HEALTH INFORMATION NEEDS OF NIGERIANS: AN INTEGRATIVE AND INCLUSIVE APPROACH TO LIBRARY SERVICES FOR NATIONAL DEVELOPMENT

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October 10, 2023

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Dedication

This work is dedicated to GOD, my creator who has been my strength.

THE PRESENTER

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1.   PREAMBLE

I consider it a great privilege to deliver this inaugural lecture today. I am most grateful to Almighty God for the gift of life; most especially for the gift of this day, which is very significant in my academic career. I will forever treasure this opportunity that has been offered in God's plan to do this in front of a hallowed audience such as this.

Mr Vice Chancellor, Sir, I thank you for making this possible. Thank you.

My lecture today is on **Health Information Needs of Nigerians: An Integrative and Inclusive Approach to Library Services for National Development.** The greatest attribute of an accomplished humanity is a healthy and happy community, which draws its wisdom for healthy living from a pool of health information that resides in community archives such as oral traditions, fables and artifacts. In modern times, libraries are the holders of such information and they have a responsibility to facilitate the transmission of this information to the end users.

The importance of health information to the development of nations is non-negotiable. It is essential for gathering and unraveling of relevant data for curtailing of health challenges such as HIV& AIDS, Ebola and Corona Virus Disease (Covid-19). Health information gives a clearer picture of health and sickness across entire populations and this knowledge can help prevent the spread of diseases and improve individual health, (World Health Organization, 2014; Egunjobi and Akerele, 2014). Availing clientele of health information is therefore incumbent on libraries as they are the store houses of information in all forms: books, newspapers, journals, pictures, internet, to mention but a few. This paper is therefore a trajectory of my romance with theory and practice of solving health related challenges through information sharing – as a librarian.

2. MY JOURNEY THROUGH LIBRARIANSHIP FROM MKAR TO LAFIA

I give all the glory to God Almighty who deemed it fit to bring me forth to this world through my amiable parents Chief Anchaver Kpabo and Mama Ruth Iyough Anchaver. I thank God for my grandmother Mama Ingyor Nyihemba

of blessed memory with whom I grew up from age three and who in her wisdom enrolled me into primary school. After my primary school I was admitted into Government Girls Secondary School Idah now in Kogi State where I completed form three. I was transferred to W.M.M Bristow Secondary School Gboko.

After making my GCE, I had a challenge of choice of course for my career. My Chaplain then Rev. Dr. Ben Oruma of Department of Library and Information Science from Ahmadu Bello University, Zaria advised me to enroll for Diploma course in the department. That was the first time of my knowing that a course like that existed. As soon as I bagged the diploma, I was employed at the then newly established Institute of Christian Studies, Mkar, Gboko, Benue State, now NKST, University of Mkar. I was given a letter of employment as the "University Librarian" (addressed in a borrowed robes) with two other junior staff as Library Assistants.

This baptism at Mkar was not an easy task for me at all as the pioneer head of the library without cognate experience. My interest in the job was great; and so was my desire for self-development. Eventually, by God's grace, I proceeded to Ahmadu Bello University, Zaria for my Bachelor Degree Programme in Library and Information Science and soon after my graduation in 1994, I got automatic employment with the Benue State Primary Education Board, Makurdi as their pioneer Librarian. Two years later, I got employed at the Benue State University, Makurdi where I worked from 1996-2015 in different departments of the main library and later at different points of my career in BSU as a Law Librarian, a Medical Librarian and an acting University Librarian.

It was on completion of my Masters Degree Library and Information Sciences during which I researched on *Resources, services and problems of Medical School Libraries in Nigeria* that the management of Benue State University, Makurdi posted me to head the newly established College of Health Sciences as their pioneer Medical Librarian in 2005. I eventually acted as University Librarian for four months to fill in a lacuna. The experience I acquired in these Libraries was a training ground for me for the greater task as the pioneer University Librarian, Federal University of Lafia under the pioneer Vice Chancellor Prof. Ekannem Eka Braide and later, Prof. Muhammad Sanusi Liman.

On my first day of assumption of duty, I went to report to the Vice Chancellor in her office. She was there with the then Chairperson, Accreditation Committee, Prof Josephine E. Odey. As soon as the VC sighted me, she declared "Here she comes. Come and take over your job". I was actually long overdue to assume duty and got to know that the first accreditation was at hand. The Vice Chancellor's anxiety was justified because the Library being the focal point of quality assurance that comes with accreditation was without a University Liberian until I came along. Let me assure you that it was a herculean task getting settled in the rush of that first accreditation exercise. But again, God saw me through it all with the support and cooperation of management and staff of the library.

Basically, my experience as a Medical Librarian in the Medical Library informed my interest in research into health information and how this can be propagated through library services. In 2005, HIV and AIDS was at its peak with no hope for a cure or vaccine. Also, there was little awareness about the scourge with misinformation and fake information being peddled everywhere. I attended our professional Conference at Abeokuta and HIV and AIDS was the focus. Apparently, I was made to understand that Benue State had the highest HIV prevalence rate of 10.0%. My personal experience with HIV/AIDs victims who were facing a death sentence, the trauma of relatives not knowing what to do and the myths surrounding the disease as well as stigmatization were all the motivation that I needed to tailor my Ph.D research to fulfil a desire to solve a problem on health information needs.

Adesewa from the Federal University of Technology, Akure, on the 7th August, 2014 around 7: 08 pm along with her friends decided to play a prank, to hatch a hoax about a cure for Ebola and watch how many people would fall for it within their circle of friends in the Blackberry messenger community telling them that the Ministry of Health has asked everyone to bathe with salt and warm water and drink some of it. "Once the word was out, it spreads like wide fire". The ethnical impiety of this cruel joke was the mechanism of the rapid spread over Nigeria and abroad that resulted to many deaths and many people were hospitalized as a result of excessive intake of salt. Instances like the chloroquine poisoning in Lagos due to Trump's endorsement have already occurred. This was an undoubtedly irresponsible joke that exploited people's panic and helplessness about a strange and deadly disease. In moments of disabling anxiety and panic, people's credibility is often easily malleable. The notion of using warm, salty water as a treatment for Ebola lacks scientific evidence and has been categorized as health misinformation. The claim gained significant traction on social media, but individuals seeking accurate information about Ebola and its treatments should rely on authoritative sources such as the World Health Organization (WHO) and the Centers for Disease Control and Prevention (CDC).

Nigeria's ongoing struggle with misinformation and disinformation has been particularly detrimental during health pandemics, as seen during the Ebola crisis and now the COVID-19 pandemic. The Centre for Democracy and Development has been tracking misinformation patterns, revealing that Nigeria faces not only the battle against the virus but also deadly impact of misinformation's. Similarly, COVID-19 misinformation narratives have evolved, including claims of African immunity or garlic cures. The power of social media, especially WhatsApp, amplifies misinformation, making it vital to provide alternative sources of accurate information. The need for openness, transparency and accountability has never been stronger. Where civic space shrinks and disinformation and misinformation expands, access to information has helped counterbalance the information, playing its role as a tool for transparency through which the public could exercise their right to information. This facilitates public participation and promotion of civic engagement in response to the crises.

In order to address the issues of health, the United Nations in 2015 unanimously set the 2030 Agenda for Sustainable Development adopted by member countries for good health and wellbeing, protect the planet, to end poverty, and ensure prosperity for all, while strengthening universal peace in large freedom. The goals acknowledged access to information as a necessary enabling mechanism for transparent, accountable, and participatory governance, rule of law and peaceful societies as epitomized by Sustainable Development Goal number 16. Sustainable Development Goal number 10 calls for states to ensure public access to information and protect fundamental freedoms, in accordance with national legislation and international agreements.   In line with this goal, States and non-State actors are asked to show commitment by increasing basic resources and services to enhancing the health status of citizen (United Nations, 2018).

An evaluation of the SDGs and RIO declaration (1992) has confirmed that access to information is key element of sustainable development that leads to the wellbeing of citizens. Human Rights Council in 2020 resolution on freedom opinion and expression general assembling A/HRC/RES/44/12 adopted on 3[rd]May 2021 upheld information as a public good that serves as a shared resource for the whole of humanity. Emphasizing the importance of press freedom, independence and pluralism to guarantee access to information. Adequate and relevant information provide the formal base for making choices. This is the major component of health promotion, targeting increase in knowledge and information services relating to health.

Information is an indispensable tool of growth and development for individual group, communities and nations. Its acquisition is essential to pave way for an individual to be self-reliant irrespective of physical or emotional disposition. Since information is the focal point of Library services, it is the duty of the library to identify the information needs of its users and ensure their availability in the library for immediate use of the communities they serve. (Aguolu & Aguolu, 2002).

Therefore, information is one of the needs of man that resides at the cognitive domain of human mind hence, a basic requirement for every member of society for their healthy living. This is why information has been described as the fifth resource and need of man in ranking after air, water, food and shelter

(Thammannam, 2017 & Internet Public Library –IPL, 2022).

If information is a key element of sustainable development, then libraries are the key players. Information is the life-wire of any organisation and the first century has witnessed remarkable evolution of information. Health information is pertinent for medical practice all over the world. This is likened to knowledge, facts and news generated from various sources that are necessary for good physical and mental conditions of human beings. It is the duty of the library to identify, acquire, organize, disseminate and retrieve the information needs of its users and ensure their availability for immediate use (Aguolu & Aguolu, 2002). That is why different libraries exist such as public, academic, school, special, private, and virtual libraries to meet information needs of Citizens for national development. The critical nature of information makes it a solid pillar that must be utilized in order to realize a healthy life. Around the world, in developed as well as developing countries, libraries play a pivotal role in the dissemination of information and knowledge. Libraries serve as a hub for individuals to acquire knowledge and disseminate among the society considering their diverse information needs. Libraries have served as avenue for enhanced access to reliable information including health information and likewise promote preventive practices and early intervention, leading to a healthier population; the reason for which librarianship is about providing the pathways to power that society needs to reinvent and empower itself. The library is a provider of information and knowledge. It holds the knowledge and wisdom of the past in a manner that allows the present to mirror itself for both stability and progress. No other profession is able to provide for the cross-pollination of ideas like librarianship, and no institution is able to service all other branches of knowledge in the manner that the library will do. Librarianship is described as the milk that nourishes the other profession to greatness.

Do not let social media misinform you, library and information science is a multi-disciplinary field that focuses on information management, information technology and information retrieval skills and dissemination. Librarians adapt to global revolution; we follow up on users satisfaction. We can collaborate, possess valuable skills and add value. Due to the nature of our training, we stand out among various disciplines. Hence, there are some things that people will not be tired of running after, that is food and

information. This is because information is power, quite as knowledge is also power.

In 1988, Nigeria enacted a National Health Policy to promote the health and wellbeing of citizens. According to Federal Ministry of Health (2016) this was the first comprehensive National Health Policy, the policy was subsequently revised in 2004. However, it has become necessary to develop a new national health policy to reflect new realities and trends. This includes the unfinished agenda of the Millennium Development Goals (MDGs), the Sustainable Development Goals (SDGs); emerging health issues, especially epidemics, the provisions of the national health Act 2014; the new PHC governance reform of bringing PHC under one roof (PHCUOR) and Nigeria's renewed commitment to universal health coverage.

