

Information for the Control of the Spread of HIV among Women in Nigeria- The Role of Public Libraries

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Abstract

HIV has been widely recognized as a pandemic defying decades of global efforts at producing a cure. At the inception of the disease, women were not as much affected as men. In recent times however, women are gradually becoming the “endangered species” as a result of the increased infection rate as well as the high mortality rate of women as a result of HIV/AIDS. In the absence of a cure coupled with the inadequate medical facilities and services being experienced in Nigeria, the best way to control the spread of the disease is information for its management and prevention. The public library is charged with the responsibility of making information available to the right people and at the right time, irrespective of their status, age, religious or educational background. This paper therefore examined the different reasons why women should be made the target of HIV prevention strategies and interventions. It also discussed the role of public libraries in curbing the spread of HIV among women and highlighted the different ways through which the women can be reached using different innovative information services.

Keywords:HIV/AIDS, information, women, public libraries

1. Introduction

The burden of HIV/AIDS as a global pandemic cutting across genders, races and age groups has generated efforts at controlling the spread through information awareness initiatives and developing a cure. AIDS is an acute, life-threatening condition which is caused by the human immune-deficiency virus (HIV). More than two decades after the discovery however, in spite of the much attention given to it, science is still grappling with getting an effective cure for the widespread global threat. The continued spread has also shown that much still needs to be done in the area of information awareness for control of the disease.

When HIV/AIDS emerged in the 1980s, statistics showed that men, especially the bisexuals were the most affected (UNFPA, 2014). However, current figures point to the fact that women account for nearly half of all people living with HIV/AIDS worldwide. Over the past two years, the number of HIV-positive women and girls has increased in every region of the world. In sub-Saharan Africa alone, out of the 23 million adults aged 15–49 and infected with HIV, 13.1 million, or 57 per cent, are women (Mataka, 2008). Despite these alarming figures, she averred that the toll that HIV has taken on women, especially those in Africa, has been largely underestimated due to the fact that the statistics are more often than not only derived from the status of pregnant women who visit the health centres for antenatal.

Many women are very vulnerable to HIV even though they do not practice high-risk behaviour. The situation is so serious that even in some places; marriage itself is a risk factor (UNFPA, 2014). As noted by Karim, Sibeko and Baxter (2010), although the exact contribution of HIV infection and AIDS to maternal mortality rates is not known, there is growing evidence that HIV/AIDS is becoming the leading causes of pregnancy-related death in some developing countries. The death of women from AIDS deprives families and communities of their love, care, resourcefulness and enterprise (UNFPA, 2014).

On the probable reasons for the increased rate of HIV infection among women, Mataka (2008) stated inter alia:

The socio-economic status disparity between men and women has a great impact in fuelling the spread of HIV, among women and girls in particular. Cultural norms and early marriages further increase the vulnerability of young girls to infection. Poor communication around sex issues limits their ability to negotiate safer practices and may force women to remain in risky relationships. And socio-economic problems may limit women’s access to counseling and treatment. In this kind of set-up, women do not own property or have access to financial resources and are dependent on their husbands, fathers, brothers and sons for support. Without resources, women are susceptible to sexual violence, and the threat of this violence also limits women’s ability to protect themselves from HIV and AIDS.

An estimated 3.14 million people in Nigeria are living with HIV/AIDS—the third highest burden of HIV infections in the world after India and South Africa (USAID, 2014). Current figures indicate that 60 percent

of people living with HIV/AIDS in the country are women (National Agency for the Control of AIDS, 2013), as females are more susceptible to the virus and tend to get infected at a younger age than men (Sangosanya and Siyanbola, 2005). The availability of antiretroviral drugs in AIDS clinics all over Nigeria does give some elements of succor to the patients. Nevertheless, the treatment procedure is unusually complex and almost interminable. Patients do lose hope due to stigmatization, the stress of the disease and/or expose themselves to secondary infections through wrong behavioral patterns thus continuing the spread (Karishma and Rivett, 2004).

