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Information Needs of People Living with HIV/AIDS in Kano State,  
Northern Nigeria

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**Abstract**

Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome (HIV/AIDS) is a disease that has social, economic, and political implications in

Nigeria. It affects young people who are at their most productive age, thereby affecting the economic productivity of the nation. In order to achieve the objective of reducing the epidemic, the information vacuum about the disease that exists among PLWHA needs to be investigated and subsequently bridged. Survey research method was used to undertake this study and a self-administered questionnaire was used for collecting data. The study showed that the PLWHA share different type of information which include health information and social information using various methods such as journals, magazines, AIDS newsletters and the internet, Physicians, friends, various agencies and groups helped to facilitate information sharing among the respondents. Lack of computer literacy and internet access were among the factors that militated against information sharing among the respondents. The PLWHA in Kano State should be encouraged to make a maximum utilization of pamphlets, AIDS newsletters, and the internet because these items contain vital information including recent and up to date knowledge on HIV/AIDS, and modalities for its treatment and control.

### **Introduction**

People Living with HIV/AIDS (PLWHA) is a term used to describe people affected by the Human Immunodeficiency Virus (HIV) and those suffering from the Acquired Immunodeficiency Syndrome (AIDS). The disease is caused by a virus called HIV. There are two serotypes called HIV 1 and HIV 2 (Omenugha & Ekwugha, 2007). This deadly virus destroys the body immune system thereby making it impossible for the body to fight certain infections and is a disease that has no known cure.

HIV is not only a health issue but it also affects social, political and economic development, including security and life expectancy. The virus is transmitted through sexual intercourse which could be hetero, homo or bisexual. It can also be transmitted through blood transfusion with infected blood. Other means of transmission include sharp or blunt injuries with infected sharp objects such as infected needles and instruments while an infected pregnant mother can also transmit the virus to her child during pregnancy or childbirth or through breast feeding (Tukur, 2005).

As a result of the above problems coupled with stigma and discrimination the PLWHA faced, various governments agencies were set up in Nigeria to fight the epidemic. The PLWHA were also encouraged to form support groups and associations among themselves to help them find solutions to some of the problems. The role of the government agencies included capacity building, supply of drugs to hospitals and funding of the PLWHA support groups. These agencies used different communication strategies in reaching the target audience. Communication is key to fighting the HIV/AIDS epidemic as it has been shown that the key to addressing the problem of HIV in Nigeria and indeed elsewhere is awareness (Kurfi, 2008). The general public need information on the virus and how it is spread. The PLWHA on the other hand need information on how to control the spread of the virus and help each other on how

to lead a healthy life. Paramount among these methods is the need for regular compliance on the intake of antiretroviral drugs among PLWHA. The need to increase the level of communication and information sharing among PLWHA is necessary. Badawi (2005) noted that PLWHA as victims of the deadly disease have an important role to play in the fight against the disease and prevention of its spread to uninfected persons. The author also stressed that PLWHA should look for information about the modalities of transmitting the disease as well as preventive measures and share this important and useful information among themselves and with the general public.

Omenugha and Ekwugha (2007) noted that since the disease is associated with stigmatization and shame in our society, information sharing among the PLWHA may include how they can help each other, psychologically, mentally and socially in order to reduce depression among themselves.

Kano is a highly populous city located in the North West of Nigeria. Statistics have shown that Kano state had 0.2% prevalence of PLWHA in 1991, but within six years, the prevalence rose to 4.3 % and then 3.8% in 2001, and 4.1% in 2003, and 3.4% in 2005. Being a large cosmopolitan city, certain factors have been identified that increase the HIV epidemic in the state to include poverty, illiteracy, unprotected sex and stigmatization which play a role in making the PLWHA hide their identity and infect other people in the process. (Nwokedi, 2007).

### **Research Objectives**

The study had the following objectives:

- a. To find out the type of information PLWHA communicate to each other in Kano State.
- b. To find out the type of media the PLWHA use to communicate among themselves in the area under study.
- c. To identify challenges that affect information communication among the PLWHA in Kano state.
- d. To find out the measures to be taken to address the identified challenges.

### **Scope and Limitation of the Study**

The scope of this study is on information media and communication challenges among PLWHA in Kano State. Similarly, the study is limited to PLWHA who are registered members of the registered support groups of PLWHA within the state. There are a number of PLWHA that are not members of any support group, and who do not even report to any medical centre. This study did not include them because they could not be easily identified.

