

University of Nebraska - Lincoln

DigitalCommons@University of Nebraska - Lincoln

Library Philosophy and Practice (e-journal)

Libraries at University of Nebraska-Lincoln

12-2011

The Library as an Effective Tool for Understanding the Health Status of Rural Communities in Nigeria

Nnenna A. Obidike

University of Nigeria, Nsukka, Obidikennenna@yahoo.com

Idoko Nkechi

University of Nigeria, Nsukka

Follow this and additional works at: <https://digitalcommons.unl.edu/libphilprac>



Part of the [Library and Information Science Commons](#)

Obidike, Nnenna A. and Nkechi, Idoko, "The Library as an Effective Tool for Understanding the Health Status of Rural Communities in Nigeria" (2011). *Library Philosophy and Practice (e-journal)*. 675. <https://digitalcommons.unl.edu/libphilprac/675>



<http://unllib.unl.edu/LPP/>

Library Philosophy and Practice 2011

ISSN 1522-0222

The Library as an Effective Tool for Understanding the Health Status of Rural Communities in Nigeria

Obidike Nnenna A. (Mrs.)

Idoko Nkechi A. (Mrs.)

Nnamdi Azikiwe Library
University of Nigeria, Nsukka

Introduction

Library in any community is regarded as an information base centre for storage and retrieval of vital information which could be used for community development and national planning. The library is the gateway to information (Anasi, 2010). It is a place where information is acquired, processed, repackaged, preserved and disseminated. Every community (country) aims at improving the health of its citizens and plan outreach annually (Ogunbode, 2004). This objective would be better achieved where libraries are seen as effective tools for understanding the health status of rural communities in Nigeria. Librarians are meant to partner with community health workers to record and store health information on common prevalent disease conditions in our rural communities, such as malaria, measles, dracunculiasis (guinea worm), dysentery, poliomyelitis, tetanus, tuberculosis, HIV/AIDS etc. Health status measures that relate to these conditions are especially valuable tools for identification of problem and evaluation of intervention programmes. Public access to health

information is paramount to the developing nations in Africa e.g. Nigeria where communities are ravaged with daunting health problems. Health messages even at government level are often confused and unreliable (Godbolt et al., 2010). Indeed on health issues at all levels, from the point of care through to policy level, communities lack access to reliable and appropriate health information and are often unable to make informed health decisions for themselves or those they care for, hence the resultant poor health status of most rural communities in Nigeria today. When libraries have adequate information on the health status of our rural communities vis a vis prevalent disease conditions in such areas, the federal government through the ministry of health and other health agencies (WHO, Red cross) would be in a better position to assist such communities through provision of drugs and vaccines, building of hospitals and health centres, provision of portable water supply, etc. All these would no doubt create better atmosphere for better and reliable health status of our rural communities. This paper therefore tries to justify the library as effective tool for understanding the health status of rural communities in Nigeria.

Parameters or indices that should be considered in assessing the health status of rural communities in Nigeria

Health status denotes the state of health of an individual or community as measured by the absence or presence of disease condition, availability or unavailability of facilities such as health personnel and drugs to combat diseases and other health risk factors. The purpose of measuring or assessing community health status is to summarize the condition of a human population (Mooney and Rives, 1978). The manner in which health status is measured or assessed depends on how health is defined. Defining health is a difficult problem because the word health has a multidimensional characteristic (Lerner, 1973). State of physical health is quite different from mental and social health. However, there are certain parameters or indices that librarians in partnership with community health workers should consider when assessing the health status of a community. These parameters or indices include:

1. Population size
2. Sanitation/hygiene
3. Availability and source of water supply
4. Availability of hospital/health centre/health personnel
5. Level of literacy

6. History of epidemic/pandemic/endemic disease(s)

Well structured questionnaire should be used as the instrument of choice in obtaining relevant health information from our rural communities regarding the above mentioned parameters or indices. Such health information data should be analyzed statistically and stored in the library where individuals, government health agencies and other health bodies could retrieve them for community health budgeting and national health plan programmes. In such ways, the library would have succeeded in up lifting the health status of the affected community.

Library Media for Storage and Retrieval of Health Information

Community libraries should collect and compile health data monthly, quarterly or annually and store them in suitable media for easy retrieval by policy and decision-makers and other health information users. In most communities where there is no electricity power supply, such relevant health information should be stored in library folders and diaries and kept intact on library shelves where information users would be able to retrieve them easily. In this modern age of Information and Communication Technology (ICT), community libraries should be equipped with computers and internet connectivity with state and federal ministry of health and other health agencies such as World Health Organization (WHO). With such internet linkages, health information data from communities will be relayed or sent to a centralized health statistics information system in charge of collection, transfer, processing and feedback of data on population health status, health services quality, accessibility, health institutions, resources and capacity throughout the nation.

