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# Librarian Joint Mediated Outreach on Health and Legal Information provision in Select Communities in Akwa Ibom State, Nigeria.

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#### **Abstract**

Health information activities essentially are geared towards raising people's awareness on good health and holistic living, thereby reducing the risks of opportunistic illness. In this regard, a related health promotional activity was undertaken in four local communities in Southern Nigeria. The purpose was gingered by the compelling efforts made by various government bodies and NGOs to curb the scourging HIV/AIDS pandemic, particularly in local communities. This Paper is therefore based on a three-day health and legal information outreach programme spearheaded by this author as a volunteer librarian in one of the communities. Planning and implementation of this endeavour undertook participatory approach with beneficiaries being predominantly youths, in cognizance to their 'reachability'. Team work makes effort worthwhile, as such some NGOs and faith-based groups collaborated, in addition to the village head (chief) of host community. High point of this activity was massive and voluntary HIV/AIDS screening which prior to the health information awareness programme, was dreaded.

**Key words**: Awareness, Medical care, Seminar, Outreach, HIV/AIDS.

#### Introduction

Health is wealth, so says the adage and this is an undisputed fact for the reason that the well being of a people can holistically add to their development generally. Local communities with little infrastructure seem to be more susceptible to less of quality information that would have bettered their lot due to low economic and literacy rate. People in local communities as found through interactions with this author, are found to dwell on superstition upon which they attribute sickness and other forms of health hazards. The situation intently underscores the need for more awareness and health literacy information, which is the thrust of this paper. This paper unfolds activities which surround what initially started as an informal health discussion to an organised health project with focus on HIV/ AIDS and legal matters. Cognisance is taken of the fact that adhering to sensitive health information such as on HIV/AIDS is sometimes a tug-of-war in certain suburban areas. Such resistance could be attributed to fear, superstition, ignorance, mis-information and lack of information (Philip and Offoboche, 2013). More so, people do not just react emotionally or behaviourally to life events, but their thinking mediates how they respond to realities or a given situation

(Cognitive Behavioural Theory- CBT). Following this argument raised in CBT, specific thoughts or beliefs may not be in one's immediate consciousness in many instances, but with proper training and practice individuals can become aware of them. Oxford Encyclopedic Dictionary (Scott and Marshall eds., 2005) posits that behaviour can be learned through association or one conditioning of one kind of another. By implication, when people are intentionally informed or trained over a given cause, their cognitions will subsequently be targeted, modified, and changed. It is important therefore that vital health information has to be spread (Maden, Kongren & Limbu, 2010) particularly among areas with less of modern amenities.

Considering the fact that moves towards sustainable development goals align with health priorities particularly for African regions e.g. to tackle and end HIV/AIDS pandemic, there is every possibility that continuous awareness programmes will enhance health development goals (UN Africa Renewal, 2015). This assurance is furthermore based on the goal of ensuring healthy lives and promoting well-being (UN Sustainable Development Goals, 2015). As part of this global health agenda, Akwa Ibom State Agency for the Control of AIDS (2014), is saddled with the mission of reducing HIV/AIDS prevalence by promoting appropriate gender, cultural sensitive information ...prevention, treatment, care and support services. In the light of this, it was germane to contribute to these pro-health values by propagating basic health information pertaining to HIV/AIDS, which was partly the reason behind the HIV/AIDS awareness programme spearheaded by this author (librarian) in a sub-urban area.

#### **Rationale:**

In some ways the library and information science sector has over the years encouraged information ventures beyond the confines of typical library system, and to launch into innovative information provision around and beyond its immediate community. On the other hand, local communities in many developing communities require information though not many persons and groups may be interested in being involved to actualise such endeavour. Statistics from National Action Committee on AIDS (NACA, 2016) reports that Akwa Ibom State (where this study was based) rated 6<sup>th</sup> among other states with high prevalence. This was a factor to the health awareness project on HIV/AIDS carried out in the communities discussed in this paper.

An unpleasant occurrence which also gingered the awareness programme was when a young teenage girl contracted HIV which manifested into full blown AIDS based on diagnoses before her demise. This author came in contact with her just like any other per (PLWHA) with a strong advice for her to seek medical attention, though her family was reluctant to heed the advice. She was however left to endure the torturing effect of the ailment without proper medication out of sheer belief that her predicament was spiritual, therefore no recourse for medical care which otherwise would have saved her life.