## Methodology

A Quantitative methodology was used.

### Population, Sample Size and Sampling Technique

The target population for this study was the PLWHA in Kano state. The subjects were obtained through their register with the PLWHA support groups located in Kano. The population of the subjects is presented on table 1.

Table 1: Population of the Study

	NAME OF SUPPORT GROUP	LOCATION OF HEAD OFFICE	POPULATION OF REGISTERED MEMBERS
1.	Godiya Support Group.	No 15 Zaria Road Gyadi Gyadi, Kano	1902
2	Voice of the Hopeful	No 4 opposite VVF, Zoo Road, Kano	850
3	Council of Positive people	378 Gadan Kaya, Kano.	750
4	Wazobia Support Group.	No 16 Opposite NDE Hotoro, Kano	900
5	Haske Support Group	No 1 Iyaka Road by Zaria Road, Kano	1000
6	Taimako Support Group.	No 16 IBB Way, Kano	2006
7	Munafata Support Group.	No 1 Maikalwa Street, Naibawa, Kano.	400
8	Hamdala Support Group.	Murtala Mohammed Specialised Hospital, Kano	1601
	TOTAL		9409

Source: Kano Network of People Living with HIV and AIDS 2009

In the interest of fairness of participation and generalization, the sample for this population was selected from the eight registered Support groups. The table for determining sample size from a given population by (Krejcie & Morgan, 1971) was used to arrive at the selection of 370 respondents from the population of 10,000. The population for this study was 9409 which was close to 10,000; the researcher therefore selected 370 respondents across the groups. The number was proportionately allocated

to the eight support groups. This implies a percentage of each group over the total population, the percentage was then multiplied by 370 which was the sample determined by Krejeie and Morgan's table for determining sample size. The result was therefore used to select sample from each group, as presented on Table 2.

**Table 2: Population and sample selected**

	SUPPORT GROUP	POPULATION	SAMPLE SIZE
1.	Godiya Support Group.	1902	75
2	Voice of the Hopeful	850	33
3	Council of Positive people	750	30
4	Wazobia Support Group.	900	35
5	Haske Support Group	1000	39
6	Taimako Support Group.	2006	79
7	Munafata Support Group.	400	16
8	Hamdala Support Group.	1601	63
	TOTAL	9409	370

The study was conducted from 1st March to 31st June 2010. The information was obtained from the respondents through open ended pretested questionnaires distributed to the PLWHA during their support group meeting. The questionnaires were translated to the local language of Hausa to facilitate understanding. The information solicited from the respondents included their socio economic data, types of information shared, sources of information and their opinions on the availability of information among PLWHA.

#### **Research Instrument and Distribution**

A total of 370 copies of the questionnaire were distributed and 359 were returned and found usable giving a response rate of 97%.

#### **Demographic Data**

The age of the respondents ranged from 13 to 57 with a mean age of 31.7 years. Females were the majority consisting of 210 (58.4%) respondents, while there were 149 (41.5%) males. Majority of the respondents consisting of 192 (51.8%) were married while 167 (46.5%) were single.

#### **Results and Discussions**

This data above has shown that the disease affects young people who are at their most productive age. It was also noted that women were the most vulnerable group and that the disease could be transmitted to unborn children if such women get pregnant.

Further analysis also revealed, that majority of respondents were married. Stigma and discrimination may force such victims to hide their identity and in the process keep on spreading the disease especially in their matrimonial homes. In a community like Kano, where widowers and widows are encouraged to remarry, those whose partners died of AIDS may remarry and infect their new partners and other partners such as co- wives. This was equally proven in a previous study by Ijezie (1993) which showed that majority of people infected with HIV are young people between the age of 14-25. It was equally reported by UNAIDS (2000) that about half of all new HIV infection worldwide occur among people younger than 25 years of age, while women and children remain the most vulnerable groups.

The respondents came from all the 44 local government areas, but the local governments with the highest participants were Tarauni with 62 (17.2%), Nassarawa with 40 (11.1%), and Fagge with 31 (8.7%) respondents respectively. This finding is equally not surprising because these local governments are located in the Kano metropolis which is the state capital and with large commercial activity involving different nationalities and ethnic groups.

#### **Type of Information Shared Among PLWHA in Kano State**

All (100%) respondents indicated that they shared information among themselves.

