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**Managing Community Information Centres (CICs) for Effective Provision of Health
Information to Rural Women**

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Abstract

This seminar paper aims at establishing the need for managing community information centres for effective provision of health information to rural women. Data was gathered through desk research and content analysis approach. Data generated from analysis of literature were augmented through brainstorming and interaction with profession colleagues. The concept of community information centre (CICS), services provided by CICs, the role of CICs in transforming rural areas, health information as a concept, accessibility, availability and provision of health information to rural women, justification for community information centres (CICs), and health information needs of rural women were well articulated. The challenges to effective provision of health information to rural women includes gross underfunding of CICs, inadequate knowledge of information needs of rural communities, gap between service provided and actual information desired, dearth or skilled and qualified librarian and indifferent attitude of rural women to information utilization. The strategies that can be adopted by library and information professional (LIPs) to effectively provide health information to rural dwellers include collaboration and partnership with medical practitioners in the provision of health information, training of library personnel, automation of community information centres, creating a profile/database of health information needs of rural women, application of local approach

Keywords: Community Information Centres (CICs), Information Centres, Health Information, Information Services, Rural Women

Introduction

Information is an essential commodity in contemporary society. This commodity is required by members of the society, irrespective of their age, social affiliations, political affiliation and cultural background. Information as a commodity is also required by profit and non-profit organization in order to remain in business activities. Similarly, individuals like organizations, requires information in order to keep pace with modern development. In rural areas information needs arise from the day to day activities rural people involve themselves in (Mtega & Ronald, 2013). Information plays an essential role in the attainment of health status by women in rural areas. In other words health information is a necessity for rural women in resolving the various health challenges confronting them in contemporary society.

Good health according to Ezema and Ugwuanyi (2017:4) means that people remained healthy, have free access to efficient health care, better nutrition, improved living conditions, useful health information and absence of avoidable premature deaths. Health information is necessary not just for resolving with health related issues, but is in line with the global sustainable development goals (SDGs), of which one is geared towards making the world a better place. Rural women needs health information in the areas of treatment of malaria, antenatal and post natal care, nutrition of the young and the old, are of infertility nearest hospitals and medical centres etc. Kamba (n.d-) writing about the place of information in communities asserted that:

Utilisation of information in a coherent form can raise aspiration, through arousing people from fatalism, fear of change, desire for a better life and the determination to work for it. This creates an intellectual climate, which stimulates people to take another look at their own current practices and future perspectives. Ideally, information brings about knowledge, and a knowledgeable community is also an informed community. This signifies that no community can develop without knowledge, and a community can

only become knowledgeable if they recognize and use information as their tool for development.

Community information centres (CICs) are concerned with the provision of problem-solving information (Islam & Mezbah-ul-Islam, 2010). Information is no doubt, a vehicle of change and development and as a result, no organization or individual can experience change and development if information is lacking, neither can there be any meaningful progress, if little emphasis is placed on the use of quantitative and qualitative information. According to Apata and Ogunrewo (2010), information is an important tool used in the realization of any objective or goal set by individuals. It remains the lifeblood of any individual or organization. Information is needed in various aspects of human life such as business, politics, education religious and health. Information is a key contributor to the development of individuals and communities (Ndinide & Kadodo, 2014). Information is so essential that it has become part of every human being. All human beings have information need, either individual or collective (Satpathy, n.d.). Information has power only when used and applied effectively. It plays such an important role in almost every human activity (Ndinide & Kado, 2014).

Good health according to Omotoso (2010) is basic to human welfare and fundamental objectives to development. A healthy population is likely to be a productive population and a productive population will lead to a growing economy. Therefore, no country can be properly regarded as sound when the generality or the people are poor in health. The better the state of health of country, the better able, it is to develop, mobilize and utilize the minds, energies and resources of the people for the lack of development. Health information is becoming a more valuable commodity. The provision of information in this case health information is an essential element of the functioning of any society or community. Health information is therefore necessary to improve health outcomes, guide identification of health problems and population needs, inform planning and design of health intervention to address public health problems, guide decision making during allocation of scarce resources, and provide opportunity for monitoring and evaluating progress towards achievement of health goals (Isibor, 2014; Seitio-Kegokwe, Gaule, Hill & Barnett, 2015).

