

The Menace of HIV/AIDS: The Role of Information Scientist/Librarians
by
Ajegbomogun, F.O and Okorie, C.N.

Abstract

HIV/AIDS is an unprecedented crisis that demands an exceptional response. More than 40 million people are infected with HIV, over 20 million have died, and there are more than 15 million AIDS orphans (UNDP HIV/AIDS, 2004). The AIDS pandemic is a threat to the future of nations. It has created new pockets of poverty with the deaths of parents and breadwinners, leaving children as orphans, who have to leave school earlier and work to support other siblings. The illiteracy level of the society has risen to the point of inadequate access to information; information is the most potent weapon available to mankind to fight HIV/AIDS. This paper argues that given the vintage position of information scientist/librarians as custodians and disseminators of information. The Librarians are in the best position to stop HIV/AIDS from crippling Nigerian citizenry. Finally, possible strategies were offered to tackle the menace of HIV/AIDS.

Introduction

The Human Immunodeficiency Virus/Acquired Immune-Deficiency Syndrome (HIV/AIDS) has exceeded the boundary of the health sector; it is a newly emerged general obstacle to development (Akinyemi, 2005). HIV/AIDS posed a global threat to human existence. This infectious disease seems to be no respecter of anybody regardless of your social status, marital status, age, gender, nationality and race. It has claimed and still claiming men and women in their productive years, the most skilled and unskilled, literate and illiterate, young and old etc.

Medical Newsletter, (2002) reported that HIV/AIDS has reached an epidemic stage in Nigeria, meaning that families are already being stretched to the limit. It is growing daily and the death toll is unabated. HIV/AIDS has complicated the efforts of government in fighting poverty, improve health, and promote development by:

- i. Diminishing a person's ability to support, work and provide for his or her family. At the same time, treatment and health-care costs related to HIV/AIDS consume household incomes. The combined effect of reduced income and increased costs impoverishes individuals' livelihood.
- ii. Deepening socio-economic and gender disparities: Women are at high risk of infection and have little to offer in terms of providing for their immediate families. Children that are affected by HIV/AIDS due to parent illness or death are likely to find the world difficult to live.
- iii. The impact of diminished productivity is felt on a national scale, because the productive age-groups were mostly affected by

HIV/AIDS. (Global Health Council/the Impact of HIV/AIDS, 2009)

The most alarming factor is that this dreadful-killer disease has proved incurable, thereby awakening every organization such as NGO's: WHO, UNICEF, information centers, teams of researchers and developers, schools, information scientist/librarians to spread their tentacles in seeking information and make it available to the public.

Librarians in Nigeria must join their counterparts all over the world to fight the spread of this dreaded killer disease through seeking and making information available to the public. Librarians are the custodian of knowledge, organizers, and disseminator of information should gladly rise up the demand and challenges posed by this virus by providing, repackaging information related to HIV/AIDS and made it available to the users.

Impact of HIV/AIDS on the Citizenry

The human immunodeficiency virus (HIV), which causes acquired immunodeficiency syndrome (AIDS), principally attacks CD4T-cells, a vital part of the human immune system. As a result, the body's ability to resist opportunistic viral, bacterial, fungal, protozoal, and other infection is greatly weakened. *Pneumocystis carinii* pneumonia is the leading cause of death among people with HIV infection, but the incidence of certain types of cancers such as B-cell lymphomas and Kaposi's sarcoma is also increased. Neurological complications and dramatic weight loss, or "wasting" are characteristic of end stage HIV disease (AIDS). HIV can be transmitted sexually; through contact

with contaminated blood, tissue, or needles, and from mother to child during birth or breastfeeding. Full-blown symptoms of AIDS may not develop for more than 10 years after infection. (**Encarta Encyclopedia, 2007**)

HIV is a retrovirus that can lead to acquired immune-deficiency syndrome (AIDS), a condition in humans in which the immune system begins to fail, leading to life-threatening opportunistic infections. Infection with HIV occurs by transfer of blood, semen, vaginal fluid, pre-ejaculate, or breast milk. Within these bodily fluids, HIV is present as both free virus particles and virus within infected immune cells.

