

Perception of Librarians on COVID-19 Information and Sensitization: Challenges and Change Agenda

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Abstract:

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Perception of Librarians on COVID-19 Information and Sensitization: Challenges and Change Agenda

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ABSTRACT

Librarians across Africa have had to portray proactive measures in combating the spread of Corona Virus (COVID-19) pandemic. They were faced with the probability of how libraries would function amidst employees calling for closures while seeking for safety and looking for how to activate open access e-resources, minding workers' rights and copyright guidelines on these e-resources. Their perception on providing health information sensitization to their immediate community, the challenges and facing the change agenda was the focus of this paper. Respondents were drawn from different libraries for the survey which adopted qualitative research methodology through interviews. The data collected were thematically analyzed to answer the research questions. Findings indicated that librarians perceived the COVID-19 sensitization as a challenge that could be overwhelming, but achievable with support from stakeholders, the government and non-governmental agencies. Recommendations were that the new normal has brought changes to information processing and dissemination. Librarians and libraries should thrive in this new reality and remain more responsive. Furthermore, enhanced impact assessment should be carried out to find out how the measures of sensitization on the pandemic became effective.

Keywords: Librarians, Perception, Sensitization, COVID-19, Change Agenda

INTRODUCTION

The COVID-19 (Coronavirus) outbreak is having a global impact, and affecting both urban and local communities. Staff in libraries of all types, geographic locations, and sizes are learning the facts about this public health crisis, informing the public, and adapting services and programming to meet changing community needs. However, conceptualization and implementation of so many government programmes are usually carried out in urban and metropolitan cities without adequate consideration of implementing these programmes. This also affects libraries as well, for instance the analysis by Diso (2010) on Vision 20:2020 objectives, decried that little emphasis was made on information and knowledge and there was none on the libraries and related information and knowledge agencies. Therefore, this is related to the fact that libraries and librarians would adhere to the new normal protocols in indulging on e-services and representing professionalism in this era of the COVID-19 pandemic to remain relevant in the society. The benefits of library services

cannot be over-emphasized during this pandemic era, because it is the fulcrum on which researchers, lecturers, and academia intellectual activities are promoted worldwide.

Little wonder Igwe, Ugwuogu & Okechukwu (2019) posit that, it is absolutely not negotiable that information plays critical roles in the growth and development of societies where man operates. In the same vein, Nongo and Ode (2018) noted the synergy between government and librarians for sustainable enforcement of healthy advocacy and sensitization of preventive health care for all ages. They posit that the synergy will help to speed up action towards realization of the SDGs in a developing country like Nigeria. Sensitization connotes making people aware about an issue, or situation (Youth Do It, 2019).

Perception as stated by Orakpor (2009) is how situations, events and ideas are viewed from different angles by different persons. It is the various opinions of varied individuals on some issues. Therefore, this paper seeks to determine the librarians' perception on information sensitization amidst the COVID-19 pandemic, highlighting challenges and focusing on a change agenda. There are ample number of challenges the libraries and librarians would have to combat due to the impromptu emergence of the lockdown order by the federal government of Nigeria occasioned by the rapid effect of COVID-19 pandemic on its citizens. Obviously the "new normal" created a paradigm shift in library services whereby staff and users interface becomes impossible or no longer preferred and library collections in physical format becomes inaccessible.

Students' collaborative study is against the COVID-19 protocols and this is banished in favour of social distancing, and libraries admitting less students into the library building. Those are against the library mission and objectives and it is a challenge to the entire profession. How can we then leverage this crisis situation and create new and innovative collections and services to improve our campus communities? Based on these trend analysis, it is obvious that there is a major landslide in service delivery by academic libraries in terms of collections, services, spaces and operations.

METHODOLOGY

The study adopted a narrative qualitative research design. Since physical interviews could not be conducted, online interview approval was employed. Ethical approval was obtained from the College of Medicine, University of Ibadan, and hence participation in the study was consensual, voluntary and anonymous and posed no risk to the participants. The target population used for the study was 20 librarians across Africa who were contacted online during an International Conference in 2020. Convenience sampling technique was used to obtain a sample size for the study, where thirteen (13) respondents conveniently participated giving a 65% response rate. The online interview was carefully transcribed and thematically analyzed. All categories of responses extracted from the interviews were compared and merged to draw out and create a clear picture of the emerging themes on change agenda in handling COVID-19 sensitization of the community.