Community librarianship has come to have a higher profile in recent years as a mechanism by which libraries can contribute to overcoming problems of social exclusion (Chimah, Akpom, & Okoro, 2015). Community information and library services provision is permanent in this era of globalization (Chimah, Akpom & Okoro, 2015).

Nevertheless, significant to this study is the theory of information provision and capacity utilization as put forward by Neelameghan. Neelameghan's theory is based on four premises: provision – availability-accessibility – utility. According to him, the access to information is not equal to all classes of users and the capacity for effective use of the equally differs among individuals also according to their profession, occupation, gender, age, culture, education, social status, marital situation and residence.

Information provision and capacity utilization theory is anchored on the philosophy that access to information is not equal to all classes of users and the capacity for effective use of it equals differs among individuals according to their profession, occupation, gender, age, culture, education, social status, marital situation and residence, the difference in the level of information utilization among users, is that whether the relevant information being desired by the user is actually provided, If it is provided, is it available on time and relevant to the information need, does the user have access to it and if it is accessible is it in the format and language understandable to the user.

The significances and relevant of this theory to the present study is the recognition that access to health information is not equal to all classes of rural women. More so, the capacity for effective use of health information equally differs among different categories of rural women. This implies that the information providing should recognize that women in rural areas do not have equal needs health information as well as for information resources available. Again,, there are differences in the level at which rural (women) utilizes information resources and this is dependent on their search abilities. This paper therefore is focused on community information services and effective dissemination of health information to rural dwellers.

It is against this backdrop that this paper aims at x-raying the place of community information centres in the effective provision of health information to rural women,.

2.0 Clarification of Key Concepts

The key concepts in this discourse will be clarified under this section.

2.1 Information

Information is seen as a major instrument development, and its quantity and quality is seen as a major parameter for measuring the level of prosperity of a nation; hence, there is need to add that such information has to be made available, accessible and communicated (disseminated) appropriately to the right person or group for it to be useful (Aboyade, Ajayi and Amusan, 2016, p.130).

Information can be regarded as data, which can be transmitted between individual and each individual can make use of it in whatever form he/she wants. Information is very essential for capacity building of any nation or community. Access to it enables people to be informed and, be better able to influence and take decision (Kamba, 2009). Information is power and an important working tool for the advancement of humanity and society (Sawyer-George, 2012). Information has assumed paramount importance in all facets of world development and economic growth (Eze, Ezekwoke and Okeke, 2015). Information is a commodity that everyone requires for survival just like air and water (Alhassan and Makama, 2016).

Information is important and useful to everyone in the society, be they farmers, government officials businessmen, because information is a vital resource to development in our fast growing world (Sawyer-George, 2012).. Information has become a commodity that people buy (Eze, Ezekwoke & Okeke, 2015). Information is a vehicle of change and development as a result, no organization and individual can experience change and development if information is lacking, neither can there be any meaningful progress if little emphasis is placed on the use, quantitative and qualitative handling of information (Afolabi, 2004).

According to Alhassan and Makama (2016), organizations and institutions created and developed by man cannot subsist without necessary information which propels it. They further said that, it is through information that man becomes knowledgeable and it is through knowledge that development came to be and is through development that society continues to charge and transform. Information is used by individuals, organization cooperate bodies as well as government agencies (Aboyade, Ajayi and Amusan, 2016). If information is to be effectively

useful, has to be timely, accurate and reliable, which underscores its qualities (Aboyade, Ajayi and Amusan, 2016).

Slawson, Shaughnessy and Bennett (1994) posits that information is not knowledge because knowledge comes from the interpretation of information. For instance, while we are constantly bombarded with data and information, what we want is knowledge and wisdom, which is the ability to understand and apply facts. In which case, information is an essential factor in the development of an individual and the society at large. It helps in dissolving uncertainty in the decision-making process. Information has been recognized all over the world as a vital tool for making decisions and reducing uncertainty. Information is a major ingredient in enhancing the wellbeing of an individual and as such needed in time of decision making (Onuoha & Amuda, 2013).