According to Schneiderman, Antoni and Ironson (2011), patient management is now regarded as an integral part of HIV/AIDS treatment. This includes cognitive behavioural stress management whereby attempts are made to manipulate thoughts of the patient which might be irrational through provision of information that would help in focusing directly and identifying acceptable patterns of behaviour (Brown and Venable, 2008). Aiyepoku (1997) has emphasized that information is as important as labour, materials and capital while reliable information which can aptly be accessed in libraries is a necessity for building awareness about HIV/AIDS (Olabisi, 2001). According to Peterson and Obileye (2002), information is vital to People Living with HIV/AIDS (PLWHA) for the relief of physical pain and mental anguish.

The need therefore becomes quite pressing for intense campaigns to be mounted to check the spread of HIV/AIDS. These campaigns would not just be limited to the health sector as the major caregivers and the media. Osinulu and Amusa (2010) opine that libraries play a most crucial role in meeting the information needs of different segments of the society. The drive should therefore extend to the public libraries that remain the people's university and the common man's academy of information in all spheres of life.

Public libraries provide services to the entire populace- whether in rural, urban or semi-urban areas irrespective of age, gender, social or academic status. They thus provide access to a wide range of information resources (print, electronic, audio visuals, realias, models) using different services (SDI, CAS, Indexing, displays, mobile books drops, community outreaches, etc). All these are geared towards ensuring adequate information provision to every single user of the library and member of the user community. These unique features of the public library place the establishment in a unique position to effectively participate in the control and management of HIV spread unlike the other types of libraries.

The purpose of this paper therefore is to clearly spell out the role of the public libraries in the control of the spread of HIV/AIDS among women in Nigeria through Information awareness initiatives, with the aim of encouraging the Library and information professionals working in these libraries to take their place in this global effort at controlling the spread of HIV/AIDS.

2. Related literature

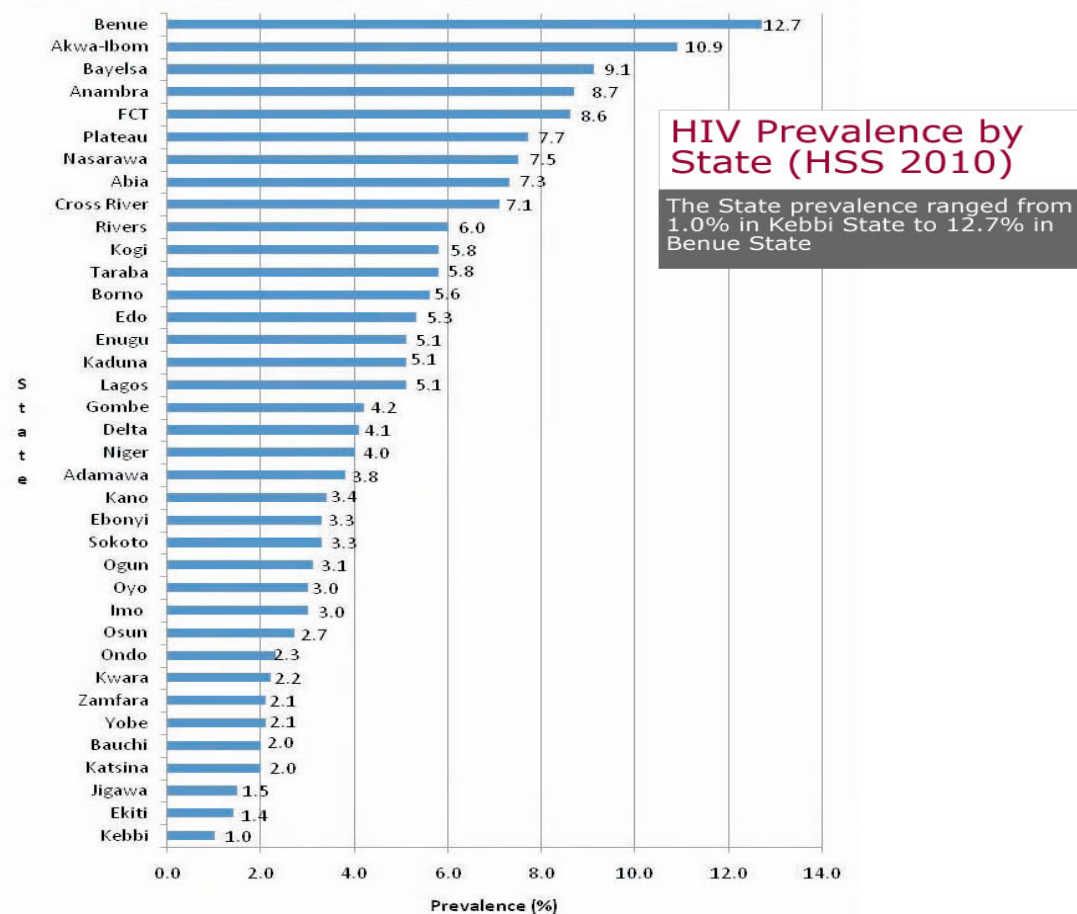
Global efforts have so far proved insufficient in controlling the spread of the pandemic or to extend the lives of the majority of those infected. Current coverage shortfalls, combined with the relentless expansion of the epidemic, underscore the acute need for rapid scale-up of prevention and treatment interventions (Bertozzi et al, 2006). According to Steen, Wi, Kamali and Ndowa (2009), the success of these efforts depends not on reaching all people but on reaching the right people with effective interventions. Thus literature reviewed will be narrowed to reaching women with effective interventions and how the public library could do this using information as the key tool.