Some factors has facilitated the spread of HIV/AIDS as viewed by Nwobi, (1997), AIDS is medically as well as a social problem with serious economic, political, ethical and moral implications. Adamu, (2003) asserted that HIV infection has social and economic implications beyond the obvious consequences on the health of the patients, cost of medical care and death.

According to Shani (2005) for every one out of five patients seeking treatment in Nigerian hospitals is HIV/AIDS patient. Currently, there are 2.7 million people living with HIV/AIDS in Nigeria and about 80% of HIV infections in Nigeria are contracted through sexual intercourse (UNAIDS, 2002). HIV is transmitted to the babies of HIV-positive mothers in 24-45% of births, which has led to increasing number of AIDS orphans, many of whom are also HIV positive. In Kano State for example, Doctors at the Aminu Kano Teaching Hospital (AKTH), Murtala Mohammed Specialist Hospital (MMSH) and the Infectious Diseases Hospital (IDH) have revealed that there is an average increase of 20% of new HIV/AIDS cases each week in these hospitals (Gwarzo, 2005). The Lagos State Minister of Health was quoted as saying that "45% of the current Youth Corpers serving in Lagos State are HIV positive". The Corpers donated their blood as a contribution to Lagos State and since blood cannot be transfused without screening, the donated blood was screened and this shocking revelation emerged. All these Corpers are still ignorant of their HIV positive status.

Today, being two decades after its debut, the disease virus has conferred a new status Persons Living with HIV/AIDS (PLWHAs) on over 40million people world-wide; 28.5% million of

that population i.e. 75% are in Africa. The implication of this is that Sub-Saharan Africa which harbours only 10% of the world's population is also host to over 2/3 of the PLWHAs in the world. In Nigeria, the first known case reported was in 1986. Since then, available literature reveals that 4million Nigerian adults are infected in addition to 1.3 million children. (UNAIDS: 2004)

The 2003 National HIV prevalence sentinel survey summarizes Nigeria's prevalence rate as having risen from 1.8% in 1991; to 5.8% in 2001 and slightly dropped to 5.0% in 2003. (UNAID, 2004). May I opine that this drop is nothing to rejoice over since we all are aware of daily report of the number of death among our youths from HIV/AIDS.

This disease remains a formidable barrier in Nigeria because of fear of stigmatization and discrimination. This fear is accountable for why only 10% of Nigerians know their HIV status. The bulk i. e. 90% prefers to avoid doing HIV/AIDS test Voluntary Confidential Counseling and Testing (VCCT) and remain ignorant of their HIV status.

Sources of Contacting HIV/AIDS

HIV/AIDS as seen from the study has proven 80% of transmission through sexual intercourse. Another medium of transmission of this virus in Nigeria is through harmful traditional practices as reported by (Bature, 2005)

Incisions, tribal marks, ear piercing, local midwives, Polygamy- more than one wife, Concubine, Wife hospitality culturally approved sexual intercourse with children, siblings and wives. Levirate (wife inheritance) in case of death of relations, unprotected coercive sex (rape), child labour, over-crowded population, forced migration e.g. where houses are demolished sex-posing occupants to all manners of hazards, poverty, encouraging sex hawkers.

Other routes of HIV/AIDS transmission is through homosexuality; where men engage in anal and oral intercourse with their fellow men. Since the anus is not designed for intercourse, in this process, it will be exposed to bruises and wounds thereby creating an avenue for entry or transmission of HIV virus into the recipients.

Witchcraft, ritual killing, and cultism are another avenue where an activity that engages the exchange of blood takes place.

An affluent person in the society has increased the spread of HIV/AIDS. Once they discover that they are infected, they take a decision to infect as many victims as possible.

HIV/AIDS works hand in hand with poverty. In Nigeria, people are more concerned about the immediate consequences of their survival than reflecting on contacting a virus whose effect does not manifest until 6 months to 10 years. The Nigerian National Human Development Report, postulates that one in every two Nigerians is poor, and that as many as 33.8% of the population is not expected to survive to age of 40. Beside, unemployment and underemployment in Nigeria, every jobholder caters for over 6 dependants. Going by this, low-literacy level and ignorance tends to be having an upper hand in our socio-economic sector. Trafficking has become a major source of income to many families in Nigeria. Women and child trafficking is rampant among the Rivers, Benue, Edo, and some Eastern states, and some of the ladies are deported back to the country with HIV/AIDS (Bature, 2005). This evil must be stopped because it continues to contribute to the spread of the virus. The female gender tends to be the most vulnerable group to HIV/AIDS according to the UNDP report.