The policy is geared towards ensuring that Nigeria successfully implements current national and global priorities such as the Sustainable Development Goals, Universal Health Coverage, and Vision 20.2020. It has also provided an operational platform for the National Health Act (2014). The importance of health information has been recognized by the Federal Government of Nigeria, just like elsewhere in the world. It is as a result of this that the Nigerian Government established National Health Management Information System. Federal Ministry of Health (2018) reported that Health information system is one of the building blocks of the health system. Realizing the importance of reliable data in decision making especially in the health sector, the Federal Ministry of Health (FMoH) put in place a medical statistics system in the 1960s, which over the years evolved into the National Health Management Information System (NHMIS). However, due to a prolonged period of underinvestment in the health system, the NHMIS remained weak and has not been able to fulfill its mandates. The Health Information System (HIS) in Nigeria has evolved in a haphazard and fragmented way due to institutional weakness, disease focused demands driven by heavily funded donor projects and international reporting obligations towards specific diseases like HIV/AIDs, Malaria and Tuberculosis. These uncoordinated and project-specific demands have significantly compromised the health information system in Nigeria.

4. CONCEPTUAL CLARIFICATION
4.1   Health/Health Information

Health is the general well-being of a person/people. According to Pender (2000), health is the actualization of inherent and acquired human potentials through goal directed behaviors, competent self-care and satisfying relationships with others. The World Health Organization (WHO) (2007) has defined health as "a state of complete physical, mental and social well-being and not merely the absence of disaster or infirmity".

Health is also said to be the ability of the body to function well; good health would mean having everything else fall in place (Firdeusi, Shaik & Tiwari, 2022). When there is prevalence of disease, such a health condition is said to be bad. It has implications for individual and national economic activities. This is because the health of the people not only contributes to better quality of life but also essential for sustained economic and social development of a country as a whole. Abiodun and Kolede (2006), affirm that people who are ill and weak find it difficult to carry out their responsibilities. This is why with infirmity; people strive for good health.

The importance of good health cannot be over emphasized. This is because the health of all the people is fundamental to the attainment of peace and security and is dependent on the fullest cooperation of individuals and states of a nation. According to Ali, Kamraju and Vani (2017) health and fitness hold the key to a long, active and enjoyable life. No wonder it is correctly stated that Health is the actual Wealth that a person can retain. Being healthy and fit in simple terms means taking good care of the body, as a healthy mind resides only in a healthy body. Good health of both mind and body helps one maintain the required energy level to achieve success in life. This is a call for all of us to strive to achieve wholesome health. Protecting one's body from the intake of harmful substances, doing regular exercises, having proper food and sleep, adequate rest are some of the important moves that could define a healthy lifestyle.

Being fit allows us to perform our activities without being lethargic, restless or tired. A healthy and fit person is capable of living life to the fullest, without any major medical or physical issues. Being healthy is not only related to the physical wellbeing of a person, it also involves the mental stability and the

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internal peace of a person. As studies show, a healthy diet contributes to good health and it involves taking a proper and healthy food which includes eating green and fresh vegetables, fruits, having milk, eggs, minerals, proteins and vitamins essential for a human's lifestyle.

According to Aina (2004), information is a necessary step towards understanding the world and human activities. Ajegbomogun (2008), defined information as a new idea or knowledge extracted from the environment for human utilization with the hope to modify the behavior, effect changes and to enhance efficiency in all human endeavors. As observed by Farrdane (2004), information is a representation of knowledge or thoughts. This implies that information is an expression of knowledge. Farrdane identifies other representations of information such as: information based on the assumed mental state of a recipient to which is applied, such properties as not novelty, an increment in knowledge, interpretation of external stimuli.

In addition, information is a holistic concept involving people, their needs, diets, attitudes and the effects of information on decision making and social behavior. When a person stops growing in information, he/she really stops growing indeed. Nothing grows for a person who stopped growing. Therefore, we need continuous growth in information. Until there is a change inside, there is a change outside. No human should ever get to a point where he/she stopped learning. For this reason, one must develop voracious appetite for information as resources that will enhance and develop good health. A person's behavior is a product of quality of information at his/her disposal.

In other words, a society stagnates unless it makes constant provision for the injection and absorption of new knowledge. That is why libraries and other information centres exist to constitute networks within the total communicated system whose effective use depends upon librarian's understanding of the knowledge at its importance to both individual and society. Nwasuoke (2000), maintained that the huge success recorded by man in this century is attributed to man's enhanced ability in processing and managing information with the ultimate goal of decision making that has brought about the emergence of new ideas, innovations and new techniques in the communication world.

In essence, information gives the possessor power to influence and a dominion over those who have little or no information. Therefore, the availability of information is central to human development. On the other hand, insufficient knowledge of information may create problems resulting to abject poverty, ignorance, disease, hunger and illiteracy. According to Inyang (1996), to correctly inform citizens about socio-economic, political, health related issues, and about government programmes and policies, is a task that libraries and other information centres must take seriously.

4.2   Health Information Needs

Health information according to Anunobi, (2006) is any form of publication that addresses health issues and related health conditions. The author defined health information as published and unpublished knowledge on all aspects of health and health care. The National Mission Department Report (2008) describes health information as an important tool for promoting healthy lifestyles. It involves giving the necessary, essential and timely health information on crucial matters affecting people's health with the ultimate aim of ensuring that every individual has prevented unhealthy practices that would predispose to ill health. According to Ape (2013), health information enhances health status, removes ignorance, illiteracy, prevents diseases and reduces hunger and poverty from people and brings about integrity and development.

The term information need is understood as often as an individual or group's desire to locate and obtain information to satisfy a conscious or unconscious need. Rarely mentioned in general literature about needs; it is a common term in information science. It is understood that information needs arise when an individual finds himself/herself in a dire situation when he/she no longer can manage with the knowledge that he/she possesses. Individual or group needs triggers, information seeking, which is caused by uncertainty due to lack of understanding or gap in knowledge about a particular concept.

Information needs therefore refer to individual or group desire to locate and obtain information to satisfy a conscious or unconscious need. Needs and interests call forth information. The need for information is the desire to acquire new knowledge or fact about something, which is considered as

essential and worth having to enable citizens participate fully in societal development. For every member of the society to perform optimally therefore depends on his/her ability to access the desired information needed to execute such task.

Information need could also be seen as a state when one perceives that there is a gap between the information and knowledge available to solve a problem and the actual solution to the problem. The gap in knowledge creates a need that must be satisfied (Olaniyan, 2009). Therefore, the health information needs would refer to the kind of information that is likely to be needed with reference to patient care and to support the clinical decision making of doctors.

Meeting health information needs requires input from many disciplines including the social and environmental sciences, humanities and engineering, all of which are essential for the implementation of health research and improve health of the entire population. The need for interdisciplinary action extends health policy. Health in all policies is an approach to public policies across sectors that systematically takes into account the health implications of decisions, seeks synergies, and avoids harmful health impacts to improve population health and health equity.

4.3   Integrative and Inclusive Library Service Approach
Library and information science is a service profession, which places at the center of its business the provision of relevant information services to its numerous patrons with the aim of satisfying their various information needs. To achieve this, librarians are specialized in various disciplines. The library is replete with information services such as health information provision or delivery for national development. This is achieved through carefully selecting, ordering, receiving, organizing, storing, evaluating and disseminating of information resources to users such as agro-ecological and health information to users.

Libraries are underpinned by values of stewardship and accessibility and they function both as a place and as an entity that offers services and provides access to collections. As a place, libraries are part of social exchange, learning and the concept of commons. They are important as environments that

support learning: not just warehouses of print and electronic information but special places for students and researchers to collaborate (Richardson, 2004 & Dimpsey, 2004).

It is in line with the above that White (2012) asserted that as gateways to knowledge and culture, libraries play a fundamental role in society. The resources and services they offer create opportunities for learning, support literacy and education, and help shape the new ideas and perspectives that are central to a creative and innovative society. They also help ensure an authentic record of knowledge created and accumulated by past generations. In a world without libraries, it would be difficult to advance research and human knowledge or preserve the world's cumulative knowledge and heritage for future generations.

Mr VC, Sir, have you ever wondered why no one has ever taken a library to court? It is because for libraries to acquire any source of information material, it first must thoroughly authenticate the source based on the authority of author, reputation of the publisher plus other relevant information as stated on the acquisition policy of the organization. Quite simply, libraries offer authentic means by which we can gain access to authentic knowledge. Libraries are synonymous with education and offer countless learning opportunities that can fuel economic, social and cultural development.

Integrative and inclusive approach is the libraries' structure and ability to be keenly aware of the need to maintain the balance between protecting the rights of authors and conserving the wider public interest known as "copyright exceptions", which play an essential role in enabling the delivery of library services to the public and in achieving the copyright system's goals of encouraging creativity and learning. In the commonest sense it is combining two or more things to form an effective unit or system; and including all the services or items normally expected or required for a planned development or change for advancement.

On inclusive approach, Gidley, Wheeler and Bereded-Samuel (2010) posit that it can be understood as pertaining to a nested schema regarding degrees of inclusion in relation to access, engagement and success through empowerment. This is reiterated by other scholars who suggest that inclusive service delivery would refer to libraries aspiring to provide access to high-

quality resources that enrich and empower those who seek to expand their knowledge, by designing focused services and resources for the average user, assuming that, as a result, the greatest number of users will benefit (Hawthorne, Denge & Coombs, 1997; Mates, 2004; Gibson, 2006; Jaeger, Subramanian & Bertot, 2011). However, deeper reflection on the characteristics and identities of the "average" user continue to puzzle all library stakeholders. In recent years, librarians and other stakeholders have become increasingly aware of the importance of integrative provision of library access to all users inclusively; and this consideration will continue to grow in importance in the future.

Library Services
Library Services have to do with the operations, activities and programmes organized with the aim of ensuring the smooth running of the library and targeted at patrons of the library to enable meet their information needs (Oyedum, 2007). Libraries provide both eclectic and heterogeneous services. There has been a constant transformation in library and information services which has globally impacted greatly on human society. This came as a result of the intervention supported by ICT, which offers opportunities for dissemination of knowledge and information to a wider audience irrespective of time and location. Library and information services is the science of providing access to vast amounts of accumulated knowledge and information, which has much to be offered by the information providers who are mostly addressed as Librarians (Eje & Dushu, 2018) as observed by IFLA (2003).

Library and information services have always connected people with information and ideas as they work towards acquiring, managing and preserving information resources for the wellbeing of the citizens. Library and information services encourage social inclusion by striving to serve all those in their user communities regardless of age, gender, economic or employment status, literacy or technical skills, cultural or ethnic origin, religious or political beliefs, sexual orientation or physical and mental ability. The communities they serve maybe geographically based or increasingly linked only by technology and shared internet. This system has created an information and knowledge-based society for the good of all.

Iyishu (2007) maintained that today, libraries have assumed new roles, new concept of the library recognize the impact of health information, which emphases on documentation, dissemination of health information services. Information dissemination is a core principle of library services. If information is to be used and be empowered, it must be disseminated in a manner that best facilitates its reception. However, information is delivered in a multitude of manners and the challenges is to determine which method is most appropriate to the audience attempting to be reached. Knowing where people look for information is only half the battle considering the great variability among groups and indicated personal preference, it's likely that no single delivery method is suitable for everyone. The dawn of the information age has forged studies, which clearly show that clients preferences do exist and may be quite dependent on the audience being served.