3. Women as the major focus in curbing the HIV spread

Nigeria accounts for 2 percent of the world's population, contributes to about 10 percent of global maternal, infant and child deaths and as the most populous country in Africa, she accounts for about 8 percent of the global burden of HIV/AIDS (Abdullahi, 2006). Most worrisome is the fact that, HIV/AIDS sero-prevalence has increased by more than 300 percent in 2001 with much higher rates reported among female sex workers in Nigeria. A sero-prevalence survey carried out by the Federal Ministry of Health in 2003 estimated that of the 3,300,000 people with HIV in Nigeria, 1,900,000 or 57% were women and this situation has brought about early death among womenfolk. Citing Centres for Disease Control and Prevention, Amune, Aidenojie and Obinyan, (2012) added that in 2008 an estimated 25% of adults and adolescents living with HIV infection were female.

A look at the chart showing the HIV prevalence rate across the different States of Nigeria shows that it is indeed a matter of concern.

Fig. 1. HIV Prevalence in the 36 States of Nigeria and Federal Capital Territory (FCT)
http://www.nigeriahivinfo.com/hiv_state_statistics.php



Action Aid (2004) estimated that in 2003 17 millions of the 37.5 million people who have HIV/AIDS were women while 58% of adult people living with the virus in Sub-Saharan Africa were women. This is bothersome when juxtaposed with the fact that when women who are considered the care givers in the family are affected by this disease, it puts an additional strain on them physically, mentally and emotionally (Iwere, 2000).

A number of issues surrounding the mode of transmission of HIV may have accounted for the high infection rate among women especially in the sub-Saharan Africa and Nigeria in particular. The main routes of transmission include: heterosexual sex, blood transfusions, mother to child through childbirth, homosexual sex and sharing of sharp objects like injections for drug use. The predominant mode of HIV transmission globally however is sexual intercourse, accounting for approximately 80 percent of infections while in Sub-Saharan Africa it accounts for more than 90 percent of infections. In addition, male-to-female transmission is more likely than female-to-male transmission (Bertozzi et al, 2006). Sub Saharan regions remain the hardest hit in the male to female transmission. This may not be unassociated with male dominance, low-income earning which contributes to the inability of females to access ARV drugs, domestic violence, rape, including marital rape, unsafe abortions, human trafficking and harmful marriage practices, socially defined gender practices and socioeconomic issues associated with poverty which is prevalent in the country. Examples abound of women's inability to negotiate safe sexual encounters, have easy access to information on the prevention of HIV/AIDS and treatment of the disease once it is transmitted (Adekeye, 2009). The aftermath of this transmission is detrimental to the country as it has many consequences.