Information as explained by Ajayi (2004), is an important tool used in the realization of any objective or goal set by an individual. It is seen as a valuable resource required in any society and thus, acquiring and using information are critical and important activities. Information is the result of processing, manipulating and organizing data in a way that adds to the knowledge of the receiver. It is also seen as a catalyst for change, which is as important as life itself. It is substantially different from data in that data are raw unevaluated messages (Chimah & Nwokocha, 2013).

Information is a key building block of the health system, and involves community level players and service provider (Jeremie & Akinyi, 2015). Information is an essential part of all facets of life. It is such an important raw material, that its acquisition and understanding is relevant in decision – making, policy formulation, as well as implementation for growth and survival. He sees information as a commodity that must be acquired and understood before it can be integrated into the decision-making process (Adekanye, 2014). Information remains a very crucial commodity for any person or group of persons and its use in making decisions has been noted (Oyelude & Bamigbula, 2012). It is a very vital instrument for maintaining a healthy society and sustaining steady development in all facets of life and without information; people will not know what to do or where to go in a given situation (Nkiko & Iroaganachi, 2015).

2.2 Health Information

The concept of health information as pointed out by Aniebo (2007) is not a new phenomenon, hence, human beings had from time suffered from one ailment or another which compelled them to seek for medical treatment or advice. Health information is about having the requisite knowledge which enables one to make right decisions concerning health issues. Health information need occurs when an individual experiences a lack of health information. More so, the health information being desired could be for the individual or another person who is significant to the information seeker (Ibegbulam, Eze and Enem, 2015).

Encarta Dictionary (2009) defines health as the general condition of the body or mind, especially in terms of the presence or absence of illnesses, injuries or impairments. Health is thus defined as a state of complete physical, mental, social and spiritual well-being of an individual and not merely the absence of disease or infirmity (WHO, 2013).

Health information encompasses the continuum extending from the specific information needs of patients to a boarder provision of health information for the day user (Wasike and Tenya, 2013). Health information is about having the requisite knowledge that enables one to make the right decisions concerning health issues. Health information relates to those pieces of information that will make the user have physical and emotional stability (Uhegbu, 2001). To him, health information contains such information as sanitation rules, and regulations (environmental cleanliness), family planning, disease control, PTF drugs, immunization, location of good hospitals and clinics, laboratory. He went further including news about international bodies and agencies responsible for global health activities such as world Health Organization (WHO) and United Nations Fund for Population Activities (UNFPA).

Nwafor-Orizu and Onwudinyo (2015) defines health information as that knowledge, facts and news generated from various sources, necessary for good physical and mental condition of human beings. Health information is a determinant of the right to the highest attainable standard of health and access to such information is protected by the right to exchange and import information (Institute for Information Law & Policy, 2015).

Health information refers to the demographic information, medical history, test and laboratory results, insurance information and other data that is collected by a health care professional to identify an individual and determine what type of care that individual should receive or to determine appropriate care. Adeyoyin and Oyewusi (2015) described health

information as information on a continuum between health education and health promotion and access to it contribute to health education as well as promotes healthy lifestyle. It also encompasses the continuum extending from the specific information needs of patients to a broader provision of health information for the lay user (Wasike & Tenya, 2013).

2.3 Rural Dwellers

Rural dwellers refers to people who live in areas in a country or country side that are not urbanized, though when large areas are described, country towns and smaller cities will be included. They have a low population density, and typically much of the land is devoted to agriculture

2.4 Community Information Centre

Community-based information centers (CBIC) are information dissemination points for the survival and growth of the community or the information required by member of the community to make effective use of the available resources around them (Ndinde & Kadodo, 2014). Historically, CIS was introduced by public library in Western countries in response to an expressed need. Public library serves in those countries was at that time almost universally available. This to him, was a need to focus on certain segments of the community which required problem- oriented information and assistance.