REVIEW OF RELATED LITERATURE

The 2019 novel coronavirus (COVID-19), which was first identified in China in December 2019, is a new strain of virus that has not been previously seen in humans. Available data suggests over

2,800 fatalities in 10 countries and 83,000 infections across 56 countries worldwide as at February 28, 2020 (Beetseh, Olise & Tor-Akwer, 2021). According to WHO (2020), the Coronavirus infection (COVID-19) is an emerging infectious illness which broke out during the winter of 2019 and was declared a public health emergency of international concern. COVID-19 is described as a public health emergency, a real-time experiment in downsizing the consumer economy and a socio-environmental disaster that may catalyze processes of social change (COHEN, 2020). Whether this is fact or fable, arguments abound on how the public health emergency has brought about changes in social behaviour.

In line with this, Ilori (2020) investigated the self-policing of COVID-19 and the civic responsibilities of citizens in Lagos using qualitative interview method. The findings indicated that there is adequate awareness of COVID-19 pandemic, and government directives are being followed in the State. With palliatives provided then, a little relief was experienced, but hunger crisis could result from the total lockdown. The theoretical framework was based on the Health Belief Model (HBM) which was used to explain the behavioural change of Nigerians concerning the corona virus. The Health Belief Model (HBM) is a tool that scientists use to try and predict health behaviour. It was originally developed in the 1950s and updated in the 1980s. The model is based on the theory that a person's willingness to change their health behaviour is primarily due to their health perceptions. According to this model, your individual beliefs about health and health conditions, play a role in determining your health-related behaviour.

Similarly, Blake and Ngo (2020) opined that responsive and community-engaged actions are an urgent priority during pandemics. This creates a need for sustainability because both structural and social conditions may worsen as successive waves of outbreaks place new strain on health, economic, and social infrastructure. This is coupled with fatigue, with onerous restrictions growing. In the same vein, Global Health Security Agenda (GHSA) was the focus of the critical analysis by Ventura, Marques di Giulio and Rached (2020), who argued that efficient and ethically acceptable Global Health Security is achievable only if sustainability is incorporated into the programme. It is of particular concern when it is considered that “complex socio-environmental issues, and transformative change across technological, economic and social factors, promoting social and environmental responsibilities across all sectors” are involved.

Mushi and Mushi (2021) described the social and behavioural strategies that were used in Tanzania, to limit the spread of the COVID-19 virus to other regions. Behavioural change strategies used included: launching health promotion campaigns focusing on education and training to raise awareness of COVID-19 transmission and prevention and giving information on the benefits of preventive behaviour; using digital communication tools to encourage preventive behaviour and promote new social norms via daily reminders on what to do and not do; restriction strategy being implemented to influence the process of behavioural change by establishing social rules during the pandemic. Other strategies were, environmental control strategy which entailed controlling environments that could facilitate the transmission of the disease; and, a modelling strategy with government officials, religious leaders and celebrities serving as role models of preventive behaviour in health promotion campaigns. The mobilisation of financial and human resources, governmental support, community awareness and willingness to change were found to be the key to the success of behavioural change interventions in Tanzania. Indeed, the looming threat of COVID-19 infection and the unfortunate emergence of variants of the initial virus that

emerged in Africa is such that Africa needs to be supported and to act fast (Nkengasong & Mankoula, 2020). This is contentious now because countries in Africa seems to be faring better in the aftermath of the pandemic than the rest of the world.

However, librarians in different parts of the world have developed different perceptions about the pandemic with regard to their profession. There is a sense in which we say that some library and information professionals in developing countries like Nigeria may likely have questionable perception about COVID-19 pandemic while others develop positive perception (Idhalama, 2020). The librarians that developed positive perceptions on the pandemic therefore developed new skills and means of information services delivery. Brown (2020) stated that libraries in the USA had closed their physical buildings and opened their digital doors. Moreover, the American Library Association (ALA) cancelled their annual conference for the first time in 75 years, in the year 2020. Perrine (2020) reported that the usage of online databases has increased by 75% due to the closure of libraries. Moreover, about 3000 books were issued from Middletown Township Public Library (MTPL), New Jersey in a day, before its closure that was considered 'highly unusual'. This means that, despite the closure of most libraries, the librarians have developed new ways and means of serving their patrons.

