened nation wide (Ghaji, 2009), it is however regrettably that only 2% of the respondents use library resources. This is to support the popular assertion that availability of information is totally different from the utilization of the information. It is therefore necessary to ensure that information is packaged such that it meets the HIV/AIDS information needs of PLWHA. Worrysome is the fact that the respondents actually rely on channels of information where professional, correct and accurate information could not be guaranteed.

Recommendations

The following are recommended

1. The various library collection development committees are to be made to incorporate PLWHA. This can be done in conjunction with support group of people living with HIV/AIDS. An example of such support groups is the Network of People Living with HIV/AIDS in Nigeria (NEPWHAN).
2. The government should have in very practical sense, provisions to protect PLWHA against discrimination, isolation and rejection from the society. Having appropriate legislations is not sufficient, efforts should be made to ensure that there are institutions to offer free legal services in case of discrimination and any other forms of abuses against PLWHA.
3. The established of NGOs with the objective of providing HIV/AIDS information should be encouraged. Some of the existing NGOs can widen their scope to include HIV/AIDS information services to PLWHA.
4. HIV/AIDS information should be made available in an environment devoid of stigmatization and discrimination.
5. The confidence and trust of PLWHA in religious leaders can be turned to an advantage. There should be HIV/AIDS training for the clergies, particularly, on HIV/AIDS counseling. This will prevent the possibility of misinformation by the religious leaders who themselves may not be adequately informed on HIV/AIDS.

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