The library has from inception offered bibliographic services which provide access to the holdings of the library. Some of these services are as follows'

- Photocopying Service
- Loan Service
- Reference Services
- Current Awareness Services (CAS)
- Indexing and Abstracting Services
- Selective Dissemination of Information Services (SDI)
- Health Extension Services
- Counseling services
- Referral Information Services
- Health Promotion and Awareness Campaign
- Medical Reference Collection
- Mobile Libraries

The advent of Information and Communication Technology (ICT) brought several dramatic changes to service delivery in libraries such that efficiency has been improved and more clientele services introduced. Some of these advances include:

- Internet Services,
- Online Health Portals,
- Cloud computing, artificial intelligence,
- Social media,

- Assistive Technology,
- Digitization and institutional repository,
- Open scholarship, big data, blockchain technology,
- Internet of things, online reference services and many more.

Channels of Provision of Health Information Services to Nigerians
1. Textbooks.
2. Journals/Magazines.
3. Newspapers.
4. Postal/posters.
5. Multimedia Television, Sound recordings, Videos, radio.
6. Workshops, seminars.
7. Counseling.
8. Health talks.
9. Folklore, Drama.
10. Databases.
11. Cyber Space.

Library Quotes
1. "Libraries store the energy that fuels the imagination. They open up windows to the world and inspire us to explore and achieve, and contribute to improving our quality of life." **Sidney Sheldon,** (1917-2007. American writer and producer).

2. "The only thing that you absolutely have to know, is the location of the library." **Albert Einstein,** (1879-1955. Theoretical physicist)

3. "When in doubt go to the library." **J.K. Rowling,** (b. 1965. British novelist, screenwriter, and producer, best known for writing the Harry Potter fantasy series)

4. "Bad libraries build collections, good libraries build services, great libraries build communities."**R. David Lankes** (Professor and Director of the School of Library & Information Science at the University of South Carolina).

5. "I have found the most valuable thing in my wallet is my library card." **Laura Bush,** (b. 1946. Librarian and wife of George W.

Bush, 43rd President of the United States)

6. "Libraries always remind me that there are good things in this world." **Lauren Ward.** (b. 1970. American singer and actress)

7. "Everything you need for better future and success has already been written. And guess what? All you have to do is go to the library." **Henri Frederic Amiel** (1821-1881. Swiss moral philosopher, poet, and critic)

8. "Cutting libraries during a recession is like cutting hospitals during a plague." **Eleanor Crumblehulme** (Library Assistant, University of British Columbia, Canada)

9. "To ask why we need libraries at all, when there is so much information available elsewhere, is about as sensible as asking if roadmaps are necessary now that there are so very many roads." **Jon Bing** (1944-2014. Norwegian writer and law professor at the Norwegian Research Center for Computers and Law)

10. "Whatever the cost of our libraries, the price is cheap compared to that of an ignorant nation. **Walter Cronkite.** (1916-2009. American broadcast journalist, in American Library Association "Libraries Change Lives" Campaign, 1995).

    Bibliothèque nationale de France, Paris, France [Photo credit: Vincent Desjardins/Wikipedia]

Quotes about Librarians
1. "When you absolutely positively have to know, ask a librarian." **American Library Association**
2. "Google can bring you back 100,000 answers, a librarian can bring you back the right one." **Neil Gaiman.** (b. 1960. English author of short fiction, novels, comic books, graphic novels, audio theatre, and films)

3. "Librarians are almost always very helpful and often almost absurdly knowledgeable. Their skills are probably very underestimated and

largely underemployed." **Charles Medawar.** (a specialist on medical policy and drug safety, director of a small London-based unit, Social Audit Ltd)

4. "Librarians are tour-guides for all of knowledge." **Patrick Ness.** (b. 1971. British-American author, journalist, lecturer, and screenwriter)

5. "It is an awfully sad misconception that librarians simply check books in and out. The library is the heart of a school, and without a librarian, it is but an empty shell." **Jarrett J. Krosoczka** (b. 1977. American author and illustrator)

6. "Who Needs a Librarian and Cataloger When You Have Google and Internet? Well, Who Needs a Teacher When You Have Wikipedia? And, Who Needs a Doctor When You Have WebMD? Just as the Wikipedia Doesn't Replace the Teacher, and WebMD Doesn't Replace the Doctor, In the Same Way, Google Search and Internet Doesn't Replace the Librarian and Cataloger." **Salman Haider** (b. 1977. Librarian, cataloger, blogger, and creator of Librarianship Studies & Information Technology blog)

7. "I'm a Librarian, Librarianship is my religion, Libraries are my temple, and Catalog is my key weapon to unlock the wealth of wisdom and knowledge stored in the libraries." **Salman Haider.** (Librarian, cataloger, blogger, and creator of Librarianship Studies & Information Technology blog)

4.4   National Development

Ekpiwhre (in Aliero, 2021) defined development as a change, growth or improvement over a period of time. It is the process of achieving a state of well-being. The author views national development as the process of achieving a better state of norms and values of what is good and desirable. Earlier Dambazzau (2015), had explained that development is not a state to be attained or a goal to aim at, but that it is a constant process of improvement in which education, research and service play prominent roles in creating positive change in the self, the people, and the institution and structures.

National development is therefore, equals to human development, good health and wellbeing. This is to say that national development comprises of continued improvement of wellbeing of all citizens by providing functional literacy, employment opportunities, affordable healthcare, effective food security, and state of security of a nation. Nigeria as a nation has been aspiring and yearning for national development. Governments have a responsibility for the health of their people, which can be fulfilled only by provision of adequate health and social measures. The need for national development has made different regimes to design different development goals with the view to achieving the desired results. Each regime invested a lot of efforts, human, health, material resources but achieves a little.

Many factors have been responsible for the failure of governments to realize these goals, especially in healthcare delivery and the most important factor has been the lack of engagement of the libraries in the provision of authentic information to members of the society about current changes for proper decision-making and societal well-being (Ape, 2012). Although, the roles of libraries in national development are clearly articulated, the government normally fail to realize that the mandate and nature of libraries especially public library services are geared towards actualizing the national development. The government failed to realize that even though Nigeria lacks the culture of reading, yet possession of this is sine qua non for a successful national development.

As confirmed by Aliero (2021), in the developed nations of the world, the government views national development as the responsibility of all. As such, libraries are adequately supported to sensitize all, to mobilize all for all-inclusive national development. This paves way for mass participation in national development. Addressing these challenges will require more engagement of government with libraries and other information services. Libraries especially public libraries are mandated to enlighten all, sensitize all, mobilize all, inform all and educate all citizens. This is based on the sound belief that every citizen has a role to play in national development.

4.5 The Role of the Library in National Development
The libraries, by their nature can contribute to national development in the area of health in the following ways:

4.5.1 Public enlightenment: This is when libraries engage in extensive and intensive creation of public awareness on government policies and programmes through public enlightenment, sensitization, and mobilization, the general public will be aware of the existence and purposes of such policies and policies and programmes. As a matter of fact, acceptance of any government policies and programmes by the public is the first step towards the achievement of their success. This will not only make citizens to massively participate in the actualization of such policies and programmes but also defend and sustain them.

4.5.2 Provision of support for mass literacy: One of the statutory mandates of libraries especially public libraries is the provision of support to sustain mass literacy. By the nature of public libraries, they provide space for all members of their user communities irrespective of age or gender, sect or status, political or religious inclination. According to Lawson (2020), mass literacy and numeracy are key indicators and facilitators of national development. He asserts that public libraries provide help bridge wealth and societal disparities. As maintain by Anyalebechi and Udu-Anyanwu (2016), Libraries acquire, organize and store recorded knowledge for the purposes of providing information and knowledge to their users to enrich their personal lives in every field of endeavor that facilitate actualization of national development.

4.5.3 Provision of support for education: Apart from providing support for mass literacy libraries also provide resources and services to support primary, post primary and tertiary education. They provide opportunities for all categories of students to judiciously utilize their time for reading, research and leisure. Other activities that help towards their academic achievement and other related matters. Fafunwa (2007), posits that education is key that opens all doors to development.

Libraries also provide resources and services for continued professional training in all endeavors. In Libraries, most particularly public and national libraries, there are resources and services for medical practitioners, engineers, lawyers, administrators and so on. With these provisions of resources and services, the professionals and experts in human endeavors will be constantly abreast with new knowledge or development in their various areas of specialization. Continued discovery and application of innovative techniques

will increase efficiency, proficiency and productivity in job performance in all sectors of the economy.

4.5.4 Provision of e-learning facilities: Libraries provide e-library facilities to facilitate and promote national development. This is vital because access and use of e-resources are increasingly becoming necessary in view of the tremendous benefits that are derivable from them. In order to provide Electronic Health otherwise known as (E-Health), which has to do with healthcare that uses Communication Technologies for health. E-health can be in form of mobile health, telemedicine, telehealth and medical health records (World Health Organization, 2020).

The outbreak of HIV and AIDS, Ebola and Covid-19 and other related viruses has drastically spiced the use of e-health in healthcare circles. Medical librarians now determine the quality of information and credibility of the source in order to meet the expected health outcomes. Medical librarians guide the providers and consumers to the right sources and also provide e-health literacy among the populace. It is in this light that Olayinka (2010) stresses that in national development, information and its effective dissemination is an integral and powerful force to reckon with. No meaningful national development can take place if copious attention is not paid to libraries, information centres and to effective dissemination of information because information itself is power.

5.0 Theoretical Analysis of Information Dissemination
Theories are potential academic works, formulated to clarify, guess, and understand phenomena and, in many cases, to challenge and extend existing knowledge within the limits of critical bounding assumptions. Apparently, in any intellectual society all professional practices are expected to hinge on various intellectual framework aimed at advancing the attainment of goals and objectives of a given program. In order to beam a searchlight on the health information needs of Nigerians: an integrative and inclusive approach to library development, three theories were used, Connectivity Theory, The TAT and Ranganathan's Five Laws of Library Science.

5.1 Connectivity Theory

Connectivity is a relatively new learning theory that suggests students should combine thoughts, theories, and general information in a useful manner. It accepts that technology is a major part of the learning process and that our constant connectedness gives us opportunities to make choices about our learning. It also promotes group collaboration and discussion, allowing for different viewpoints and perspectives when it comes to decision-making, problem-solving, and making sense of information. Connectivity promotes learning that happens outside of an individual, such as through social media, online networks, blogs, or information databases. The publications address the important role technology plays in the learning process and how the digital age has increased the speed at which students have access to information (Al Dahdouh, Osório & Caires, 2015; Western Governors University, 2021).

Connectivity Theory, otherwise known as Connectivity was propounded by George Siemens, a Canadian theorist in December, 2004 and later published in 2005 (Siemens, 2005). It developed from behaviorism, cognitivism, and constructivism, which were the three broad learning theories most often utilized in the creation of instructional environments. These theories were, however, developed at a time when learning was not impacted through technology (Vaill, 1996 & Siemens, 2005). With improvement in technology, however, the theory was developed into what is now known as connectivity or connectives.