Following this unfortunate incidence which claimed the girl's life among other critical factors, it was resolved by this author and other concerned persons that a health awareness programme should be carried out for more informed citizenry. Through prior discussion with

stake holders in the community, it was also found that an awareness programme with such magnitude had not been conducted in host community- Ikot Oko. These and more, gingered the initiative to volunteer into carrying out a health outreach programme in the slated area.

#### **Method:**

This study undertook action research approach. Oxford Encyclopedic Dictionary of Sociology (John Scott and Gordon Marshall eds. (2005) explains that in this method, researcher is also a change agent and research subjects are invited to participate at various stages of the action, deciding which course of action to follow and implementing it.

The health outreach programme was participatory and field-based, anchored by this author who served as a volunteer librarian in WOREM high school and theological college situated in same location. Youths were core participants inview of their active lifestyle socially and otherwise, though adults / married ones were in attendance to back-up the programme. The youths were mainly of current and post-secondary school level, some of which were self employed and active in various forms of economc ventures. Contact was made with key persons in the communities and other stakeholders who collaborated in the project. Main activities carried out in the health information programme were in form of illustrated seminar with question and answer sessions.

Participants (youths and adults) at the programme were drawn from four neighbouring communities namely Edemaya, Ikot Abasi, Eastern Obolo and Ikot Oko (host community), all in Akwa Ibom State, Southern Nigeria. Other events were inculcated for leisure and to encourage good audience turnout e.g. sports. As part of the event, a mass outing (rally) also took place with the aim of visiting persons in the community to sensitise them on health related issues.

#### **ACTIVITIES:**

### A) Planning

This paper highlights the following steps taken to actualise the health programme which took place a couple of years ago in the month of September. Activities which took place are discussed under the following sub-heads: preliminaries, correspondence,

**Preliminaries**: This author as a librarian, had to undergo HIV/AIDS screening as exemplary step to encourage others thereafter.

*Correspondence*: telephone & contacts were made with hosting Missions centre, religious hosts, leaders of expected groups/ participants and a health NGOs for joint facilitation.

*Logistics*: this involved scheduling of duties, camping and welfare, security, facilities, transport & so forth.

*Visual Aids*: For effective oral presentation, fliers, posters and other support items were prepared by this author/ facilitator and ECEWS helped. Philip & Udoh (2011) state that innovative forms of information distribution impact faster on people and by personal contact which likely influences adoption of a message, supported by Banya (2014).

*Finance/ materials:* personal funds by this author helped to kick-start the programme, with financial support from the Director, *Timothy Army*. Materials and facilities were provided by host body to enhance logistics at the venue

### **B) Collaborators:**

Team work does it better; a meeting was later held with would-be team players (collaborators) deemed to have the capacity to put in meaningful effort toward the project. Main group contacted comprised main subjects of the project, were a faith- based youth group named *Timothy Army*. The group notably holds conferences annually to feature social, spiritual, educational and economic issues which this author often featured as a resource person annually. Their annual gathering often constitute youths from neighbouring local communities and few from the cities. Ekah and Ben (2017) note that 'sexuality is active in the 20-29 years age bracket, since this group consists of predominantly young and unmarried individuals who show a low level of maturity and are always willing to take risks'.

With this strategic advantage, the HIV/AIDS information dissemination programme became main event of the *Timothy Army* with members constituting bulk of participating youths. The Director of *Timothy Army* being an academic in a university, offered professional advice.

Other team members were authorities of WOREM Mission and WOREM High school respectively; they assisted with accommodation and maintenance of their premises used as venue of the programme. In view of this arrangement, the bulk of volunteer camp assistants were drawn from them.

An NGO named Excellence Community Educational Welfare Scheme (ECEWS) were also involved with a team of expert health workers to conduct HIV/AIDS screening during the event.

Village head/ chief of the host community with his council members, played key role in facilitating consent derived to spearhead the programme. His presence during the health seminars and talks, boosted its significance.



(Above are some of the participants comprising youths and elderly ones from various communities. In the middle is the village head/chief with programme facilitator (author) standing beside).

In all, adults and youths from the four communities, children and teachers from host institution (WOREM mission and School) who participated were estimated at 150, excluding camp assistants.

#### C) Main Event: Seminar and Outreach

Seminar on HIV/ AIDS and related health issues was presented by this author, backed with posters to highlight the discussion. The message was presented orally in both English and vernacular, with content portraying indigenous themes to enhance understanding. Topics discussed were: 'what HIV is and causes' 'HIV/AIDS history' 'Difference between HIV and AIDS' 'How HIV is (not) spread' 'Symptoms and Signs' 'Case studies' 'Statistics from homes / families, church, campuses, communal practices' 'Life span of HIV/AIDS' 'Prevention' 'Voluntary screening and counselling' 'What to do if infected' 'More advocacy' and other issues which cropped up as discussions progressed. The seminar which was quite engaging, too much of the day with intervals to accommodate breaktime, question session and answer sessions, with feedback from participants.