One of the main consequences facing infected women of childbearing age is the transmission of HIV to their children, which occurs in 20% to 35% of cases. Mother-to-Child transmission (MTCT) is already being experienced at a high rate in Nigeria. Nigeria accounts for one third of all new HIV infections among children in the 21 priority countries in sub-Saharan Africa: the largest number of any country and 60,000 Nigerian children were infected with HIV in 2013. Thus despite the efforts of the Federal and State governments to check the spread of HIV, the prevalence rate of HIV among Nigerian children has remained relatively stagnant with no significant improvement; while that of several other countries was improving with fewer prevalence rates than before (Bello, 2014). In addition, infection of African women at an early age due to early marriages, discriminatory inheritance practices, human rights violations of the girl-child and inadequate treatment are often

responsible for premature deaths and an increase in the orphan population (Niang, 2014).

Citing UNAIDS, Bertozzi et al (2006) postulate that the probability of becoming infected through an HIV-contaminated transfusion is estimated at more than 90 percent, and the amount of HIV in a single contaminated blood transfusion is so large that individuals infected in this manner may rapidly develop AIDS. Women have the greater tendency of having blood transfusion. Blood loss occasioned in pregnancy and child birth related issues as well as monthly flow, fibroid and other such cases usually result in haemorrhagic anaemia that more often than not lead to blood transfusion.

Female circumcision also known as Female Genital Mutilation (FGM) is another predisposing factor that greatly exposes the female gender to transmission of HIV/AIDS. According to Abiodun, Oyejola and Job (2011) the practice is thought to raise the social status of the girl and helps in generating income for her family as she is more likely to get a high dowry. Succinctly put, the practice;

...has high probability of increased transmission of HIV infection because biologically, any sexually-related viral or bacterial pathogen has increased propensity given trauma or pre-existing laceration to the vaginal epithelium thus FGM increases the risk of vaginal epithelial damage and consequently increases the probability of HIV infection (Monjok, Essien and Holmes, 2007).

Furthermore, in families where both partners are infected with HIV/AIDS, resources are more likely to be spent on the male head. Meanwhile in the African traditional society, men's and children's nutritional needs are considered above that of the woman and this invariably leads to the weakening of the immune system of the HIV infected woman. In addition, women are the primary care-givers in the household and are more likely to continue taking care of others in the home even when they are ill themselves and facing domestic violence and discrimination by the community due to stigmatization (Iliyasu, Abubakar and Galandanci, 2011; Akanbi, 2011). They are also more often forced or coerced to leave schooling and paid employment in order to look after relatives with HIV/AIDS (Ciroma, 2006). Furthermore, when females are infected with the virus the household income is reduced, there is a fall of agricultural labour force and produce in the country as most small scale farmers are women while there is increased family burden (Ugwu, 2009).

4. HIV Control through Information- Role of public Libraries

Okwilagwe (2000) observed that information is an input, which reduces the level of uncertainty in any decision process. It is thus a crucial factor for a healthy life. Information is a key tool for arresting the spread of HIV/AIDS as Ada, Okoli and Okoli (2013) point out that limited access to information puts women at the risk of HIV/AIDS. It is indeed the most potent weapon available for the prevention and even the cure of HIV and AIDS (Rapu, 2007). In the words of Bertozzi et al, (2006) "accurate information, however, is indisputably the basis for informed policy discourse—a vital ingredient in the fight against fear-based stigma and discrimination". Momoh, Moses and Ugiomoh (2006), further declared that preventing and controlling the spread of HIV/AIDS is possible through appropriate and timely information that would create awareness and consequences of risky sexual behaviour. An un-informed person is de-formed as ignorance is indeed a great disease. This popular saying emphasizes the need for more public information about the HIV pandemic, especially among high-risk groups. Continued ignorance will lead to more infections and continued spread of the virus.

The public library has a duty to dispel all forms of ignorance in the community it serves through disseminating correct information.

UNESCO Public manifesto (1994) declares,

The Public Library is the local centre of information, making all kinds of knowledge and information readily available to its users... Specific services and materials must be provided for those who cannot, for whatever reason, use the regular services and materials.

Again a public library has been defined as one;

established under state enabling laws or regulations to serve a community, district, or region, and provides at least the following:

- an organized collection of printed or other library materials, or a combination thereof;
- paid staff;
- an established schedule in which services of the staff are available to the public;
- the facilities necessary to support such a collection, staff, and schedule, and
- is supported in whole or in part with public funds.