Connectivity Theory states that learning (defined as actionable knowledge) can reside outside of ourselves (within an organization or a database), and is focused on connecting specialized information sets, and the connections that enable us to learn more are more important than our current state of knowing. Apparently, the theory operates on the following principles:
- Learning and knowledge resets in diversity of opinion
- Learning is a process of connecting specialized nodes or information sources
- Learning may reside in non-human appliances
- Capacity to know more is more critical than what is currently known
- Nurturing and maintaining connections is needed to facilitate continual learning

- Ability to see connections between fields, ideas, and concepts is a core skill
- Currency (accurate, up-to-date knowledge) is the intent of all connectivity learning activities

Essentially, decision-making itself is a learning process. Choosing what to learn and the meaning of incoming information is seen through the lens of a shifting reality. While there is a right answer now, it may be wrong tomorrow due to alterations in the information climate affecting the decision (Siemens, 2005). Moreover, the theorist believes that, learning occurs inside a person. The knowledge that originates in an individual is therefore, developed and passed to an organization and later in a network to be used by individuals (persons) and further updated. Siemens puts it this way, "Personal knowledge is comprised of a network, which feeds into organizations and institutions, which in turn feed back into the network, and then continue to provide learning to individuals." This cycle of knowledge development (personal to network, to organization) allows learners to remain current in their field through the connections they have formed.

5.1.1 Application of the Connectivity Theory
It is known that a lot of information needs such as agriculture or health information needs often arise and clients develop ideas on where to figure out resources to satisfy their information needs. Research works are conducted, and findings are arrived at, which need to be used by institutions, organizations and individuals. Importantly, this body of knowledge is selected and acquired into the library, properly organized through cataloging and classification for easy accessibility and utilization. This is in many cases done through information and communication technological processes; moreover, the knowledge is also released into networks, accessed and used worldwide by individuals in order to satisfy their information needs or improve on other researches. The knowledge serves as a springboard for generation of further ideas, knowledge that is stored in networks (through databases of organizations and institutions) in order to generate more ideas and findings.

5.2 The TAT Theory
The Tiv Anchôgholuv Theory (TAT) is an African indigenous theory that was

propounded by a Nigerian Indigenous Knowledge Systems Private Researchers Tim Cuttings Agber, Godwin Aôndohemba Fiase and Anthony Agena Igbashal in 2017. The theory states that 'everything' must refrain from being aloof and must be grouped into classes where they belong by their own unique or agreeable characteristics for development (Agber, Fiase & Igbashal, 2017; Akuha, 2018; Igboke, 2018; Bawa, 2018 & Shidi, 2019).

According to Bawa (2018) and Shidi (2019), the philosophy behind the idea of Anchôgholuv is to bring those who are feeble or weak in one way or the other together to collectively organize their minuscule strengths to achieve greatness. The essential part of the theory teaches people to know who they are and where they belong in the society and promulgates that these people unite in oneness of purpose to change the face of their history in all circumstances. This goes similar in functionality with theory of *Chameleonism*, which promulgates the ability to adapt to a given situation favorable or unfavorable, at a given time and in a given way to get a given thing (Agber, 2011).

The principle of Tiv Anchôgholuv Theory (TAT) provides the taxonomy, by which things must be and this can be understood as "classification of everything into groups" they belong for development. The TAT operates on the following principles:

- 'Everything' encompasses humans and nonhumans in all knowledge, all skills and all behavioral tendencies.

- 'Classification of everything' is the arrangement or ordering of 'things' (people, processes, ideas, skills, values and functions) tangible or intangible into groups, based on some characteristics of those things.
- 'Characteristics' of the things are not provided in a list of templates to be used but are available naturally or agreeably based on the knowledge that they exist to be classified.

5.2.1 Application of the TAT

The theory is related to the subject matter due to the fact that Tiv Anchôgholuv Theory promulgates the classification of everything into groups they belong for development. Essentially, there are different information needs however, community development association information needs cannot be jumbled with health information needs of Nigerians. Moreover, health information needs also exist for various health needs. Therefore, these health information needs can be grouped or classified on particular health needs such as on HIV-AIDS, Ebola, Cancers, Diabetes, Hemorrhagic Fevers, Nutrition, Ageing, Childcare and Genecology among others.

5.3 Ranganathan's Five Laws of Library Science

The Five Laws of Library Science was propounded in 1931. The Five Laws were propounded by Shiyali Ramamrita Ranganathan. S.R. Ranganathan was born August 9, 1892 in Shiyali, Madras, India and he died September 27, 1972 in Bangalore, Mysore. The Indian librarian or educator was considered the father of library science in India and his contributions had worldwide influence.

According to Ranganathan (1931) the Five Laws of Library Science state that:

1.   Books are for use
2.   Every reader has his or her own book
3.   Every book has its reader
4.   Save the time of the reader
5.   The library is a growing organism.

A book is a guide, a friend, and a philosopher. A writer writes a book to communicate his thoughts. The primary purpose of writing, therefore, is that the thought it contains should be communicated. To do so it is necessary to put the books for use. The first law, therefore, truly demands that all efforts should be made to ensure that all the books kept in the library are used because it is created for use. The first law "Books are for use" places emphasis on the use of books rather than storage. Books were once kept in closed access in order to prevent theft, but this discouraged free use and prevented loaning. The first law of library science "books are for use" means that books in libraries are not meant to be shut away from its users. Without user access to materials, there is little value in these items. By emphasizing use, the law refocused the attention of the field to access-related issues, such as the library's location, loan

policies, hours and days of operation, as well as the quality of staffing and mundane matters like library furniture, temperature control, and lighting (Haider, 2017; Shidi, 2019).

The first law constitutes the basis for library services. Ranganathan observed that books and other library resources were often chained to prevent their removal. And their emphasis was on storage and preservation rather than use. Moreover, the purpose of every library activity was to promote use of them. The second law suggests that every member of the community should be able to obtain material he needed and that individuals from all social environment are entitled to library services which will enhance their educational quality. Thus library should have excellent firsthand knowledge of the people to be served and libraries should promote and advertise their services extensively to attract a wide range of users. The third law is closely related to the second law but focuses on the item itself, suggesting that each item in the library has an individual who will find that item useful. There is therefore a need for the library to devise rules for the access to their information resources. The fourth law is in recognition that part of the excellence of the library service is its ability to meet the need of the library users efficiently and timely; while the fifth law focuses more on the need for re-thinking library services to meet the dynamic changes of the societies' information needs (Ugbagir, 2014; Heider, 2017 & Shidi, 2019).

5.3.1 Application of the Five Laws of Library Science
The five laws of library science can also be applied here, in the sense that, health information are generated and produced or presented in print and non-print media such as books, journals, audio narrations and audiovisual clips, which the library acquires them to provide open access dissemination aimed at meeting users' information needs. In this manner, the library ensures that
1. Library is for use
2. Every reader his or her own book
3. Every health information has its user or seeker
4. Save the time of the reader
5. Library is a growing need.

6. EMPIRICAL EVIDENCE
6.1 The Role of Health Information for Medical Practitioners
In the era of digital information and rapid technological advancements, access to accurate and up-to-date healthcare information is crucial for both healthcare professionals and the general public. Nigeria, a populous country with diverse healthcare challenges, stands to benefit significantly from improved access to reliable health information. Libraries, often considered as repositories of knowledge, can play a pivotal role in bridging the information gap. Studies have explored the potential benefits and avenues for collaboration between libraries and Nigeria Health Watch (NHW), a prominent health information platform in Nigeria, to enhance the accessibility and dissemination of healthcare information across the country.

The provision of health information to medical practitioners has drastically been revolutionized. According to Iroka & Nduka (2018), a vibrant health sector needs a well-documented and organized health information for dissemination to users to consolidate health records, planning and management. Librarians provide people with appropriate information on diseases and prevention measures, healthcare, side effects of premarital affairs dangers of early pregnancies and other health-related information.

Zimusta (2019) noted that Library and information services can assist in creating awareness which can help in the eradication of extreme poverty, which is one of the critical issues to be addressed by the Sustainable Development Goals (SDGs). This is because poverty is inherently destructive of all economic as well as social and environmental goals of development. This is an obvious reflection of the overall poor health conditions in Nigeria, which has been attributed in part to poor health care delivery in the country. Availability, easy access, and utilization of current health information hold the key to effective health care delivery, livelihood in Nigeria. This would avoid millions of needless deaths if health care were pivoted on best practices embedded in health information. It therefore becomes inevitable for Nigerian health professionals and consumers to make effective use of health information for drastic drop from World Health Organization (WHO) scaring figures.

In order to cope with the new trends in medical practice which includes evidence-based practice, rapid changes in health information and health input overload, patient-centered practice, consumer health information and

electronic health (e-health). Both health practitioners and librarians are trying to catch up with the demand of the changing trend especially as they are being fast paced by technology. For librarians, the focus of the challenges lies in bridging the gap between research and practice through diligent relay of information.

Libraries have assumed new roles, the concepts of Librarianship that recognizes the impact of health information which emphasize on documentation and selective dissemination of information (SDI) services as critical tools for disseminating health information to patrons especially those with special needs. Documentation comprises of a group of techniques necessary for the orders presentation and organization in order to give maximum accessibility and utilization. By this method, the Librarians provides needed information to patrons, when they need it, on terms most convenient and at a minimum expense. By SDI, Librarians screen the literature in order to inform their clients of recent publications so as to keep abreast of new trends and developments. Librarians' role is daily enhanced with new technologies for faster and more efficient management of health information, such as e-health is enhancing medical practice.

Medical Librarians are now guided by the global need for health information to be evidence-base; Patient centered practice; consumer health information and electronic health (e-health) accessible and authorities, reliable, accurate and timely. Adequate provision/dissemination and use of health information has now drastically reduced the rampant medical error in Nigeria today and gross consumer health illiteracy.

These new trends have compelled both the health practitioners and Librarians/information scientists to catch up with the demands of the changing trend especially as they are fast paced by technology. Evidence-based Practice or medicine is an approach in which current, high-quality research evidence is integrated with practitioners' expertise and client's preferences and values into the process of making clinical decisions [Gud, 2008]. The law demands that patients should receive care based on the best available scientific knowledge and that care should not vary illogically from doctor to doctor or from place to place. This can only be possible when timely access to wide variety of health information sources is available.

Equally important is the use of health information for effective health care delivery which can sometimes be hampered by what is known as information

input overload. There are many sources of information available today on health-related issues which may cause information overload for medical practitioners and patients. Bawden (2019), observed that information overload can occur when information received becomes more of an impediment rather than benefit. This may cause delay in processing information, accepting lower quality information, and giving up the search for needed information. Mehta, Beckie, DeVon, Grines, Krumholz, Johnson, Lindley, Vaccarino, Wang, Watson & Wenger (2016) observed that, Clinicians are bombarded with information daily by social media, mainstream television news, emails and print and online reports. They usually do not have enough control over such information streams, as such are passive recipients. This also results to clinical errors which is caused by little time to preview and process data, as such the patients suffer. Therefore, Medical Librarians work with clinicians by processing and re-routing information to others in the hospital community. They achieve this by using electronic methods.