(Above is a cross-section of the participants during the seminar)

In view of the immediate knowledge gained on HIV/AIDS and related issues, a morning rally took place the second day, whereby participating youths in the programme moved at random into strategic places in such as market, village square, streets and so forth host community- Ikot Oko. They carried posters earlier used for the seminar to draw attention and to invite interested persons to the ongoing health programme.



(Above is this author distributing posters for the rally)

Before noon of same day, another seminar was conducted by a high ranking government official invited to feature in the health programme. The same is a serving justice of the supreme court in Nigeria from Akwa Ibom State who voluntarily addressed the audience on legal and socio-marital issues including 'Qualifiers for marriage and choosing rightly' 'Legal basis / types of marriage' 'Marriage as agreement' and so forth.

Recreational and sports e.g. football event took place at the venue in the evening to relax participants after a busy day.



(The football team comprising members of Timothy Army and other youths; far right is their Director/ University don).

On the third and final day of programme, a voluntary HIV/ AIDS screening test was conducted from morning till late afternoon, including test for blood pressure which was requested for by elderly ones present.



(Above is this author with one of the health workers conducting HIV/AIDS screening, with willing participants rushing to take turns for the screening)

## D) Outcomes

The turnout, response and co-operation practically witnessed among target audience during the health awareness programme, relays a positive outcome of the entire exercise. One of such indications is the massive turnout of all participants for screening, including camp assistants. This was instigated by reason of knowledge gained from the seminars. Equally, few persons who were 'reactive' (tested positive) were provided with post-screening counselling on individual basis. This was voluntarily handled by this author, having been equipped with prior knowledge of how to conduct same. Those counselled were relieved and hopeful of surviving thereafter. One of the indicators of Sustainable Development Goal is to ensure healthy lives and promote well-being (UN Africa Renewal, 2015).

Generally, it was found that discussions during the awareness seminar on HIV/AIDS raised diverse inexhaustible questions surrounding peculiar issues not only in the community, but the society at large. With interest and knowledge generated regarding the ailment, a statement of appreciation and invitation was given by the village head /chief for another seminar and screening exercise to hold for community members who could not partake.

## **Challenges and Recommendations**

Community information service requires determination since it invoves dealing with human beings guided by a particular way of life and thinking which has to be considered. For instance, though the thrust of the health iformation programme was on HIV/AIDS, few elderly persons present wanted general health check-up other than HIV/AIDS. The reason is not farfetched since most of them did not participate in the seminar session which would have guided them of the associated health risks to be wary of, despite ones age. Some married men as discussed by their wives during the programme, are averse to HIV/AIDS test although final decisions on the wellbeing of their family rest with them whether favourable or not. This rather poses limitations to their wives and wards who become constrained to take responsibility over personal health concerns. This attitude is connected to patriarchy practised in some African communities which Hughes and Kroehler (2008) state it as being a system of social organization in which men have a disproportionate share of power. More so minority groups lack power relative to a dominant group (which is the situation most women find themselves). Ekah and Ben (2017) in their study revealed that women choose not to disclose their HIV status for fear of abandonment, rejection, discrimination, upsetting family members, and accusation of infidelity from their partners, families, and communities.

More involvement of volunteer information workers in community service is encouragd when armed with appropriate message to reach those who need same. In other words, meeting prospective information seekers where they are is essentially required and not other way round. This can be enhanced particularly with rapport established with identified target group which can breed trust, enable cooperation and consent to carry out intervention projects. Aside being physically available at a location to carry out a project, other alternatives can be explored particularly in a low ICT-based area, such as preparation of easy-to-read information leaflets to meet user's needs and level.

#### Conclusion

People generally value holistic health information, particularly those among rural areas. They significantly appreciate programmes with no cost implication on them, though this can be very tasking. HIV/AIDS awareness programme impacted on the people reached, particularly with collaboration, support and team-work which made the health awareness programme worthwhile. The entire event has equally established the fact that with commitment and passion over a given cause, it is possible to host an informative program despite lack of corporate funding.

Consequent upon the outcome of this programme, it is envisaged that more pro-health workers and information experts would continue to advance the course of curbing the spread of HIV/AIDS ailment.

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