There may be only one public library in a community or there may be a public library system. Just as a school system has elementary and secondary schools a public library that administers a branch, a bookmobile, a central library, and/ or a books-by-mail service is called a public library system (Institute of Museum and Library Services, 2011).

According to McDaniel, Babcock-Ellis and Hernandez (2011), the clientele base of public libraries is not restricted by socioeconomic status, cultural heritage or any factors thus the institution is able to serve as a

bridge between information on any issue and the entire populace. The informational role of the library which centres on bringing to the individual or group accurate information quickly and in-depth, particularly on topics of current concern cannot be overemphasized (Shada, 2002).

Since there is yet no known cure or vaccine for HIV/AIDS, information for prevention and control of the disease seems to be highly imperative. Controlling the spread of the virus is not just a medical issue; it is also a social one. This makes it necessary for all to be involved to prevent the virus from spreading as quickly as it has in the past. While a study by Edewor (2010) revealed that libraries are not being consulted by People living with HIV/AIDS (PLWHA), a more recent study by Arinola and Adekunjo (2012) identified the issue of low library use as source of information on HIV/AIDS as a factor that contributes to the spread of the pandemic. The public library is involved in this because it is usually being funded with the taxpayer's money. The least it can do is to give back to the society by contributing their quota in warding off the HIV menace threatening the continued existence of the society.

5. Public Library Services for control of HIV/AIDS pandemic

Drawing insight from the literature studied and adapting it to the public libraries, the public library can play their role through in controlling HIV spread in various ways.

6. Library outreaches

Library outreaches seek to move libraries beyond the recognized boundaries of services and clientele to improve access to information and user base by reaching the formerly unreached. Thus public libraries could organise outreach services for informing the women groups in the communities (example August women gatherings, women cooperative gatherings, market women, girls' gatherings, etc) about the HIV/AIDS disease and how they may participate in programmes designed to prevent and control the spread of the disease. According to Beyond access.net (2012), public libraries ought to be in the forefront of trusted institutions that fight against HIV/AIDS with reliable information. This can be done through the establishment of health reading camps for women and other groups to discuss books and information about HIV/AIDS as was initiated in 2011 by the Ugandan Community Libraries Association in Kitengesa community.

7. Seminars

Organizing seminars and talk shows on issues pertaining to women rights to say No, as well as those aimed at improving the status of girls and women by providing training on self empowerment and life skills is another way through which the public libraries can join in the control of HIV/AIDS. This is because ignorance of these rights, lack of knowledge of reproductive health issues and poverty is the root cause of HIV transmission among women as they find it difficult to make positive life-saving choices that will protect them from male dominance (Ajaiyi, 2003). Creating a forum whereby women living with HIV can come together and share their experiences would achieve a lot in creating awareness on the prevention of the infection. This is necessary as stigma remains one of the most significant challenges in developing countries for all HIV/AIDS programs, which involve the prevention and care continuum. Librarians could also be advocates and educators on HIV/AIDS. The Public library being used as a gathering point could create a neutral ground for the attendees who can come under the cover of making use of the Library as every other library user (Ghosh and Bhatt, 2006).

8. HIV/AIDS corner

Collecting HIV/AIDS information resources including ephemeral materials like pamphlets and tracts, and arranging them in a prominent corner of the library where any user can easily access them, will increase the number of people that will know more about the disease. This will help in the control and prevention of the pandemic.

9. Library displays

To promote users informed awareness of the disease, displays can be organized by the library on a quarterly basis on HIV/AIDS. These displays would be announced in churches, schools and on the mass media to drive traffic to the library. According to Dutka, Hayes and Parnell (2002), displays play a substantial secondary role in promoting and facilitating access to a library's information resources as well as enhancing awareness and education about the topic on the display board.