**Table 3: Types of information shared by PLWHA in Kano state**

S/N	Type of information	Frequency	Percentage (%)
1	How to improve their health condition	120	23.6%
2	How to take their drugs	100	20.0%
3	How to disclose HIV status to friends and family	60	12.3%
4	How to prevent secondary infection	50	10%
5	How their religion view the disease and the people infected	50	10%
6	Information on where to get financial assistance.	50	10%
7	Information about AIDS related death	40	7.8%
8	How to avoid infecting others	37	3.2%
	Total	507	100%

- Some respondents had more than one response

Table 3 showed the type of information shared by PLWHA in Kano state. The commonest type of information they share was information on how to improve their

health condition as responded to by 23.6% of respondents. Interestingly, only 3.2% of respondents shared information on how to avoid infecting others. This finding may not seem as a surprise. The fact that the PLWHA are aware of the critical health condition they are in, their priority information need would be on how to improve their health condition. Information on how to take their drugs was second highest with 100 (20%) respondents. Information on how to avoid infecting others had the lowest frequency with only 37 (3.2%) respondents. This development appears frightening as it appears as if the PLWHA do not give priority on how to avoid infecting others, but considering the fact that all the respondents were members of support groups, they were probably aware about the ways through which they could infect others (through the health education at such meetings). Whatever the case may be this finding has a lot of implication to the society. It might be considered that the more they discuss about it by way of sensitizing each other about the dangers of getting more people infected, the better for the society.

The results also showed that PLWHA share various type of information ranging from medical information, social information and religion. Similarly, Palmer and Hogan (2005) revealed in their study conducted in United States of America (USA) on “Information preferences and practice among PLWHA” that the respondents shared medical information and this included information on how to improve their health condition, how to prevent secondary infection, how to take their drugs and information on AIDS related death. Also, Huber and Cruz (2000) in their work titled “Information need and Information seeking behavior of HIV positive men and women” showed that PLWHA in USA shared information on HIV disclosure, death and dying and also information on religious and spiritual topics. This showed that there is similarity of information shared by PLWHA in Nigeria and that of developed countries like USA.

In a separate question, the respondents were asked to indicate various reasons for sharing the information. It was noted that majority 167 (46.5%) indicated for improvement of their health condition while 96 (26.7%) indicated preventing infecting others and to lead a healthy life. In the study conducted by Huber and Cruz, (2004), PLWHA search for health information in order to escape from the stress of living with the disease. Palmer and Hogan (2005) in their study on “Information preferences and practice among PLWHA” maintained that information has been understood by PLWHA as a critical resource in the effort to prevent transmission of HIV, manage the complexities that accompany the disease and prolong the PLWHA’s life. This finding is not surprising because HIV could progress to AIDS which could cripple the immune system of the person infected, making the body unable to fight all kind of infections. It is therefore not surprising that the PLWHA take as a priority all information on how to improve their health condition and how to lead a healthy life.

The findings of this study also revealed that virtually all the respondents 350 (97.3%) regarded information sharing among PLWHA as either relevant or very

relevant. It was however surprising that 9 (2.5%) respondents considered information sharing among them as irrelevant. This problem may not be unconnected with difficulty in identifying the right place to search for the information or possibly they have given up hope of living a long life hence considering the information sharing as unimportant. It might also be that the respondents are not very good in expressing their information need to the researchers.

Similarly, 35 (98.93%) respondents indicated that information sharing among PLWHA help in controlling the spread of the disease. However, 5 (0.1%) respondents were undecided about the subject, while 4 (1.1%) had negative feeling on whether information sharing among PLWHA assist in controlling the spread of the disease.

**Means of Information Sharing and Sources of Information**

To determine the methods of information sharing among the PLWHA in the area under study, various information sharing method were presented to the respondents to indicate the one they use to communicate information among themselves with an option to add others.

**Table 4: Means of communication among PLWHA in Kano State**

S/N	Means of Communication	Frequency	Percentage (%)
1	Support Group Meetings.	100	23.1%
2	Inter Personal communication	70	18.1%
3	Seminars	80	16.2 %
4	Lectures	60	14.1%
5	Workshops	40	9.0%
6	Magazines	40	9.0%
7	AIDS newsletters	20	5.0%
8	Pamphlets	20	5.0%
9	Internet	10	2.2%
	Total	440	100%

- Some respondents had more than one response

As shown in Table 4, the respondents used multiple the sources of information. The information shared during support group meeting was rated the highest with 100 (23.1%) respondents utilizing it.