The outbreak of pandemics such as HIV and AIDs, COVID-19, Lassa Fever, Ebola and other related virus has drastically spiced the use of e-Health in healthcare circles. Many hospitals majorly in cities in Nigeria now employ the use of e-health practices to reach their patients at their various destinations. This is the use of Information and communication Technologies for health care practices. This can be in form of mobile health, telemedicine, telehealth and medical health records. This can benefit the entire community by providing quality health care and by making the health sector more efficient. The practice also includes information and data sharing between patients and health service providers, hospitals, health information networks, electronic health record and telemedicine service. Medical Librarians therefore determine the quality of information and credibility of the source in order to meet the expected health outcomes. They guide the providers and consumers to the right sources and also provide e-health literacy among the populace.

Equally of importance is the concept of medical consumer health information. This comprises of any information that enables individuals to understand their health and make health related decisions for themselves and families (IFLA, 2021). This is Information provided on health and medical topics in response to requests from the public including patients and families. All information on symptoms, diagnosis, treatment of diseases, health

promotion preventive medicine, are the determinants of health and accessing the healthcare system.

Medical Librarians' role in consumer health information services and health education is an integral part of processes as summed up by the Medical Library Association (1999), which includes identifying the available consumer health information and patient education resources for reviews and possible purchase; make selection of such resources for the organization. This may include books, magazines, audiovisuals, pamphlets, computers, databases, CD-ROMs, internet resources. The Medical Librarian now build an authoritative collection of these resources both in print and electronic form so as to meet the information needs of the organization. A subject file collection can be developed on current topics of interest to consumers.

6.1.1 The Role of Health Information to people Living with HIV and AIDS

Human beings have different types of information needs; it can be social or pragmatic. The purpose of any library is to fulfill some of these needs for documents and information for its potential users. The world is becoming dynamic and challenges that are enforced by various circumstances such as Human Immunodeficiency Virus and Acquired Immune Deficiency Syndrome have come to accentuate the need for the improvement and empowerment of the affected people popularly known as People Living with HIV and AIDS (PLWHA). According to Ijir (2006), chronic diseases are responsible for 70% of health care problem in Nigeria, particularly HIV and AIDS.

The term Human Immunodeficiency Virus (HIV) is a Lentivirus that attacks the human immune system. Literally explained, 'Lentivirus' means 'slow'. This implies that the virus slowly and steadily takes time to produce its devastating effects in the body system. The Acquired Immune Deficiency Syndrome (AIDS) can be understood as the evidence of one or several medically diagnosed diseases resulting from cellular immunity deficiency and defying all defined available medical remedies in terms of treatment. Aids is caused by the human immunodeficiency virus also known as Human I-cell lymph tropic virus (HTLV-III) OR Lymphadenopathy Associated Virus (LAV or AIDS-related Virus (ARV). (Orngu, 2007).

Oguga (2006) explained AIDS as an acronym made up of four letters.

Acquired means, 'to get from', as AIDS is acquired from other people who are already infected. Immune means 'protected' or defended; the body is normally defended against many diseases by the immune system of the body. Deficiency means 'not enough, with AIDS the body has not enough defense against diseases. Syndrome means a group of different signs of diseases. People with full blown AIDS have anumber of sicknesses. Anshi (2007) therefore defines Acquired Immune Deficiency Syndrome (AIDS) as the collections of infections and symptoms resulting from the specific damage to the immune system, caused by the human deficiency virus. This is why the disease has come to be known as HIV and AIDS). HIV and AIDS has since then reached pandemic proportion and has been considered a public concern.

The first case of AIDS was reported in May, 1981, in United States of America by Dr. Michael Gottlieb of the Medical School of Los Angeles, United States, and was followed by an official report by the Centre for Disease Control(CDC) on 5th June, 1981. On African continent, HIV and AIDS was first reported in Uganda, East Africa in 1982. The first case of HIV and AIDS in Nigeria was identified in 1985 and reported at an international conference in 1986. Nigeria is the most populous African country and the 7th most populous in the world with an estimated population of approximately 206,139,589 people. It is located within the eastern strip of West Africa with an area of 923,768 km^2. Nigeria is a multi-ethnic and culturally diverse federation of 36 autonomous states and the Federal Capital Territory. In January 2006, the Joint United Nations Programme on HIV and AIDS and WHO estimated that AIDS has killed more than 25 million people since it was first recognized making it one of the most destructive epidemics in recorded history. However, with more than 30 million living with the virus, and more than 5 million new HIV infection every year. This is the beginning of the epidemic impact.

In Nigeria HIV and AIDS was identified in 1986. From that period up to the present, there has been a steady rise in the prevalence rate of HIV and AIDS from zero percent prevalence. For instance, HIV epidemiological and demographic data released by Federal Ministry of Health in 2001 revealed that HIV and AIDS prevalence has risen steadily over the past decades. It is now a major public health problem in Nigeria, particularly in Benue State. Out of the 20 states in Nigeria that recorded HIV in 2005, Benue State had the highest prevalence of 10%. The state passe.

The first HIV and AIDS sentinel survey in Nigeria was conducted in 1991 with a prevalence of 1.8% ,which since then increased as can be seen below:
1991-1.8%
1993-3.8%
1996-4.5%
1999-5.4%
2001-5.8%. Decline trend was observed in
2003-5.0%
2005-4.4%
2008-4.6%
2010-4.1%
2013-3.4%.
2021-1.4%

Despite the decline prevalence, HIV and AIDS in Nigeria has remained a public health concern. Nigeria ranks 4th highest in the global HIV burden approximately 1.8 million estimated People Living with HIV and AIDS (PLWHA). The current national prevalence of 1.4% and stratification based on states showed the highest prevalence in Akwa Ibom (5.6%), Benue (4.9%), Rivers (3. 8%), Taraba (2. 7%), and Anambra (2.7%) and least prevalence in Jigawa (0.3%), and Katsina (0. 3%).The horror of HIV and AID in Nigeria has drawn global attention and response to the scourge. Partners in the fight against HIV and AIDS in Nigeria include: The government of Nigeria through the Federal Ministry of Health (FMOH). The FMOHis concerned with the formulation and implementation of policies related to health in Nigeria. The department of Public Health National HIV and STI Control Programme (NASCAP), handles HIV and AIDS matters. The President Emergency Plan for AIDS Relief and Global Fund to AIDS, Tuberculosis and Malaria; and the Joint United Nations Programme on HIV and AIDS UNAIDS inspires the world to achieve its shared vision of zero new HIV infections, zero discrimination, and zero AIDS-related deaths.
HIV prevalence rate in Benue State.
- 1991 – 1.6% - 48, 000
- 1993 – 4.7% - 164,000
- 1995 – 6.7%
- 1999 – 16.8% - 250,000
- 2001 – 13.5%

- 2003 – 9.3%
- 2005 – 10.0%
- 2006 – 9.3%
- 2008 – 10.6%
- 2010 – 12.7%
- 2019 – 5.3%

Signs of HIV in the First State
Early detection of HIV infection is crucial for timely intervention and effective management of the disease. Therefore, recognizing the signs in the first state can help individuals seek medical attention and initiate appropriate treatment on time. This is because most people who are infected with HIV remain symptom-free for years.People diagnosed with AIDS may get life-threatening diseases called opportunistic infections which is caused by microbes such as viruses and bacteria that usually do not make healthy people sick. People infected with HIV and AIDS are known as People Living with HIV and AIDS. The signs according to Nevid (2004) include:

- Flu-like symptoms. These symptoms can include fever, fatigue, sores throat, swollen lymph nodes, and aches. But note must be taken because these symptoms are non-specific and can be easily mistaken for common illnesses. However, if these symptoms occur and there is a potential exposure to HIV, it is crucial to consider getting tested for the virus.
- Rash: This rash typically appears as small, red or pink spot or bumps on the skin and can be itchy. The rash may affect different areas of the body, such as chest, face, arms, and legs. Its occurrence along with other symptoms should prompt consideration for HIV testing.
- Fatigue and Malaise: Feeling excessively tired or experiencing a general sense of malaise is a common symptom during the early stage of HIV infection. Persistent fatigue that is not alleviated by rest can be a sign of the virus affecting the immune system. It is important to pay attention to prolong fatigue and seek medical evaluation.

It is important to note that these symptoms can also be attributed to various other conditions, and HIV testing is necessary for definitive diagnosis. If there is a potential exposure to HIV or any concerns about possible infection. It is advisable to consult a healthcare professional for appropriate guidance.

Causes and Factors Responsible for the Transmission of HIV and AIDS

Since the discovery of HIV and AIDS in Nigeria, many studies have been conducted on the recent factors responsible for the transmission of the inter country disease. According to Ahonsi (2005), four main factors are strongly responsible for the spread, which includes - unprotected sexual intercourse which constitutes 80% of all HIV infection. He maintained that it is not because of genetic reasons that Nigeria is most promiscuous or risk taking than other nationalities, but because forces external to the individual which structure and define the nature and safety of sexual expression in Nigeria make so many people vulnerable to HIV infection. These forces relate to access to information, availability of economics and related opportunities for self andor group survival and reproduction and customary practices, norms and dominary ideologies or beliefs system around sexuality, gender and health. Thus, no matter the hyperactivity of the libido and the sense of invincibility that is inherent to an individual's personality whether the person engages in HIV risk bearing behavior and frequency and intensity of doing so depends on how structural, demographic, cultural and other properties of the socio system impinge on his\her personality. External circumstances must operate to energize dormant tendencies. The second factor is the continuing transfusion of contaminated blood which is thought to account for between 5 to 10 percent, of HIV transmission in Nigeria, due to weak public health system. The third factor is mother-child transmission of HIV as well as the problem of sharing sharp objects.

There are factors that aid the spread of HIV such as:
- High rates of consumption of alcohol and drug abuse
- High rates of unprotected sex
- High rates of other sexually transmitted diseases (which increases risk in HIV infection).
- Multiple sexual partners
- Low condom use
- Poverty and poor health status
- Low literacy rate
- Child marriage,
- Gender- based violence,
- Masculinity and femininity norms,
- Disabilities,

- Harmful traditional and rites as well as human rights,
- Legal and political factors.
- Stigma and denial of HIV infection among vulnerable groups
- Incessant communal conflicts and terrorist attacks that has produced refugees.
- Stigma Spread the Virus

PLWHA may become implicitly associated with stigmatized behavior, regardless of how they actually contracted the infection. They are stigmatized, ostracized, rejected, and shunned and they may experience sanction with HIV and AIDS. Discrimination may stem from fear due to lack of knowledge about how HIV and AIDS can or cannot be transmitted. Individuals with HIV and AIDS are stigmatized because their illness is (1) life-threatening disease, (2) people are scared of contracting HIV, (3) tainted by religious belief as to its immorality and/or thought to be contracted through morally-unsanctioned behavior such as promiscuity or deviant sex and therefore, thought to represent a character blemish and contraveners deserves to be punished; (4) perceived to be contagious and threatening, to the community;(5) Associated with an undesirable and an unaesthetic fear of death; and (6) not well-understood by the lay community and viewed negatively by healthcare providers (Ape, 2012).