Presently, HIV/AIDS has no officially approved cure. So, what must we do? The only prevention method is by creating awareness for people to shun such practices which could make them vulnerable to HIV/AIDS infection. All hands must be on deck via the NGO'S- international and non governmental organization, traditional rulers, religious leaders, etc and most especially the custodians of information, the information scientist, or the librarians.

How HIV/AIDS is not Contracted

Payne and Hahn (1995), Hahn and Payne (1997), Nwobi (1997), Ogbene (1999), and Adamu (2003) opined that HIV/AIDS can only be transferred through exchange of body fluid such as blood, semen and vaginal secretions.

HIV/AIDS is found only in fluid (i.e. body fluid). It is not an air-borne disease. It is not contracted through casual contact like touching infected persons, sharing eating utensils, eating

together, sharing clothes, dishes, toilet seats. We cannot get HIV/AIDS from hugging, shaking hands, or lying on the same bed or being near to an HIV positive person.

HIV/AIDS is not transmitted if you peck someone on the cheek, even when you kiss in the mouth you need about a glass full of saliva to be able to transmit HIV through the saliva except there are sores or wounds in the mouth of the two people involved which is likely susceptible to exchange of blood in a (deep) kissing process.

HIV/AIDS cannot be contracted through a mosquito bite, while malaria parasites are passed through mosquitoes, HIV/AIDS virus cannot survive in the mosquito's stomach. In fact, researchers are working on the possibility of finding cure via what kills the virus in the mosquito's stomach.

Questions were also posed on whether sleeping with virgins can cure HIV/AIDS? The answer to this is NO. There is an unfortunate trend among the ignorant community with the wrong advice from fetish priest, whereby babies are being raped by men, some of who are over 40 years with the erroneous belief that they will receive solution to the HIV/AIDS plague in their lives. Another fallacy is also by sleeping with disabled females. These evils should stop because they do not cure AIDS. They are only destroying the lives of such innocent babies and disabled persons.

The Role of the Information Scientists/ Librarians

This pandemic is the worst calamity that has befallen the human race (Bature, 2005). It is well known that there are over 1,500 Nigerians being infected with this virus daily. UNDP has projected that by the year 2010, HIV/AIDS related death will be 6.95million, while by 2012, 8million Nigerians would have acquired the status of PLWHAs; they equally predicted that Nigeria would have been using half of its budget on managing HIV/AIDS by the year, 2015. (UNDP HIV and AIDS, 2004)

AIDS has no cure. The most potent weapon available in the arsenal to fight this hydra headed demon is "information". Our traditional role in libraries is to collate, store, preserve and disseminate information to the public. The discovery of internet services has made information available globally. If we fail to rise

to face the challenge posed by this HIV/AIDS menace, then, there is a risk of this generation being destroyed.

Suggestions on the Way Forward

Libraries according to (Ojo and Olorunyomi, 1990) is a center of communication, the agencies through which librarians can best serve the noble course of education; libraries also supplement and compliment the mass media of communication; press, radio television and cinema. The library cannot guarantee good health to its users, but can provide information that the users could explore and find how to live healthy. (Oyegade, Nassarawa & Mokogwu, 2002) identified information as essential data of value in planning, decision-making and the execution of programmes. Ija, (2004) opined that the library has an important role to play in modeling the society and the youth in particular.