This finding is not surprising because the support group meetings are highly attended by the PLWHA where they meet with each other and share their problems. The PLWHA support groups in the state are very much involved in enlightening, motivating and creating awareness to PLWHA on the consequences of the disease, and its spread. This finding is important as it exposes a window of opportunity for reaching PLWHA



just as the researchers did. The popularity of support groups among the respondents makes the support groups good vehicles for transmitting information. The finding regarding inter personal method of information sharing was equally not surprising because the respondents regularly attend clinics and meetings where they meet with their friends and colleagues and they discuss similar issues of concern. With regard to the low use of internet as a source of information to the respondents (2.2%), the finding may not be surprising because our society is a developing one, with low levels of computer literacy and poor access to the internet.

The findings in table 4 are somehow different from that of Palmer and Hogan, (2005). In the USA study, physicians were the major source of information to PLWHA in the United States followed by magazines and newspapers. The difference with the Nigerian respondents is probably because of the low physician: patient ratio compared to the USA.

### **Challenges of Information Sharing Among PLWHA in Kano State**

The respondents were asked to state the challenges they have in information sharing among them. The challenges mentioned by the respondents were low level of literacy (26.3%), inability to comprehend basic information on HIV (24%), lack of Internet and Computer literacy 16%, Lack of awareness on where to access print media (13%), lack of HIV Information through traditional channels such as libraries (11%) and inability to patronize print media (11%). Some respondents, however, had multiple responses.

The commonest challenge was low level of literacy. This finding is similar to that of (Palmer Hogan, 2005). They noted that HIV information does not always get to the right hand that could benefit from it, as much HIV information is published but in this case, low literacy means many PLWHA may not be able to assimilate the information.

Huber and Gillaspay (1998) also showed that HIV treatment fact sheets, pharmaceutical company brochures, newsletters and other gray literature can be difficult to access as a result of its limited dissemination and integration into the usual stream of health information.

### **Strategies for Improving the Challenges**

In an attempt to find out the measures to be taken in solving the above problems, the respondents were presented with possible solutions and required to

**Table 5: Possible solutions to the problems of communication among PLWHA in Kano state**

S/N	Solutions	Frequency	Percentage
1.	The support groups should use the language that can easily be understood by the PLWHA	90	24%
2.	The government should provide more HIV information resources in their libraries	40	11%
3.	Help in educating the PLWHA in the use of print media	60	16%
4.	Educate the PLWHA on the use of Computer and Internet	60	16
5.	Increase awareness to PLWHA on the vital information contain in the print media	90	24%
6.	The support groups should be always put what they discuss in meeting, seminars, workshop in print.	40	11%
Total		380	100%

- Some respondents had more than one response

Most of the respondents 90 (24%), indicated that the solution to the problem was the use of the language that can easily be understood by the PLWHA and increasing awareness to PLWHA on the vital information the print media contain. Similarly, 60 (16%) indicated educating the PLWHA in using print media and educating them on how to use Computer and Internet. On the same vein however 40 (11%) indicated printing the outcome of their meetings and seminars into print media, and provision of more HIV information resources in public libraries.

**Conclusion**

In view of the findings the following conclusions were drawn:

The PLWHA in Kano State share among themselves different types of information, which was broadly categorized into health and social information.

Various sources were used to get the information and these sources include the print and non-print media including the internet. The opportunities used to transmit the information included seminars, workshops, meetings, lectures, and interpersonal communication among others.

The major problem that related to the medium of communication among the respondent is low level of literacy, lack of internet and computer literacy. Suggestions were presented by respondents on how to address the problems and have effective information communication among the respondents.

### **Recommendations**

The following recommendations are hereby made based on the findings:

1. The PLWHA in Kano State should be encouraged to make a maximum utilization of pamphlets, AIDS newsletters, and the internet because these items contain vital information including recent and up to date knowledge on HIV/AIDS, and modalities for its treatment and control. They should be regarded as primary information source of information to PLWHA. The state government should provide the PLWHA with a special library housed with such items. The government should also improve their capacity on computer literacy.
2. The State government and other philanthropists should fund the HIV/AIDS support groups for them to carry out their stated missions and objectives more effectively. There are a number of PLWHA support groups that need further support to improve the situation of their members.
3. The community in the area under study should try as much as possible to stop stigmatizing and discriminating people infected with HIV, bearing in mind that stigmatization force them to hide their identity which hinders controlling the spread of the disease.

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