In the meantime, dissemination of information on COVID-19 by librarians is on the front burner. Chukwuyere, Nwanneka, Cukwuddebelu, and Chidiebere (2020) carried out extensive literature review and discussed the means of disseminating information on COVID-19, narrowing down to some social media platforms which is most effective for such. These means of disseminating information were identified by them, as mobile apps, artificial intelligence based chat-bots, video-based lectures, social media trolling and electronic resources. Some problems were also identified in the study. They were: poor awareness of librarians to use of social media platforms, poor infrastructure and low bandwidth, others were fake news, conspiracy theories, and poverty (lack of funds to subscribe to social media). Religious beliefs, non-compliance with government directives and high rate of illiteracy were also problems identified.

African Library & Information Associations & Institutions (2019) posited that this is a wakeup call for librarians as they need to re-educate themselves on the virus, preventative measures and also pass on the information in as many spaces as possible. This is especially necessary on online platforms since physical gathering is currently prohibited. Kennedy (2020) affirmed that as new knowledge about COVID-19 emerges and as the number of reported cases spreads, the Association of Research Libraries (ARL) are partnering with scholars and senior administrators in federal agencies, cities, and higher education to ensure that their expertise and the information they provide is available for consumption by the public to keep them informed.

During the lockdown many libraries in the United States of American, Britain, Canada, India and Pakistan managed to provide virtual support to their users, such as provision of references, document delivery, literature searches and systematic reviews (Ali and Gatiti, 2020; Hu, Lou, Xu, Meng, Xie, Zhang, Zou, Liu, Sun and Wang, 2020). Some libraries initiated online webinars and sessions to keep in touch with their users via Google Classroom, Google Hangouts, Skype, or Zoom.

Virtual awareness service is one of the library services offered to develop new thinking and information about COVID-19. Effective virtual awareness services to the general public especially library users on the danger of COVID-19 through electronic resources, computer, database, electronic books, electronic journals, electronic dictionaries, electronic encyclopedias and other digital resources would assist in the spread of the virus. This has therefore necessitated the role of librarians as crucial agents for disseminating information especially in this era of information explosion and misinformation in the wake of the COVID-19 pandemic.

Librarian's roles have shifted from being protector and guardians of collections to agents involved in community development and provision of access to information (ATI). Featherstone, Lyon, and Ruffin (2008) identified roles of librarians in periods of disasters as institutional supporters, collection managers, information disseminators, internal planners, community supporters, government partners, educators/trainers, and information community builders. Emasealu and Umeozor (2015) urge librarians to be more proactive by playing a dominant role in providing solutions to community problems and needs; educate the populace in order to reinforce change behaviour; adapt to changing conditions and appropriately address concerns and fears of the community in times of tragedies of this kind.

In response to the above assertion on proactivity of library professionals, librarians especially those in Nsukka local government areas in Enugu State, Nigeria, in this period of COVID-19 pandemic assume various roles among which are: creating awareness to rural communities through social media, public speeches, organizing sensitization programme and mounting posters in strategic positions. They also provide useful information to medical and public health practitioners and as well provide ongoing traditional library services to regular patrons via various media platforms. These services according to Malizia, Hamilton, Littrell, Vargas, and Olney (2012) are of great importance to community members because it makes them play active part of the response, take responsibility of relaying the various prevention messages, especially in the context of disinformation; communicate with people to explain the issues concerning the measures to prevent the spread of the disease.

Supportively, Smith and Freedman (2020) aver that adequate information is essential to prevent transmission. They explain that blocking the transmission route is the most important means to control the spread of COVID-19. Actually, during the sensitization programmes, emphasis was made on various ways to control the spread of the virus such as the use of face masks cum shield, avoidance of handshakes, avoiding close contact with other people, maintaining social distancing, regular handwashing with soap or detergent, and the use of hand sanitizers. In similar manner, Belser, Maines, Tumpey and Katz (2010) had given the notion that hands may become contaminated, ensuing transfer of virus to the oral or nasal mucosa of a new host hence the need for sanitizing. Equally, Sim, Money and Tan (2014) advice that wearing an oral nasal mask is one of the main protective measures as it prevents healthy individuals from inhaling the infection through the respiratory tract.