The libraries could organize orientation talks on HIV/AIDS, display books, pamphlets, and posters on HIV/AIDS. It is only a healthy person that can use library effectively. For instant, a Youth Empowerment NGO advocacy programme on HIV/AIDS awareness campaigns visited one of the Nigerian Universities, (University of Agriculture, Abeokuta) to inform students and staff the existence of HIV/AIDS not only a health grand but to educate others on what this disease could course on its immediate community and the society at large. In this response, the University was embarked on eleven (11) agenda programme that was supported by the Association of African Universities, (AAU), Accra, Ghana, an institutional policy on HIV and AIDS related matters. According to the (Institutional HIV/AIDS Policy, 2007), these policies are as follows:

- i. Introduction on the menace of HIV/AIDS;
- ii. The Guiding Principles;
- iii. The Position of the University in the fight against HIV and AIDS;
- iv. Rights: (a) Right of the University (b) Rights of Staff (c) Rights of Students;
- v. Responsibilities of the University, and of Members of the University Community;
- vi. Gender Policies to avert HIV/AIDS on Campus,
- vii. Teaching and Research;
- viii. Extension and Community Service;

- ix. Management of HIV/AIDS Related Matters;
- x. Services and programmes for prevention, treatment, care and support; and
- xi. Structures to be responsible for monitoring the implementation of the policy.

This is one of the laudable programme structured to minimize the spreading of HIV/AIDS in Nigerian universities. The magnitude of the problem of HIV/AIDS is stigmatization, discrimination, and emotional depression. Stigmatized people are negatively looked at by other people and they are often discriminated against them. This is a daily experience for many people affected by HIV in their workplace, school, and recreational activities. Therefore Librarians should sensitize the public to ensure equal right of PLWHAs through awareness service in the public or print media.

Outreach Services

Outreach services cover all forms of programme designed to provide information for the grass root. Brown, (1971) defines outreach as the area of public library services to the disadvantaged, which covers services to illiterates, minorities, migrants, economically disadvantaged, those with language barriers along with sick, aged, handicapped and institutionalized.

The librarians must be involved in outreach services and make the following materials available to the users. These materials and equipment identified by Alokun (2003) includes library building or book mobile services, books, journals, pamphlets, booklets, newspapers, articles on subjects like HIV/AIDS, sanitation, agriculture, local crafts etc, dissemination of relevant information through talks, meetings, demonstrations, displays, story hours, films slides or other audio visual presentations, computer assisted learning materials such as subjects on video cassettes, video games and some of the resources that may be needed for the provision of information. For example, in some rural areas in Kenya, book boxes are provided which are taken to rural areas by trucks, bicycles and donkeys. In the rural areas of Nigeria, boats stocked with information could also be taken to people who live near the river banks.

Library Publications

The library should issue out publications to guide the public on the menace of AIDS. This publication will provide details and accurate information about AIDS. It could be well illustrated by coloured photography's. It must contain postal address, telephone and fax numbers, e-mail and web site address that provide relevant information about AIDS.

Exhibition and Display Services

Awareness could be created through exhibition and displays. The doubting people could see photographs of those who are seriously affected by the virus while exhibition on the other hand, is generally to stimulate public's interests on how to tackle the disease. Materials on a particular topic that might be of interest to the public could be exhibited. A good example is a library books, periodicals, films, video tapes, tape slides, etc on AIDS. These could be exhibited through the use of glass display cabinet, displays stand, display boards etc.

Liaising With Government and NGOs

There is a need to make a regular contact with government ministries and departments as well as NGOs for relevant information generated by them and for financial assistance. Notable among the Non-Governmental Organization (NGOs) are UNESCO, Book Aids International (BAI), United Nations International Children Education Fund (UNICEF), World Bank, Rockefeller Ford Foundation etc. Librarians can collaborate with these NGOs by enriching their libraries with books and other materials on HIV/AIDS and participate in the awareness campaign of this disease.

Private Organizations

There is a need to liaise with electronic database providers in order to acquire recent scientific publications on HIV/AIDS electronic materials. Librarians should be committed on the creation of databases on HIV/AIDS and documentation i.e. indexing and abstracting articles on HIV/AIDS for easy and fast dissemination to users.

Our harmful traditional practices which enhances the speedy spread of HIV/AIDS should be abolished for it has made the women folk more vulnerable to the virus, e.g. wife levirate after the death of a spouse, causal sex partner arrangement, commercial sex workers, female

circumcision, traditional midwifery, etc. We should consider gender issue and explore the local way we could to reduce vulnerability.