10. Information repackaging

Not being sure of where to get information, who to ask for accurate information and lack of reading ability have been identified as challenges individuals face in accessing information (Ilo and Adeyemi, 2010). Public libraries can engage in information repackaging to ensure that all that women need to know on HIV/AIDS is passed across to them. Through information repackaging, the information content is scaled down (possibly in the

vernacular or any such local content) so that it would be easily understood by women with little or no education. Easy to read reports with high pictorial content can be used to pass on reliable information to the semi-literate (Komolafe-Opadeji and Latunde, 2008). Repackaged Information on the pandemic can also be transmitted orally to the unlettered during library outreaches.

11. Partnerships and collaborations

The public library can enter into partnerships in order to collaborate with NGOs and community health workers, the media and outside agencies for educating women on the subject of HIV/AIDS as well as for being centres where antiretroviral (ARV) drugs can be obtained free or at a subsidized rate. This is already in practice in the US where a collaboration exists between government agencies concerned with Health services, public health organizations and libraries with the main mission of helping to find and use information effectively to improve and protect the public's health as pertains to the control and prevention of HIV/AIDS (phpartners.org, 2014).

Also Beyond access.net (2012) reports that when it was noticed that HIV/AIDS infections were on the rise in a small Nepalese village, the local Non- governmental organizations (NGOs) established a partnership with the Laxmi Narayan public library and resource centre to provide counseling services as well as distribution of ARV drugs to community members. HIV/AIDS patients became steadier in receiving treatment as they no longer had to travel long distances for their drugs. Thus this initiative helped the control and management of the disease in Nepal.

The public library can also partner with organizations and NGOs for distribution of fliers and notices about the disease so that users can take them individually to read in the library or at home. Furthermore, librarians in the public library can collaborate with professionals in other disciplines and occupations such as medicine, guidance and counseling, sociology and mass media for joint efforts in using information to control and prevent the spread of HIV/AIDS (Fari and Omoniyi, 2010).

12. Special services to HIV/AIDS patients

PLWHA face stigmatization both real and imagined as HIV/AIDS carries with it negative perceptions that evokes fear and denunciation of those afflicted with the disease because of the notions that the disease is associated only with people who flout the known social structure of a community and the norms and values that are a part of their everyday lives like the homosexuals, bisexuals and individuals with perceived loose morals (Herek, Capitanion and Widaman). These feeling arouse stigma from family members, neighbours, care-givers and the society at large (Holzemer and Uys, 2004). According to Parke and Aggleton (2007) the negative social attitudes towards People Living with HIV/AIDS (PLWHA) make it difficult for them to adjust socially and psychologically. Also, discriminations against PLWHA can lead to denial of the disease and delayed initiation of HIV treatment subsequently making it easier for the disease to spread. According to Karishma and Rivett (2004), discrimination against PLWHA and the stress of the disease can lead to depression and loss of hope thus encouraging negative behavioural patterns that can expose them to secondary infections and the continued spread of the disease.

Introducing the use of Short Messaging Service (SMS) for delivery of information by public libraries is a viable option through which women living with HIV/AIDS could be informed on how to take care of their health as they could receive information personally and privately. The service has been introduced in the public libraries of Anambra State. Initially, permission was sought and obtained from PLWHA that visit the HIV clinic at Nnamdi Azikiwe Teaching Hospital, Nnewi for anti-retroviral drugs. A databank of the phone numbers of PLWHA was created. Then specific content was designed which is suitable for each SMS recipient as pertains to her individual stage of disease and treatment. Different SMS contain not just health related information on the need to take the prescribed drugs, but also inspirational messages that promote positive mindsets, information on the health nutrients of local foods, as well as the need to avoid behavioural patterns that would help in spreading the disease.

13. Conclusion

The effect of HIV/AIDS in the society cannot be over emphasized; more so it's devastating effect on women in sub-Saharan Africa who for biological, socio-cultural and economic reasons are most vulnerable to the disease. This, on the other hand is taking its toll in the region especially in Nigeria as these women constitute an important part of the country's workforce, and the major life and care givers for the continuity of the society. The challenges in the nation's health care system have made quality health care delivery to be out of the reach of many of these women, and as such information is pivotal to tackling this menace and curbing the spread of HIV among women in Nigeria. It is imperative therefore that the public libraries all over the nation rise up to this challenge through delivering timely information to the right target group using the various flora discussed in the study.

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