It is quite evident from studies that PLWHA are unfairly treated and or/discriminated against because of their actual or suspected HIV and AIDS status. Discrimination against people with or suspected of having HIV and AIDS is not just violation of their human rights; it is also an ineffective public health measure. The national policy on HIV and AIDS is aimed at controlling the spread of the infection and mitigate its impact to the point where itis no longer of public health, social and economic, such that Nigerians will be able to achieve socially and economically productive lives free of the disease and its attendant's impact. Thus, the Human Right law discrimination against PLWHA which read in part (5) of the Act states that; No individual, community, institution and employer or employee shall discriminate, directly or indirectly against any person in the society based on the person's HIV status or perception of same in employment, delivery of services and other benefits.

From my study I have come to understand that when PLWHA take their antiretroviral treatment correctly their viral loads become suppressed. This makes it almost impossible for them to transmit the virus to others. But if

stigma prevents them from getting on to treatment, the virus will be allowed to flourish. People who don't know they are infected with HIV would not know that they require treatment. This is to say that stigma is the attitude; discrimination is the action. It is a very big issue for PLWHA particularly in Nigeria. When it comes to the issue of HIV people don't have a choice but to comply with the treatment. That is why there is a saying that "if you go it, it is because you accidentally "hit" it Nobody voluntarily goes to catch HIV. So why should you stigmatize that person". Until date stigmatization is still an issue around PLWHA particularly from the health workers, society, religious entity. The former Director General of NACA Sani Aliyu stated that government has zero tolerance against stigma and discrimination of PLHA. That is why part 1(5) of the Act of HIV and AIDS states that; No individual, community, institution and employer or employee shall discriminate, directly or indirectly against any person in the society based on the person's HIV status or perception of same in employment, delivery of services and other benefits. Sadly, despite the existence of this law, PLWHA still face discrimination regularly.

This disease has caused a lot of devastation to human beings in all ramifications. Most people who are infected with HIV remain symptom-free for years. The AIDS victim suffers from an impaired immune system, and diseases including cancers, skin infections and fungal infections. Medical evidence indicates that AIDS progresses in three distinct stages: initial infection with the HIV virus; ARC (AIDS-related complex) in which an individual develops secondary, non-life-threatening infections and AIDS, where a person's immune system collapses (Kohl & Miller, 2004). The ailment is one of the world's most serious public health challenges.

According to UNAIDS (2020), about 36.9 million people worldwide were living HIV and AIDS in 2017, of which 1.8 million were children. The Nigerian HIV and AIDS indicator and impact survey (NAIIS), indicates that about 1. 9 million Nigerians are currently living with the scourge, according to NACA. The report maintained that, globally, in 2017, about 21. 7 million PLWHAs, (59%) were accessing antiretroviral therapy, an increase since 2016 and up from 8 million in 2010.

Ways HIV Cannot Be Transmitted or Contracted Even with an Infected Person
There are specific ways and bodily fluids through which HIV cannot be

transmitted, even if you engage in activities with someone who has the virus. Ways such as:

- Closed- mouth kissing
- Sweat or using someone's sweaty clothes
- Hugging, regardless of how it is done
- Sharing of toilet with an infected person
- Sharing water with someone who has HIV
- Using the same toothbrush with an infected person. But to be safe from other infectious diseases such as gingilis or mono, which may be transmissible this is highly discouraged.
- Biting that does not break the skin does not cause HIV infection either.

Ways of Delaying the Progression of HIV if Contracted.

According to Medical News Today, HIV is a virus that targets the immune system, leaving the body susceptible to infections and illness. Contracting HIV necessitate taking measures to slow down or delay its progression to AIDS, a fatal condition if left untreated. To postpone the advancement of HIV, the following measures can be observed:

- Initiate Antiretroviral Therapy (ATR) promptly. ART is a combination of medications designed to target various stages of HIV life circle. It prevents the virus from replicating and reduces its concentration in the blood stream. Initiating ART immediately after receiving a positive HIV diagnosis significantly slows down the virus's progression and minimizes the risk of developing AIDS.
- Adhere to medication regimen. It is crucial to strictly follow the prescribed medication regimen provided by health care professionals. Skipping doses or discontinuing treatment can allow the virus to replicate and develop resistance to the drugs. This can compromise the effectiveness of ART and heighten the likelihood of AIDS development.
- Undergo regular check-up with a healthcare provide This facilitate monitoring the progress of HIV and adjusting treatment accordingly. This helps ensure the medication's effectiveness and lowers the risk of complications.
- Embrace a healthy lifestyle that helps boaster the immune system

and overall-wellbeing. This involves consuming a nutritious diet, engaging in regular exercise, managing stress levels, obtaining sufficient sleep and refraining from smoking and excessive alcohol consumption.

- Practice safe sexual behavior as HIV can be transmitted through sexual contact, emphasizing the importance of practicing safe sex by using condoms and undergoing regular STI screenings.
- Seek emotional support. This because living with HIV can be emotional challenging, necessitating seeking support from friends, family or health cre providers.

With proper management, it is possible to live a long and healthy life with HIV.

Impact of HIV and AIDS in Benue State

VC sir, the fact that other recent pandemics have emerged does not meanthe issue HIV and AIDS can be swept under the carpet. This is because until date the pandemics still exist and harvesting precious souls. Worst of it all is that it has no known medical cure. Contrary to the majority of diseases, HIV and AIDS kills and disables adults in most productive part of their lives. Consequently, it is affecting business, investment, industry, agricultural sustainability and ultimately reducing families' income and economic growth. The new survey Abuja/ Geneva results that was released on the 14th of March 2019 revealed the prevalence of 1. 4%, a welcomed development that there are fewer PLWHA. Benue State had the second highest prevalence and burden of HIV after Akwa Ibom state. It has a Statewide prevalence of 4. 9% with an estimated burden of 184,745 PLWHA. It accounts for 50% of estimated PLWHA with ART coverage among 7 states in Nigeria.

In Benue, the impact of HIV and AIDS has been highly felt at all levels notably from the viewpoint of health care, agricultural, economic, social, educational impact. This is against the background of the fact Benue is potentially an agrarian state and fondly called the Food Basket of the Nation. The health implication of HIV and AIDS pandemic is that it has continued to emasculate the initiative of the entire country, particularly Benue State posing a major challenge to the health stability as well as security of the people. Due to high rate of infections and deaths with relatively young population and at transition point of high fertility and declining mortality rate. The pandemic has majorly contributed to a decline in the life span of the people of Benue State to a drastic

drop. Hospital records indicated that about 70% of hospitalized cases are HIV and AIDS. Also, about 65% of death cases at hospital especially Federal Medical Centre Makurdi constitute PLWHA and related cases.

All over Benue State. HIV and AIDS has caused devastation, destroyed communities and families and took away hope for the future. With the absence of unknown cure at present it diminishes quality of life before it takes away life itself. It emotional and economic impact on quality of life affects the family, friends and communities.

It affects production as well as household incomes and expenditures. It poses major problems for health systems and health care practices. It diminishes the capacity of societies.

- HIV and AIDS has greatly affected the economy of Benue State where the pandemic has been very high. This is by reducing the availability of human capital. Without prevention, nutrition, health care and medicine that is available in the state, large number of people are developing AIDS. Another negative impact on the economy is that it has lowered the active labor force, which in turn has resulted to a direct negative impact on both the output of agricultural and nonagricultural thereby leading to decline in private consumption, investment, exports and government tax revenue.

- PLWHA are not only able to work effectively like before, but also require significant medical care. This has probably caused a gradual collapsing of babies and communities in Benue State with significant PLWHA. The scourge has left behind many orphans who are cared for by elderly grandparents. The increased mortality in Benue State has resulted in a small skilled population and labor force. This smaller labor force are predominately young people, with reduced knowledge and work experience leading to reduced production. An increase in workers' time off to look after sick family members or sick leave which also lower productivity. Increased in mortality rate has also weakened the mechanisms that generate human capital and investment in people, through loss of income and the death of parents working age population. As the pandemic has increased in the state, the age profile those affected has as well increased and stayed within the working age

population.

- HIV and AIDS disproportionately infects and impacts on women, so those sectors employing large numbers of women such as education, are disproportionately economically impacted by HIV. As was stressed in the MDGs, and now merged with SDG, education is essentially for human development and need to be enhanced especially in low- and medium- income countries. Unfortunately, HIV and AIDS is reversing the trend towards the achievement of universal primary education in the state. In Benue state, less than 65% of children of enrolled in primary school and thousands of enrolled children prematurely leave under pressure of HIV and AIDS, including orphans, impoverished and those who withdraw to look after ill members of their families. The pandemic has threefold impact on Benue State education. It affects the cognitive ability of children, the capacity of teachers and the efficiency of staff and managers. Teachers absent is due to HIV and AIDS (illness, care for ill family members, family funerals. It shortens human life, eroded people's sense and dignity and self-esteem, causes social exclusion, and traumatize and as well, impoverishes individual's families and whole society.

The danger and complexity of HIV and AIDS has imposed the necessity of multidisciplinary approaches. That is why the importance of health information to PLWH cannot be over emphasized. This is because health information is vital to relieve pains and discomfort both physical and mental as it helps to extend and improve the quality life by reducing viral load (Edeoware 2010).

Benue State Antiretroviral Surge (BAS)
Benue State Antiretroviral Surge (BAS) was a project partnered by Public Health Initiatives (APIN) and its funder United States Centre for Disease Control and Prevention (CDC) with the Benue State Ministry of Health. The aim of this project was to scale-up, through intensified case finding, linking, and continuity of identified cases in treatment, in order to achieve viral suppression. This was a scale up-up strategy which required that novel interventions were deployed to achieve their objective.

In the context of HIV and AIDS pandemic control is defined as the critical point reached where the total number of new HIV infections falls below

mortality from all causes among PLHA, with both indices declining. UNAIDS declared a 95-95-95 target in December 2020 for 2025. That entails that 95% of PLWHA know their HIV status, 95% of those diagnosed with HIV receives sustained ART and those diagnosed with HIV status on ART achieve viral suppression in the implementation strategy of the ART. This project was carried out in 30 months from May, 2019 to September 2021. The absolute number of newly diagnosed PLWH increased and then declined by 35% in 2021.

The government has tried in the fight against HIV & AIDS and it can be seen that Medical research and development activities have been carried out by government and other agencies in finding solutions to the prevailing HIV and AIDS pandemic. Nevertheless, these alone cannot be able to achieve the SDGs of year 2030. Adequate awareness and sensitization need to be carried out to bring these activities to the doorsteps of the citizens through proper information dissemination. Addressing these challenges calls for urgent and unflinching engagement of government in libraries and other information services in all corners of Nigeria. This will pave way for actualization of the national development we desired for. Information is a strong pillar which cannot be ignored by any nation. Library services are people centered, just the same way national development is people oriented. Libraries especially public libraries are mandated to enlighten all, sensitize all, mobilize all, inform all and educate all citizens. This is based on the sound belief that every citizen has a role to play in national development. The library provides services aimed at sensitizing and informing the general public. By so doing it realizes the needs of the people and try to meet such needs with information. Librarians are trained with special skills to develop techniques to treat documents and thus extract relevant information applicable to individuals or group of people such PLWHA much faster. By analyzing and processing the documents, they present the information to the potential users in most useful manner. The identification of new user groups like PLWHA demand special services such Selective Dissemination of Information (SDI) and Current Awareness Services (CAS). The documentation service provides users with the information they need, when they need it, on the terms most convenient at a minimum expense thereby fulfilling the laws of Ranganathan (1931).
The following shows a list of health information needs of PLWH.
1. Social work Counseling
2. Home visits and follow up
3. Community based Rehabilitation

4. Physical
    a.   Exercise.
    b.   Maintaining a healthy weight.
    c.   How to access barriers to socialization?
    d.   Sufficient clothing & decent housing.
    e.   Nutrition and food health care services.