Library Impact on Health Information Issues

The librarians can partner with community health workers (Medical doctor/Veterinary doctors who work in abattoirs and other health personnel) in order to gain access on vital health information issues for health development and disease awareness. Libraries of all kinds need to make clear their commitment to the welfare and concerns of their users by strong commitment to issues on health. Libraries should be able to harness and store relevant information on many human and zoonotic diseases (malaria, dracunculiasis-guinea worm, onchocerciasis-river blindness, HIV/AIDS and tuberculosis, brucellosis and rabies-zoonotic diseases). The horror and misery of dracunculiasis (guinea worm) with its attendant negative effect on agricultural production is well documented in most libraries in Nigeria. The adverse effect of guinea worm in some rural communities (eg Abakaliki and other parts of Ebonyi State) has necessitated the establishment of the Nigerian Guinea Worm Eradication Programme (NIGEP) in 1988. Guinea worm is prevalent among the rural communities where people lack adequate access to safe

sources of drinking water (Kale, 1977; Ilegbodu et al., 1991; Buki, 2000). The need to eradicate this scourge is a global effort, generally termed as Global Dracunculiasis Eradication Campaign (GDEC). Such health information on diseases like guinea worm, HIV/AIDS, tuberculosis etc should be communicated to the general public by the libraries so as to make the general public become aware of the prevalence. Where a particular disease is said to be endemic in a community, the community library in that area should be able to provide and disseminate information to the rural populace regarding the causative agent of the disease, mode of infection, susceptible age group and preventive measures. Apart from this, the library should be able to organize seminars and symposia on health education. Information garnered from such health education is capable of assisting people to change those behaviours such as wading by someone infected with guinea worm, who has open ulcers; in a pond where villagers fetch their water, and drinking water that has been contaminated with guinea worm eggs, where *Cyclops* (water fleas), the vector of *Dracunculus medinensis* abound, and hence reducing guinea worm infection (WHO, 1992; Kareem, 2000).

Conclusion

The Ministry of Health at both the state and federal level should partner with community libraries in our rural communities for adequate health information of the rural populace to enable the health system agencies measure or assess the health status of their area population. This is very important since health planning is ultimately concerned with resource allocation. Health agencies such as WHO, and Red Cross Society always provide drugs and vaccines and other materials to areas noted to have poor health status following the scourge of some diseases such as dracunculiasis, HIV/AIDS, tuberculosis etc. Community libraries should strive to play crucial role in inculcating positive health values, attitudes, and behaviours that would continue to promote good healthy life style in our rural communities. A community with a healthy life style and free of any of the ravaging scourges (dracunculiasis, HIV/AIDS, malaria, tuberculosis) is bound to have good health status.

Recommendations

1. Community libraries should be equipped with modern information storage devices such as computers, CD Roms/plates, internet facilities for easy storage and processing of vital health information.
2. People living in rural communities should report cases of epidemic/pandemic/endemic diseases to their health centre workers who then would link the community library officials (librarian) for recording, storage and processing of such disease data.

3. Governments, non governmental bodies (FAO, UNICEF, UNESCO, WHO) as well as rich people in our rural communities should help in building community libraries, assist endemic rural communities through fund provision which will be used to provide boreholes and hand dug wells for safe water supply, since safe water is universally acknowledged to be a final panacea to waterborne diseases such as dracunculiasis.

References

Anasi, S.N.I (2010). Curbing Youth Restiveness in Nigeria: The role of Information and Libraries. *Library Philosophy and Practice*. ISSN 1522-0222.

Godbolt, S., Stanley, E., Sturges P. (2010). Public Access to Health: how partnerships can strengthen the role of librarians in developing health. World Library and Information Congress; 76th IFLA General Conference and Assembly, Gothenburg, Sweden. <http://www.ifla.org/enifla76>

Buki, P. (2000). The Progress of Nigerian Children. Paper presented in Children in Agriculture Programme (CIAP) Seminar Enugu, Nigeria.

Ilegbodu, V.A., Ilegbodu, A.E., Wise, R.A. (1991). Clinical Manifestations, Disability and Use of Folk Medicine in *Dracunculus* Infection in Nigeria. *Journal of Tropical Medicine and Hygiene*, 94: 35-41.

Kale, O.O. (1977). The Clinico-epidemiological Profile of Guinea worm in the Ibadan District of Nigeria. *Journal of Tropical Medicine and Hygiene*, 26: 208-214.

Kareem, Y.K.A. (2000). Attitude, stereotypes and prejudice. In B. Agu and S. Shehu (Eds): *A General Introduction to the Social Sciences*. Haytee Press and Publishing Co. Ltd., Ilorin, Nigeria. 305-307.

Lerner, M. (1973). Conceptualization of Health and Social Well-being. In R.L. Berg (ed.), *Health Status Indexes*. Pp. 1-6. Chicago: Hospital Research and Educational Trust.

Mooney, A., Rives N.W.(1977). Measures of Community Health Status for Health Planning. Joint meeting of the American Statistical Association and the Biometric Society in Chicago, Aug. 15-18.

Ogunbode, O. (2004). *Community-based medical education: Single philosophy, varied cocktail*. Ibadan: Evans Brothers, p. 23.

WHO. (1992). Report on Health and Environment that Government should Integrate Health Goals in Agricultural Policies, Including

Promotion of Health of Farmers and Agricultural Workers. World Health Organization (WHO), Geneva.