2.5 Community Information Services

Community information services (CIS) is basically concerned with the provision of problem oriented information (Anwar, 1996). Working Party on Community Information, a group appointed by the British Library Association defined CIS as “services which assist individuals and groups with daily problem-solving and with participation in the democratic process. The services concentrate on the needs of those who do not have ready access to other source of assistance and on the most important problems that people have to face, problems to do with their homes, their jobs, and their right”

2.6 Community Information Centre Services

Agboola and Bolanle (2013) citing South African Community Library and Information Service Bill defines community based library and information services (CIS) as library and information services established, funded or maintained by a province or municipality to provide library information services to the public or community dwellers. Similarly, Ndinde and Kadodo (2014) in their study of role of community based information centres in development views Community-Based Information Centres as information dimension points for the information required by members of community to make effective use of the available resources around them.

Islam and Mezbah-ul-Islem (2010) conceptualized community information's service as services offered by all types of libraries and other organizations to provide people with information relevant to their everyday life, particularly those in the lower economic and disadvantaged groups who need to learn how to obtain, understand and use information. According to Sharma (2013), community information centre is library or information centre which assists in providing and solving daily problem to the individual and groups participating in democratic process.

Uzuegbu and Uzuegbu (2013) views community information centres as libraries domiciled in economically disadvantaged communities. To them, community information centres are not even the libraries in rural schools, rather, they are information provision centres established to empower rural community members by proactively providing survival information and citizens action information often repackaged by the rural information provider and where necessary, of a temporary nature such as displays and pamphlets brochures, newspapers as well as oral information.

3.0 Accessibility, Availability and Provision of Health Information to Rural Women

Oyelude and Bamigbola (2012) argue that though everyone needs information, women particularly need information on issues affecting their health, that of their babies during and after pregnancy, and for their businesses. They stated further that access to information (ATI) for women is often limited due to cultural, religions and sometimes sociological factors. About half

of the world's population is women who are ideally supposed to contribute half of the world's economic, social and political input (Oyelude & Barrigbola, 2012). Zakar, Zakar, Qureshi and Fischer (2014) observed that in developing countries, one of the most crucial areas of women's lives is the availability of relevant and timely information about their health and disease prevention. Nwagwu and Ajama (2011:270) noted that:

More than 70% of women in Nigeria live in the resource and infrastructure starved rural and remote communities. These women play essential and dynamic roles in the rural economies, being actively involved in agriculture mainly, which is the basic sector of the Nigerian rural economy. The health of these women is critical to food production and sustenance of families.

According to Abdulkareem (2010) as cited in Adekanye (2014:7), information is even more important to the women group because of the fact that women constitute the larger portion of the adult population in the world and also because of the roles they play in the lives of other categories of people (such as children, men, youth, e.t.c.) in the population. Women is regarded as key to the development of any nation because an adequately-informed woman affects the lives of people around her.

Women as revealed by Ibegbulam, Eze and Enem (2015), usually seek information from a variety of sources which are available but the use of these sources are determined by a number of factors which may enhance or hinder the utilization at a particular point in time. As opined by Ibegbulam, Eze and Enem (2015), having information enables one to keep abreast of trends in society and timely, current and correct information can make a lot of difference in the way an individual acts in a given situation.

As noted by Tong, Raynor and Aslani (2014), differences exist in how males and females source information about their health and medicines as women are more active information seekers than men, which may be reflected in how they utilise information sources such as the internet. Nkiko and Iroaganachi (2015:2) noted that:

It is a paradox that despite the era of information explosion, certain groups comprising illiterate women, girls, children and aged still suffer gross deprivation of access to information and experience helplessness in bridging the gap. These groups depend on the good will of some other persons to get informed about their lives, immediate environment and society at large. In order for these vulnerable groups to get some awareness and access the information they need, 21st century libraries must embrace a paradigm shift and be contribution driven as much as innovative in their services.

Omotoso (2010) contends that no country can be properly regarded as sound when the generality of the people are poor in health. The better the state of health of a country, the better, it is to develop, mobilize and utilize the minds, energies and the resources of the people for the lack of development. Ogunmodede, Ebijuwa and Oyetola (2013) admits that information that is needed to study changes in women's health status is either inadequate or unavailable. This necessitates the need to provide timely health information to women to enable them take quality decisions.