5. Healthcare services
    a.   Supportive healthcare services
    b.   Operation system of health care services
    c.   How to adhere to complete drugs
    d.   Promotion of healthy lifestyle
    e.   How to manage sleep and rest
    f.   Human rights & support groups
    g.   Government policy on HIV and AIDS
    h.   Anti-Retroviral medication

6. Treatment of opportunistic infections.
    a.   Tuberculosis
    b.   Anemia
    c.   Diarrhea
    d.   Fever
    e.   Body itching

6.2.1   Health Information through Artificial Intelligence

Since the advent of libraries, information dissemination has been the core struggles for the library industry, which leads to paramount goals for library development to enhance teaching and learning as well as promotion of national and international cohesion and unity. Prior to the arrival of Information and Communication Technologies, libraries struggled with serious difficulties to satisfy user information needs with a lot of time-wasting methods, money invested in manpower engagement, storage and retrieval limitations. The introduction of Information and Communication Technologies greeted the library industry with a breeze of hope for better information dissemination Giles (2018).

Food and Agriculture Organization of the United Nations – FAO (2022) describes Information and Communication Technologies (ICTs) as a broader

term for Information Technology (IT), which refers to all communication technologies, including the internet, wireless networks, cell phones, computers, software, middleware, video-conferencing, social networking, and other media applications and services enabling users to access, retrieve, store, transmit, and manipulate information in a digital form. ICTs are also used to refer to the convergence of media technology such as audio-visual and telephone networks with computer networks, by means of a unified system of cabling (including signal distribution and management) or link system. However, there is no universally accepted definition of ICTs considering that the concepts, methods and tools involved in ICTs are steadily evolving on an almost daily basis.

Moreover, the coming of Information and Communication Technologies gave rise to the birth of robotics and Artificial Intelligence (AI), which are capable tools that can overhaul the library information service delivery and dissemination. Manning (2022) asserted that Artificial Intelligence (AI), is a term coined by emeritus Stanford Professor John McCarthy in 1955, as "the science and engineering of making intelligent machines". Much research has humans program machines to behave in a clever way, like playing chess, but, today, we emphasize machines that can learn, at least somewhat like human beings do.

Relatedly, Kapila (2022), states that, the word robot was coined by a Czech novelist Karel Capek in a 1920 play titled Rassum's Universal Robots (RUR) Robot in Czech is a word for worker or servant. Artificial intelligence (AI) is the ability of a computer, or a robot controlled by a computer to do tasks that are usually done by humans because they require human intelligence and discernment. It is the ability of a digital computer or computer-controlled robot to perform tasks commonly associated with intelligent beings. The term is frequently applied to the project of developing systems endowed with the intellectual processes characteristic of humans, such as the ability to reason, discover meaning, generalize, or learn from experience.

Since the development of the digital computer in the 1940s, it has been demonstrated that computers can be programmed to carry out very complex tasks—as, for example, discovering proofs for mathematical theorems or playing chess—with great proficiency. Still, despite continuing advances in computer processing speed and memory capacity, there are as yet no

programs that can match human flexibility over wider domains or in tasks requiring much everyday knowledge. On the other hand, some programs have attained the performance levels of human experts and professionals in performing certain specific tasks, so that artificial intelligence in this limited sense is found in applications as diverse as medical diagnosis, computer search engines, and voice or handwriting recognition (Manning, 2020 & Copeland, 2022).

Apparently, researchers such as Igbokwe, Ezeji and Obidike (2010); Ifukor (2013); Bitagi and Ozioko (2015); Ivwighreghweta (2016) and Okafor (2020) lament vehemently over the challenges or factor militating against the library's ability to disseminate information to satisfy the information needs of users in the modern day era that is characterized by digitalism, artificial intelligence and robotics; due to use of old methods of information management and dissemination, lack of integration of Information and Communication Technologies into library services properly and non-inclusion of methods that takes to cognizance the information needs of users with disabilities.

It is in line with the above that Ahmad and Nishat (2009) stated that in the era of information explosion, the tremendous amount of information is being generated and transmitted from every corner of the world in the form of print materials, research articles, lectures, presentations video conferencing, technical reports, standards and patents. In the early stages of 20th century, libraries were facing the problems, of how to cater and fulfill the users' demand in minimum span of time. The solution was to adopt the ICT based products and services.

To deal with new challenges and increasing demand of users, libraries are reconsolidating reshaping, redesigning and repackaging their services and information products by integrating Information and Communication Technologies. Owing to ICT enabled products and services, libraries have changed the way, in terms of the provision of information services. This is the integration of computer and communication technologies, which can be, applied to store and disseminate the information. They have changed the traditional practices of libraries in delivery of services. In the present scenario, users can have access to a variety of information and digital archives of libraries from any corner, as well as can get update activities of libraries by

the SMS on their mobile phones. It also helps users to access, manage, integrate, evaluate, create, and communicate with other users more easily than ever (Ahmad & Nishat, 2009 & Parvez, 2011).

Scholars such as Liu (2011), Mogali (2015), Messi (2018), Guliciuc, Montano, Dreve, and Miron (2018) pointed out the applications of artificial intelligence technologies in libraries. Their investigations suggested that libraries can be developed as an artificially intelligent one by applying 'AI' technologies at its various levels of operations; and that the use of an expert system at the reference section which would help the patrons in the recommended sources to lookup for certain questions. With the help of the system, students can be imparted reference skills. Library enabled expert system helps to solve problems in a number of areas. Most will focus on narrow domains with an emphasis on the local concern.

According to Shrivastava and Dey (2018); Temasek Polytechnic Library (2018); Vysakh and Rajendra (2019) technology has advanced the libraries in many ways; they have started to place robots instead of humans in various operations especially those tasks, which are hazardous and time-consuming. For example, Robot at PESIST central library helps in the filing, sorting and replacing the books in the shelf. Libraries with a huge collection are now using robots for inventory purpose. The 'Robbie' robot developed by the Temasek Polytechnic Library can scan more than 32000 books per day. Another robot from the same library named 'Bobbie' is able to deliver materials like newspapers, magazines, brochures, can welcome and directs guests & students to various locations. The robot has also been programmed to answer Frequently Asked Questions (FAQs) that students may have.

Libraries can integrate robotics with other AI technologies like a drone being controlled by a robot can make sure that the library is always under surveillance. Talking robots can be placed in various sections of the library as a user aid and guide. Shanghai library has put up a humanoid robot at the entry which will interact with the users and clarify their doubts. The applications of robotics in libraries are widespread and in present days, no doubt that robots will dominate the libraries signaling the staff-less libraries ahead.

Libraries sit at the heart of our communities. Every day, people of all ages visit their local library for reading, learning, conducting research, communicating

with others, or for just socializing with others. But some patrons, or would-be-patrons, cannot, for a variety of reasons, use their library's offerings. Some of these potential users have disabilities or other limitations and are unable to access the resources. Others require special tools or alternative forms of library materials to allow them access to information. Still others are unaware of what a library can provide, particularly online materials and resources, or don't have the skills they need to use Internet-based information and communication technology (Moisey, 2007).

Therefore, if the library adopts an integrative and inclusive approach to the information service delivery by integrating Artificial Intelligence and robotics parameters such as library automation, information and communication technologies, an inclusion of best practices to imbibe in satisfying the health information needs of Nigerians including those who are physically challenged and those living with various health challenges will ensue. Scholars have delved into to various researchers to empirically verify how integration and inclusiveness with enhance library information service delivery in satisfying the health information needs of patrons.

Models for Efficiency and Effectiveness in Library Delivery of Health Information

In a society of lifelong learning, libraries will be nodes connecting the local learning setting – whether it is of a formal or informal kind – with the global resources of information and knowledge. They can therefore play a role of fundamental importance in the development of future systems of lifelong learning. The development of the Information and Communication Technology (ICT) has already laid the basis for the creation of information networks, giving users, even of small local libraries, access to the worldwide sources of information. Thus, libraries can be said to qualify as important prerequisites for an informed democratic knowledge society. In this situation libraries and professional librarians will have to change and adapt to new demands, professional tasks and working conditions. Libraries should always be directed towards the empowerment of the users. A climate should be created in which even the shyest person feels able to ask for help without being judged inadequate (Häggström, 2004). This essentially will be achieved by creating models for efficiency and effectiveness in library service delivery.

Importantly, we need more research and knowledge about how libraries and the professional profiles of librarians should be designed in order to improve their preparation to meet the new needs and demands directed towards them. Libraries have developed in concert with their local and national history. Political, economic and social circumstances create, shape and develop libraries. Among libraries we can find diversity and difference. The most modern and well-equipped library is not necessarily the most developed in the art of stimulating popular participation and democracy (Häggström, 2004).

One of the fundamentals to building a knowledge-based economy is through the provision of quality information via libraries. The main contention is that libraries are being ignored and not adequately resourced as they should be and as a result, they are not playing an efficient and effective role in supporting and enabling quality education. This results in poor service provision to students and teachers, researchers and the general clienteles. Based on this premise, it is important to create or adopt a model that will help management, stakeholders and the government to assess the efficiency and effectiveness of the library resources and information services delivery. It is hoped that information service delivery can be improved in libraries if the LibQUAL model is used (Häggström, 2004, Shonhe & Marambe, 2019). This suggests that health information provision will be improved to satisfy the information needs of users.

LibQUAL is a model used for ensuring efficiency and effectiveness in library service delivery. The model was initiated in 1999 by Fred and Colleen. According to Thompson (2022), LibQUAL is a web-based survey offered by the Association of Research Libraries that helps libraries assess and improve library services, change organizational culture, and market the library. In 1995, 1997, and 1999, Fred and Colleen had collected service quality perceptions of samples of TAMU library users, using the "SERVQUAL" protocol developed in the 1980s by TAMU Professors Zeithaml, Parasuranam, and Berry. However, SERVQUAL was developed for use in the for-profit business sector, and (a) included items not considered relevant by some library users (e.g., the attire of service staff), and (b) did not include some items very important to library users.

In 1999, Colleen, then a Ph.D. student, approached one of her statistics teachers, Bruce Thompson, then TAMU Professor of Educational Psychology

and Adjunct Professor of Family and Community Medicine at Baylor College of Medicine (Houston) and asked him to work with her and Fred in developing a modified protocol suitable for use in libraries. At this time, Fred was also serving on the Board of the Association of Research Libraries (ARL), an association consisting of roughly 123 of the largest research libraries in the United States and Canada. The A&M team proposed to ARL that the TAMU team would develop this alternative protocol, which the team subsequently named "LibQUAL®," and would give the protocol to ARL for non-profit use in improving libraries.