Delivery of information to library patrons through electronic means generally creates less contact between user and information provider, and keeps infection somewhat at bay. According to Ekere, Omekwu and Nwoha (2016), online reference resources also assist reference librarians to answer reference enquiries and deliver information through the World Wide Web; WIFI; search

engines; digital video disc (DVD) and VSAT based Internet connectivity. COVID-19 has brought a new order which assists librarian to provide services that will ensure better access to information, resource sharing, improved productivity, up-to-date information services, efficient and affective delivery of service of preventive mechanism of effective information about COVID-19 to users. Sensitization on pandemic and how to avoid, prevent or treat the infection therefore could be more easily done, using these channels.

In the last few months of the year 2021, new variants of the corona virus emerged. Tagged the Delta variant, then the Omicron variant, so named by the World Health Organization, the variant has been listed as a variant of concern. Bollinger, Ray, and Maragakis (2022) assert that cases of the highly contagious variant, including a subvariant called BA.2, or “stealth omicron,” have caused surges of COVID-19, particularly in areas where safety precautions have been relaxed. The coronavirus vaccine seems to be the best protection against the virus according to Ratini (2022) and since the virus causes COVID-19 will probably keep changing, experts may find more new variants. Ratini concludes that “It is impossible to predict how those virus changes might affect what happens. But change is just what viruses do.” Researchers have discovered that the way around the new virus is to take different precautions than hitherto. Viruses change, therefore people have to change their social behaviour to maintain a fighting front to the virus and stay informed, sensitizing the community in the process.

FINDINGS AND DISCUSSION

The data gathered was thematically analyzed in line with the questions asked to bring out clearly the logicity of the discourse with literature. Twenty (20) heads of libraries were purposively targeted to be interviewed. Of this number, thirteen granted interview over the one week period when the data was collected. Others contacted could not meet the scheduled appointments for various reasons. Demographic details of the respondents are presented in Table 1 as follows: 9 (69%) were PhD holders and 4 (31%) had Masters Degrees.

Table 1. Demographic Information of the Respondents

Country	No.	%
Botswana	1	7.7
Ghana	1	7.7
Kenya	1	7.7
Nigeria	9	69.2
Uganda	1	7.7
Age Bracket		
36 - 40	1	7.7
41 - 45	2	15.4
46 - 50	2	15.4
51 - 55	6	46.2
56 - 60	1	7.7
61 and above	1	7.7
Institutions		
Polytechnic Library	1	7.7
University Library	5	38.4

Public Library	4	30.8
School Library	1	7.7
Government Library	1	7.7
College Library	1	7.7
Qualification		
PhD	9	69.2
Masters	4	30.8
Years of Work Experience		
10 – 15 years	3	23.1
16 – 20 years	3	23.1
21 – 25 years	2	15.4
26 – 30 years	2	15.4
Above 30 years	3	23.1
Total	13	100

Their years of work experience ranged from 13 years to 58 years. Average work experience years was 23 years. Respondents came from 5 African counties, with more being from Nigeria. The average time it took for each interview was 8 minutes.

Individual effort of sensitization

When questioned on what they had done individually to sensitize their community about the COVID-19 pandemic, majority had reached out to the members of staff in their institutions. They sensitized people to the pandemic at management meetings, talking to their staff and sending messages to them through social media platforms such as Whatsapp messages. This medium was most commonly used. In addition, for about half of the libraries, poster and notice board information was a sensitization method used. This is in tandem with Brown (2020) who stated that libraries in the USA had closed their physical buildings and opened their digital doors.

Provision of hand washing facilities and sensitization talks on the proper way to wash hands was a sensitization measure adopted. In a few cases, hand sanitizers were provided for staff and users to drive home the point, before the resort to lockdown. Some had also reached out to the wider community in which they lived trying to give orientation on what the pandemic was about, and how they could avoid getting infected. This corroborates the study of Chukwuyere, Nwanneka, Cukwuddebelu, and Chidiebere (2020) and Mushi and Mushi (2021) on the different means used to disseminate information on COVID-19, narrowing down to some social media platforms which are most effective for such.

Table 2: Individual Sensitization of community about the pandemic

S/N	Individual Sensitization of Community	Frequency	%
1	Provision and distribution of E-book on COVID-19	2	15.4
2	Community orientation about COVID-19	5	38.4
3	COVID-19 Awareness to the staff and community	7	51
4	Provision of COVID-19 prevention equipment for library staff and community	1	7.7
5	Distribution of posters, fliers and banners to sensitize community	2	15.4

6	Sharing of information about COVID-19 on social media	3	23.1
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Respondents were allowed to tick more than one option.