Provision of health information in a timely manner would help in ensuring that the health of the society and its members are sound and healthy. Provision and utilization of health information is a necessity for nursing mother to live a healthy life. Health information is a vital resource for individuals who seek information for various reasons such as mere curiosity, self diagnosis, analyzing and evaluating treatment for health (Ogunmodede, Ebijuwu and Oyetola, 2013). The availability, access to and utilization of health information would, no doubt, translate to a safe delivery and healthy life style for women during pregnancy thereby reducing maternal mortality (Onuoha and Amuda, 2013).

The health of women is critical to the sustenance of the families which is the nucleus of the society. Therefore, whatever affect the health of women will tamper with the development process of the system called the "society". Health information is a powerful vehicle for improving the health of a community and it highlights both the existence of problems and

opportunities for improvement. Millions of women in developing countries continue to experience serious health problem related to maternal health or childbirth. The use of health information in contemporary society is a complex behavioural phenomenon.

Health information according to Ngwenya and Matingwina (2014) is essential and must be made available to rural women after ascertaining their health information needs and health information seeking behavior. Wasike and Tenya (2013) opined that access to health information should be timely, relevant, accurate, and authoritative for the use not to suffer serious health consequences.

From the foregoing, it is obvious that access is an important factor in the process of providing and utilization of health information in any society.

4.0 Justification for Community Information Centres (CICs)

Effective information service in the rural community enhances development (Harande, 2009). According to Satpathy (n.d.), it is information transfer and information revolution through which cultural change, socio-economic development of a nation is possible. As rightly noted by Satpathy (n.d.), the social system is undergoing a vast change with the development of information generation and information technology, which has clearly divided the society into two groups i.e. “have” and ‘have not’. The ‘have not’ groups has lead to the formation of a section called “disadvantaged” and the people under this group are not in a position to help themselves. This justifies the high need for community information services to help these people.

Also, Kamba (2009:14) contends that development of any community (urban or rural) is generally dependent upon the use of information which allows equal participation in developmental processes of the society. This to him, is the most promising approach for reducing dependency culture, building self-confidence and self-reliance of the people in that particular community. In another development, Kamba (n.d.) expressed that information well articulated could eradicate ignorance and gives enlightenment on how to achieve economic educational, social, political and cultural objective towards the development of the entire commonly.

4.1 Health Information Needs of Rural Women

The type of information needed by rural women in Nigeria may vary. According to Mtega and Ronald (2013), individual information needs determine the types of information service to be provided and to be provided and the sources to be consulted. Users of information use it for health, others use it for advancement in knowledge, others for politics (Apata & Ogunrewo, 2010). Institute for Information Law and Policy (2015) outlines four different types of health information:

- 1). health education for the general public concerning the promotion of health and the prevention and treatment of disease and injury, including information about available health services (health education).
- 2). information about the treatment of illness and injury when care is provided by a family member or other individual without formal training (lay healthcare information),
- 3). information about the treatment of illness and injury when care is provided by a formally trained health worker (professional health care information).
- 4). information about health policies and laws, necessary to enable participation in decision making about health service provision (Health policy information).

5.0 Challenges of Managing Community Information Centre in Nigeria

According to Bii and Otike (2003) as cited in Nnadozie, Egwim and Ossai-Onah (2010), other factors that militate against efficient information services in rural communities include: lack of co-ordination among the providers on the type of messages, bad timing of radio programmes, use of the wrong languages, poor quality messages and high cost of radio receivers, low level of literacy and underdeveloped infrastructure (especially, electricity networks in the rural areas. As observed by Nnadozie, Egwu and Ossai-Onah (2010), it is very clear that libraries and other community-based information services are faced with enormous funding and infrastructural challenges.

According to Anunobi, Ogbonna & Osuchukwu (n.d), responses from managers of the LICs show that poor funding is one of their primary challenges and that NGO funds are scarcely inadequate to provide the needed resources and information needed by the rural dweller and government do not allocate funds to the centres.

Ifukor (2013) pointed out there is lack of successful transfer of developmental information to rural areas. To her, the channels of information communication that are currently used by various agents to disseminate information therefore tend to further widen the information gap between the agents and the users.