Mavodza and Ngulube (2011) asserted that libraries in the developed world have significantly developed and are applying some Knowledge Management (KM) principles and practices in the provision of library services. Such services include provision of health information to satisfy the user needs of people living with ailments like HIV and AIDs as well as cancers and diabetes. On their part, Wen (2005), Tahleho (2016) and Bawack (2020) stated that, to prove their relevance and value, libraries should strive to provide the right amount of information to the right clientele at the right time with the right expense of financial and human resources. Libraries must increase their operational efficiency in order to meet the challenge. One management tool that can assist in this regard is the knowledge management process of knowledge-sharing.

7.   CONCLUSION
Librarianship is rapidly evolving with rapid advancement in information technology. Librarians as information scientists should be at alert to meet the demands of the new services as they emerge, for effective health delivery. These are targeted to adequate provision of health information by Librarians which will sharpen the quality of care and minimize medical error. To achieve the desired healthy living, citizens need to be constantly informed on things around them and this can be done with the establishment of quality library and information services where citizens can access needed health information. Library and information services are therefore sine-qua-non for every aspect of national development and their wellbeing.

The health sector, policy makers, education sector, researchers and stakeholders are of the opinion that information services dissemination are key components of research in every field of endeavor. It is sad to note that

farmers, researchers, health sector workers, policy makers etc. use library and information services to a very low extent and library is not their main source of information. Rather, most people depend on other channels such as neighbors/friends, personal experience, T.V, radio for their health information.

Libraries are important cornerstones of a healthy community. Libraries give people the opportunity to find jobs, explore medical research, experience new ideas, get lost in wonderful stories, while at the same time providing a sense of place for gathering.

As ASUU declared to the Federal Government of Nigeria (2020) "we have gotten to that stage in Nigeria, where we have to take very drastic positive measures when it comes to our educational system, especially if we want to have a healthy community or society. This is because education in Nigeria has been thrown to the dogs as public schools are underfunded. The effect of this on the citizens is that many students have been thrown out of school especially those from poor background. The decadence of the educational system is heavily reflected in the poor reading culture of many Nigerians. This poor reading culture is fueled by the fact that many Nigerian schools do not have libraries. Even schools with libraries either have unfunded ones with ancient books or unconducive reading environment.

In public libraries the story is worst, according to public journals, there are about 316 public libraries in Nigeria, splattered across 36 states, limited to urban areas. That has resulted in illiteracy and ignorance among the inhabitants. The library can have an important role in advancement of knowledge. In Benue State the situation is worst. Out of 23 LGEAs it has only 9 branches of public libraries with only 16 staff and not all these branches are functional.

HIV and AIDS is a crisis not only for healthcare sector, but also present a challenge to all sector, consequently, it is a development question. The scourge has imposed a steady decline in the key indicators of human development and hence revising the social and economic gains that Nigeria has strived to attained which at the same time a cause and consequence of

poverty and underdevelopment. It has constituted a challenge to human security and development in diminishing the chances of alleviating poverty and hunger, achieve education, deaths and ensuring environmental sustainability.

8.   RECOMMENDATIONS

Health concerns should be integrated in all polices such as international development, security, foreign policy, environment, economy, in addition to social welfare, labour, health and research. Health is now the concern of world leaders and heads of government- it must remain a permanent feature of their engagement. Libraries are no doubt valuable resources for promoting health information literacy and access. Governments, institutions, and individuals can work together to ensure that libraries effectively meet health information needs and contribute to improved public health outcomes. Here are some of my recommendations for government, institutions and individuals.

Governments

Government could consider the following as intervention:

Funding and Support: Government should allocate reasonable funding and resources to public and community libraries to ensure they can maintain a comprehensive collection of health-related materials, both in print and digital formats.

Collaboration: Government should collaborate with libraries to host health-related workshops, seminars, and informational sessions to educate the public on health issues, preventive measures, and the use of health information resources.

Promote Health Literacy: Encourage libraries to offer programs that promote health literacy, such as literacy classes, health information seminars, and partnerships with local healthcare providers for health screenings and consultations.

Digital Access: Ensure that libraries have reliable internet access and digital resources for online health research and telehealth services, especially in underserved communities.

Interlibrary Cooperation: Support interlibrary cooperation and resource

sharing to expand access to a wider range of health information materials.

Institutions
Health Information Resources: Institutions especially Higher Educational Institutions (HEIs) should curate and maintain a diverse collection of health information resources which includes books, journals, databases, and reputable websites. Regularly update these resources.

Librarian Training: Train librarians to provide guidance on locating and evaluating health information, helping users navigate databases, and ensuring patron privacy in health-related searches.

Community Outreach: Organize health-focused events, workshops, and information sessions in collaboration with healthcare providers and public health organizations to serve the community better, as this will further strengthen the relationship between the gown and town.

Digital Access: Provide and maintain user-friendly, online health information portals and catalogs to facilitate remote access to health resources.

Collaborate with Local Healthcare Providers: Establish partnerships with local healthcare providers to offer health information and resources within healthcare facilities, enhancing the patient experience and supporting informed decision-making.

For Individuals:
Individuals should visit and utilize Library resources to access reliable health information. Librarians are very much available and ready to assist patronsto find credible sources in both print and digital formats.

Don't hesitate to seek assistance from librarians when confronted with health-related issues or conducting health-related research. They can guide you to the most relevant and trustworthy sources.

Health Literacy: Attend health literacy workshops and programs offered by libraries to improve your understanding of health information and make informed healthcare decisions.

Stay Informed: Keep up with the latest health information by subscribing to reputable health newsletters, websites, and databases available through your library.

Protect Privacy: Be mindful of your privacy when using library computers or online resources for health research. Clear your browsing history and log out of shared computers when finished.

Community Engagement: Participate in health-related events and programs hosted by your local library to engage with healthcare professionals and fellow community members.

Information is Power: Power to achieve. Power to aim for the ultimate. Power to soar and power to conquer the world. But wait, as powerful as information may be, its progenitor is the library. Librarianship is therefore the powerhouse that releases the capacity for success, progress and development (Amb. Samuel W. Jimba (PhD), 2023)

Thank you.

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and privilege. It is my firm belief that there is no greater fortune than collaborating with someone of your caliber. I want to extend my regards to all other Principal Staff we served together, the two Registrars Dr. Jibrin Idris and Dr. Abubakar Mamuda; my spiritual brother the0 Bursar, Dr. Stephen Uvara ; the Deputy Vice Chancellor Professor Idris O. O. Amali and family, your sage advice and persistent support during my trying times remain a source of strength. You are indeed a worthy brother.

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I acknowledge my immediate family my dear husband Retired Permanent Secretary Pastor Daniel Igba Ape for your unrelentingly support and understanding. To our six children Mercy Terngudzungwen, Grace Sewuese, Esther Mesuur, Moses Terhemba, Pastor Deborah Sedoo and Miracle Mnguuter as well as my son in-law Goodness Fanen Ibi. To all my siblings Isaac Akaazua Anchaver Wanger Iortyom, Hannah Nguhemen Igbaseer, Jacob Shimaver Anchaver and Hembafan Ngusha.

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To my wonderful audience, you all, for being here and for your patience, I say thank you

CITATION OF PROFESSOR REBECCA APE

Rebecca Ape (nee Anchaver), was born as the second child of her mother with several other siblings from other 11 wives of Chief Anchaver Kpabo Angera and Ruth Iyough Anchaver from Vandeikya Local Government Area of Benue State, Nigeria on the 10th October, 1963. She had her basic primary school LGEA Tsuwa, Mbagbera, Vandeikya, Benue State. She attended part of her Secondary school at Government Girls Secondary school Idah, now in Kogi State and later transferred to W.M. Bristow Secondary school Gboko, Benue State. . She attended the Ahmadu Bello University Zaria, where she obtained her Diploma and B. SC. Library and Information science in 1988 and 1994 respectively. She obtained her master's and Ph. D. degrees at the University of Nigeria Nsukka in 2005 and 2012 respectively.

Before starting her professional career at the Benue State University, she worked at the Institute of Christian Studies, Mkar, Gboko as the Officer in charge from 1998-1990. Librarian, Benue State Primary Education Board, 1994-1996. Assistant Librarian to Deputy University Librarian/Associate Professor, Benue State University, Makurdi, 1996-2015 where she worked in different departments of the main library. After exhibiting competence in her profession, she was posted to head the law library from 1999-2002. With her research in medical librarianship Ape was posted to head the Medical Library, College of Health Sciences, Benue State University Makurdi, from 2005-2015 when she was appointed, the University Librarian, Federal University of Lafia, Nasarawa State. Before this appointment, she contributed to the curriculum development of Diploma in library and Information science, Benue State University, Makurdi. She participated as one of the Lecturers for the program and well as Examination Officer from 1997-2009. She as well taught courses in the Department of Library and Information science from 2008-2011when the department was established in 2006. She served the University as the Course Coordinator, Use of Library from 2005-2013.

On a Sound Note

Professor Rebecca Ape has wealth of administration as she tested the position of the Vice Chancellor on acting capacity in June, 2018 when the VC, Professor Liman was away on annual leave. She also belongs to many Committees and Board Members such as Faculty of Law Board Member; Member, College of Health Sciences Management Committee, as well as

Members, University Senate, Tender Board; Finance and General Purpose; Library Development Committee; University Ceremonies Committee; Chairperson, Curriculum Development Committee.

Professor Rebecca Ape has taught and still teaches. She has taught Diploma, Undergraduate and Postgraduate courses. She has also assessed 3 people to the rank of Professor. She has demonstrated capacity in the conduct of research among which are Meeting Health Information Needs of People Living With HIV and AIDS in Benue State, Nigeria, Information Needs of Medical Practitioners; Resources, Services and Problems of Medical School Libraries in Nigeria; Information Services Provision and User Satisfaction in Agricultural Research Libraries in Nigeria. This very paper has the down loads of 3107.

Professor Rebecca Ape belongs to several Professional Bodies. Nigerian Library Association; Medical Library Association; Librarian Registration Council of Nigeria; International Federation of Libraries; Association of Library and Information science.

Professor Rebecca Ape is a Pioneer woman
1. Pioneer Library Officer, Institute of Christian Studies Mkar Gboko Benue State.
2. Pioneer Librarian Benue State Primary Education Board.
3. Pioneer Medical Librarian, College of Health Sciences Benue State University Makurdi.
4. Pioneer University Librarian, Federal University of Lafia, Nasarawa State, Nigeria.

She has provided several Community Services. Professor Rebecca Ape is an Associate Pastor; State Head Coordinator, Women Intercessors for the Church and the Nations (Wailing Women). She also belongs to the Evangelism department, Dunamis International Gospel Center.

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SIGNIFICANCE OF INAUGURAL LECTURES IN FULAFIA

The rite of passage to be come a professor in a university has for hundreds of years included the test of having to profess one's knowledge to a lay audience and fellow academics. Indeed, the origin of the title 'professor' comes from the need to profess, or declare publicly, one's knowledge. The occasion of inaugural lecture presentation is therefore an essential component of the University's public events through which the institution engages with audiences with a broader interest in its research, including funders and decision makers from government, academia and industry. Professionals and academics gain a unique opportunity to engage across knowledge boundaries for the benefit of mankind.

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