A few (23.1%) reached out to sensitize people on social media and only 1 (7.7%) actually provided COVID-19 prevention equipment for library staff and community just as advised by Sim, Money and Tan (2014) on the best practice of wearing protective gear to prevent contracting the virus. A few (15.4%) made effort to provide and distribute e-books on COVID-19 pandemic to the community. This activity of sensitizing the community about the pandemic is a behavioural pattern or tendency that occurs in pandemic situations as corroborated by the study of Smith and Freedman (2020) which indicated that adequate information is essential to prevent transmission of the deadly virus.

Institution effort of sensitization

Basically, all the methods that are recommended by the health authorities such as the NCDC and the WHO were adopted by all the institutions (Table 3). The data gathered on the activity of the respondents as head of institutions to use the institution to sensitize the community about the pandemic indicated that provision of annual leave to the institution's staff pending the ease of lockdown, and reschedule of library services and reduction of hours of operation was what mostly was used for this sensitization (61.5%). In addition, some of them made information specifically about the virus, and how to get rid of it available to their staff and users on electronic media.

Table 3: Institutional Sensitization of community about the pandemic

S/N	Library Contributions	Frequency	%
1	Provision of relevant e-resources by the Library to the users and community	7	54
2	Provision of annual leave to the Library's staff pending the ease of lockdown	8	61.5
3	Provision of sanitizers and running water for good hand hygiene	5	38.4
4	Reschedule of library services and reduction of hour of operation	8	61.5
5	Reduction number of users coming into the library	1	7.7
6	Maintaining social distances among library staff and users	2	15.4
7	Develop of disaster planning strategies on public health	2	15.4
8	Formulate questions and answers about COVID-19 pandemic	3	23.1
9	Library embarks on sharing information via social media	3	23.1

Respondents were allowed to tick more than one option.

As lockdown came into force, a number of the libraries or institutions provided access to e-books and open electronic resources that hitherto had not been provided. Once staff had to stay away, the community knew that the pandemic was a serious issue. Provision of relevant e-resources by the library to the users and community to sensitize them was also a popular option for the institutions. This corroborates Ekere, Omekwu and Nwoha (2016), who indicated that information and reference services are delivered using online means like the World Wide Web and others. Provision of sanitizers and running water for good hand hygiene was another contribution

to sensitization efforts, though reduction of the number of users coming into the library (institution) was carried out by 7.7% of the institutions.

Table 3 shows further that the library sharing information via social media and formulating questions and answers about COVID-19 pandemic as a means of sensitizing the community was carried out by a few institutions (23.1%). Emasealu and Umeozor (2015) urge librarians to be more proactive by playing a dominant role in providing solutions to community problems and needs; educate the populace. Apparently, a few of the institutions also developed disaster planning strategies, and maintained social distance among library staff and users as a method of carrying out the sensitization on the pandemic.

Impact Assessment of COVID-19 sensitization efforts

On whether impact assessment had been done on the sensitization methods adopted, the respondents all answered in the negative. As at the time the interviews were conducted, none of the librarians in the African counties selected for the study had assessed the impact (Table 4). Only 2 (15.4%) of the respondents said a little about assessment. The lockdown method to help in arresting the spread of the pandemic was noted by them to be effective. In one case, there were no additional cases reported in the totally locked-down State, while in the other, the “stay at home” order had the effect of making librarians more relaxed, less panicked and ready to share more informal information that was less COVID-19 related.

The sensitization of the community on the COVID-19 pandemic is to let them know what the virus is, how to prevent themselves from contracting, and how to ensure that adequate measures are taken to eradicate it. As a result, it would be necessary to evaluate the impact of the pandemic. About 80% of the respondents revealed that they had not yet done any impact evaluation of the pandemic.

Table 4: Evaluation of the impact of COVID-19

S/N	Impact Evaluation of COVID-19 in the Community	Frequency	%
1.	Survey not yet carried out	10	76.9
2.	Observed that Personal Protective Equipment (PPE) is being used, and people in the community are running out of money because of lockdown	1	7.7
3.	In the process of doing the survey	2	15.4
Total		13	100

This is contradictory to Ilori (2020) who investigated the self-policing of COVID-19. The rate of change in the behaviour of people in the community was assessed. In this study, it was revealed that impact evaluation had not been carried out. Only in one institution had it been observed that there was change, in terms of Personal Protective Equipment being used. Only 15.4% were planning to carry out impact evaluation of the COVID-19 pandemic.