Islam & Mezbeah-Islam (2012) noted that indifference of library personnel, genuine lack of staff and financial resources, staff reluctance to conduct such assessments are among the problems of providing assessments are among the problems of providing CIS through public libraries in Bangladesh. Mtega & Ronald (2013) noted that late delivery of information services, irrelevant information provided, unaffordable costs of information services and high level of illiteracy are mentioned to be among the factors limiting access to information services and others include the poor and unreliable infrastructure, irrelevant time of broadcast of radio/TV programmes and lack of audience research to determine the information needs of rural people equally limited accessibility of information services in rural areas.

Kamba (2008) noted that access to information in rural communities of Africa is affected by a number of drawbacks, evident in ways in which rural information services are coordinated of proper information services, technical competencies. Momodu (2012) noted that most libraries in Nigeria are branches of urban public libraries instituted by state governments. Most of their activities are directed by the urban public library's librarian who is not familiar with the complexity of the information need of rural dwellers. Among the other problems encounter by rural libraries is the inadequacy of material in local language, non circulation of vernacular newspaper, inadequate finance, and unavailability of audio-visual and lack of personnel.

In summary, the challenges to managing community information centre in Nigeria for effective dissemination of health information includes but not limited to:

- Lack of health information literacy among library and information practitioners

- Inadequate knowledge of information needs of rural communities
- Gap between service provided and actual information desired
- Dearth of skill and qualified libraries
- Indifferent attitude towards reading culture
- Scope of library and information services provisions

6.0 Strategies for Effective Provision of Health Information to Women in Rural Areas

The following strategies can be adopted by library and information professional (LIPs) to effectively provide health information to rural dwellers:

1. ***Collaboration and partnership with medical practitioners in the provision of health information:*** LIPs can partner with medical practitioners to package health information that are of utmost relevant to the health information needs of women in rural areas, for instance, synergy between LIPs and medical practitioners would help in dissemination of timely health information that would be of great benefits to rural women.

2. ***Training of library personnel:*** librarians should be trained on medical terminologies as this would help them to have a better understanding of health information to provide to rural dwellers and more so, will be well positioned to answer questions that would be posed to them. Without knowledge of medical terms, it will be difficult for librarians to really satisfy the health information needs of rural women. This also justifies the needs for partnership.

3. ***Automation of community information centres:*** Automating community information centres in Nigeria is one of the major ways through which health information can be effectively disseminated to rural dwellers. When CICs are automated, having access to databases of health related resources becomes easy. Then, LIPs can be well positioned to provide accurate and timely health information to rural women.

4. ***Creating a profile/database of health information needs of rural women:*** LIPS in CICs should endeavor to create a profile for women in rural areas, this profile will be used in matching the health information needs of women in rural areas. This will help in providing specific and direct health information to specific users who has need for it rather them the generic approach that often do not yield result

5. ***Application of local approach:*** LIPs in CICs should apply local approach in the provision of health information to rural dwellers. For instance, most women in rural areas are not

literate, as such cannot read nor write, and therefore would not appreciate health information no matter how relevant and timely it is. This justifies the need to repackaged health information in local dialect. This can be achieved by translating them into local dialect and record the information in audio tapes. Also, community town halls can be used as a centre for disseminating health information, where an interpreter would be on ground to interpret such valuable information to the understanding of rural dwellers.

7.0 Conclusion

Women are integral component of any society and part of the driving force of development in both developed and developing nation. Since, the women occupies a central position in the society and its overall development, it is pertinent that what affects them should addressed accordingly. One of such areas that affect women is health. There is need to effectively provide health information to rural women to enable them meet their information needs. Library and information professionals are expected to explore and harness the community information centres as channels for provision and dissemination of health information to women in the rural areas. To effectively provide health information to rural women, adequate knowledge of their health information need is one of the pre-requisite, also understanding the formats of information repackaging that will be suitable and accessible to rural women is of paramount importance. No doubt, CICs is an essential instrument through which health information can be provides to rural women.

7.1 Implications for public libraries

The study has significant implications for public libraries in Nigeria. It is imperative that public libraries which has a close affinity with community information centre should be repositioned community information centre should not be isolated from public library services.

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