It is a well known fact that Nigerians don't fancy reading, but this notwithstanding, librarians need to repackage information on HIV/AIDS and made available to the public through postal, cardboards in strategic places in the cities and rural areas.. Monthly talks on issues of HIV/AIDS in our Libraries will help in educating both our workers and readers, so let us leave the pull-him-down syndrome and embrace the beauty in collaboration and networking among libraries and librarians.

Conclusion

HIV/AIDS is real; let's join in the battle against it by ensuring our workers and those outside our working environment have access to Voluntary Confidential Counseling and Testing (VCCT) so that the predictions of UNDP which will sum up the death to 8.0 million people come 2012, will not come to pass.

Therefore much effort need to be geared towards greater preventive awareness while giving support to the millions effected. There are available drugs now which can go a long way to help the PLWHAs to live normal and productive life and this can only be achieved by breaking stigmatization and discrimination, enabling people to have knowledge of their HIV/AIDS status.

Encourages and empower our youths, women and social workers on how to arrest the spread of HIV/AIDS in Nigeria. Although, scientists advocated the use of condoms as panacea, the same scientific researchers have now found out that HIV leaked in 10-25% of condoms tested. The only alternative is the preaching of abstinence, safe sex and other wholesome sex practices. "Prevention is better than cure".

References

- Adamu, H.Y. (2003), "AIDS awareness". Spectrum, Ibadan
- Adeneye, A. (2005), "45% tested Lagos Youth Corpers are HIV+", Youth Speak. Issue 2, pp.8, 10.
- Akinyemi, T. (2005) "Health divine: path out of a pandemic", Youth Speak. Issue 2.
- Alokun, N.A.T. (2003), "Planning and executing library outreach services in Nigeria. Nigerian Libraries 37(1) pp. 31-41

- Bature, R. (2005), "HIV and AIDS: challenges, prospects and window of hope". A compendium of papers presented at the 43rd National Annual Conference and AGM, 9th - 15th July, 2005 p. 31.
- Encarta Encyclopedia (2007), Luc Montagnier/Institut Pasteur/CNRI/Science Source/Photo Researches, Inc. (Retrieved April, 1st 2009)
- Global Health Council/ The Impact of HIV/AIDS, http://www.globalhealth.org/hiv_aids/ (retrieved March, 27th 2009)
- Gwarzo, A. (2005), "Sexually Transmitted Diseases in Kano", AKTH Newsletter. AKTH, Kano.
- Hahn, D.B. and Payne, W.A. (1997), "Focus on Health". McGraw-Hill, New York.
- Ija, J. A. (2004), "The role of library in the prevention of drug abuse in Nigeria amongst Nigerian youths", *Jowice* 8 (October) pp. 283-286.
- International HIV/AIDS Policy (2007). University of Agriculture Abeokuta, Nigeria, pp. 1- 19.
- Nwobi, P.C. (1997), 'Marriage and family counseling'. Pan-Afric, Enugu.
- Ogbene, A.E. (1999), "Fundamentals of personal and community health for schools and Colleges". Noble, Onitsha.
- Ojo, O.A. and Olorunyomi, G.F. (1990), "An examination and assessment of the relevance of library in the educational development of Nigeria". Ekiadolor Journal of Education 1 (1) 139-144.
- Oyegade, E. A., Nassarawa, S. A. & Mokogwu, W. O., (2002), 40 years of Public Library Services to Nigeria: Past, Present and Future. Nigerian Library Association. 40 years of Library and Information Service to the Nation: A compendium of papers presented at the 40th
- Payne, W. A. and Hahn, D. B. (1995), "Understanding your Health". 4th ed. Mosby, New York.
- Shani, B. (2005),"Classification of diseases of patients in Nigerian hospitals" KSMH, AKTH Newsletter.
- UNDP HIV and AIDS. (2004). A challenge to sustainable human development report; Nigeria,
- United Nations Program on HIV/AIDS (UNAIDS) (2002), "Data on HIV/AIDS in the Developing World" WHO, New York. National Annual Conference and AGM. 12-21 United Nation Program on HIV/AIDS (UNAIDS) (2004), "AIDS in the Developing World". WHO, New York.