Suggested measures to fight the COVID-19 Pandemic

Respondents proffered solutions to the COVID-19 pandemic (Table 5). The highest frequency of suggestion was, to sensitize the public on health planning strategy. Proper awareness to the community in their native language, maintaining social distancing or staying at home, and following the rules and regulations of Nigeria Centre for Disease Control (NCDC) about COVID-19 were also suggested.

Table 5: Measures to fight the COVID-19 Pandemic

S/N	Measures to fight COVID-19	Frequency	%
1	Follow the rules and regulation of Nigeria Centre for Disease Control (NCDC) about COVID-19	7	54
2	Government should commend those that enforce the covid-19 rules and media houses	3	23.1
3	Maintain social distancing / stay at home	7	54
4	Sensitize the public on health planning strategy	8	61.5
5	Librarian and Researchers should investigate the causes and control	2	15.4
6	Proper awareness to the community in their native language	7	54
7	Distribute fliers	2	15.4
8	Encourage visiting hospital for regular checkup and test	2	15.4
9	Supplication and prayers to God	1	7.7
10	Provision of adequate equipment to the health workers	1	7.7
11	Provision of palliative to the community	1	7.7
12	Proper fumigation of society	1	7.7

Respondents were allowed to tick more than one option.

A few suggestions of the measures to arrest the pandemic are constant sensitization of the non-pharmaceutical protocols and checking the compliance level as well as the practices carried out in the communities that libraries are serving. Another measure is the need to have well equipped medical facilities in a close radius to communities, to serve as first aid to infected persons.

Future Suggestions to Curb Pandemics or Prepare for them

Suggestions for curbing future pandemics were called for and majority (69.2%) of the respondents felt that equipping hospitals and encouraging health workers would be the way forward. There should be yearly health-inclined strategic plans to unfold measures to curb further pandemics in the global environment. These plans should be the change factor which is desired to curb pandemics. Therefore, planning in the present prevents future occurrence of the menace.

Table 6: Suggestions for curbing future pandemics or prepare against COVID-19

S/N	Impact of COVID-19 in the Community	Frequency	%
1	Educating the masses on health issue	5	38.4
2	Equipping the hospitals and encouraging the health workers	9	69.2
3	Sensitize community to keep proper hygiene	2	15.4
4	Government should keep proper record and data of the citizens	1	7.7

5	Librarians and researchers should stick to the formulated policies on disaster planning strategies to save lives and property	4	30.8
6	Training and retraining of health workers	2	15.4

Respondents were allowed to tick more than one option.

Educating the masses on health issues, and getting librarians and researchers to stick to formulated policies on disaster planning strategies would also curb future pandemics of prepare against it (Table 6). Only 7.7% of the respondents suggested that government keeping proper records and data of the citizens would help in curbing or preparing against pandemics in future. Generally, there is a call for improvement in health facilities, health research capacity, and collaboration in pandemic research. In addition, collaboration between government agencies, and serious need for education of the populace on hygiene is perceived by librarians, to be essential. Respondents also noted that there is a need for transparency of researchers in disseminating or disclosing results of their research. Health based researchers are required to start telling the truth in good time, to prevent escalation to pandemic proportions, of what they find going wrong.

IMPLICATIONS

- i. The perceptions of librarians and libraries showed that there were many misgivings on sensitization to the pandemic. People also tended not to want to take the vaccine which is believed to be the best protection against the virus. Lockdown prevented social and economic flow of activities, and too much room was given for conspiracy theories, fake news, disinformation, and misinformation arising to low acceptance rate of the sensitization effort by information professionals and government.
- ii. There are implications for the change in information service delivery in libraries. Libraries have to embrace digital integration in all ramifications if their patrons are to be served adequately during periods of disaster, such as pandemics. This is in tandem with librarians' perspective or rationale for developing technologically-inclined library information services in areas like e-research, digital scholarships and so on. This implies the need to structure libraries as digital scholarly hubs which would serve users strategically if and when pandemics arise.
- iii. The sensitization programmes imply the need to involve expatriates if necessary, for continued training and maintenance of library emerging technologies. This is to avoid dire consequence of increasing infections in the pandemic era, and the consequent lockdowns that may result.

CONCLUSION

It can be concluded that librarians across Africa perceived COVID-19 sensitization as a challenge that could be overwhelming, but achievable with support from stakeholders and relevant agencies. The librarians have also played a great role in the provision and dissemination of COVID-19 information and sensitization. Further research could be conducted on Perception of librarians on non-acceptance of COVID-19 vaccines, and, the Impact of COVID-19 pandemic on librarians' entrepreneurial and technological skills.

RECOMMENDATIONS

The recommendations for this study are presented herewith:

1. Impact assessment should be carried out to find out how well the measures of sensitization on the pandemic are effective.
2. The new normal has brought changes to information processing and dissemination, and as such, government should enhance researches on health issues to further provide access to and give instant reports on any threats or pandemics.
3. Recognition of librarians as timely information service providers as well as advocacy teams in the pandemic era is commendable. Their dauntless and target-oriented sensitization efforts in achieving effective and efficient health information dissemination should be sustained. Therefore, librarians and libraries should thrive in this new normal, and remain more responsive.
4. Libraries and librarians should be encouraged to imbibe new normal use of technologies to disseminate information services in the libraries because they act as change agent to achievable sustainable goals in society.

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APPENDIX

ANSWERS TO QUESTION 1 - What have you done personally to sensitize the community about the pandemic?

IR1 – This is an academic environment so what has been done for staff sensitization is done through WhatsApp groups and the office notice board.

An e-book on COVID-19 was printed and posted on the board.

Students were educated on what to do; hand hygiene, social distancing and other advice as dictated by the World Health Organization (WHO) and the Nigeria Centre for Disease Control (NCDC).

IR2 – In my immediate academic community it was a subject of discussion at the morning devotion and those who work with me in the library to comply with the regulations as specified by WHO and the government to reduce the spread of the COVID-19.

Also to sensitize them to the fact that the pandemic is real.

IR3 – Sensitization programme has been carried out in the following ways: The pandemic was discussed at the Management meeting; the library management mandated Head of Department Research and Development of the University library to make ready, available and accessible, all relevant and reliable information to the University community; information on the pandemic was published immediately on social media and made accessible to 70% of the community.

IR4 - Provision made to educate members of the community on safety measures such as hand-washing using soap and running water, use of sanitizers to disinfect hands and other health tips. Provision of sanitizers, nose masks, wash hand basins, disinfectants etc. for library users and staff. Measures of standard procedures for library users, visitors, library staff and their family members were discussed on social media platforms and the library website.

IR5 – First thing before lockdown, posters were made on what corona virus is about. Put the posters at strategic places in the library right from the gate, sensitized staff, taught the library users to wash their hands, somebody talking to them on the importance of washing their hands. For the lockdown now, we sent messages to the staff, called attention to the posters put up, to sites where people can access information of COVID-19. I also have been talking to people one on one.

IR6 – Before lockdown at least, to those in my larger community, we have what we call Assembly Man in the local government – sending him information, telling him the do's and don'ts and asking him to spread the information amongst his people.

IR7 – Sharing information on the virus and where they can access information online especially now the library is closed.

IR8 – Well, personally I would say that and assured that I kept myself, my family members, and my immediate neighborhood on the information about COVID-19. Also used my membership in

community group as we have a small community group that is before the lockdown we passed information to members of the group. I passed credible information on the pandemic.

IR9 - The moment pandemic started our schools were closed on semester break, the school's management extended the break. Even in the state, both primary and secondary schools were locked, but we made some research from internet and lifted information from the library, informing the school community about the pandemic disease and what to do as prevention.

IR10 - People were to use sanitizer or wash their hands regularly, keep social distancing from each other and of the great measures to prevent the corona virus. We sent some fliers and lifted to neighboring communities. That is what we did at our end from the library.

IR11 - Before the total lockdown, we started using Facebook by giving information regularly on how to take care of people gradually and we started restriction by distribution of relevant information to users on how to take care of them gradually when started restriction distributing on COVID-19 and other relevant information to users how to take care of themselves Eventually this is what we did.

IR12 - As a person, I belong to a lot of Whatsapp groups and I have since realized that I am more like a "man ahead", so it appears that I am displaying a lot of characteristics in a lot of groups, so taking care of everybody. At the start of the epidemic, people were not taking it seriously.

IR13 - I am a member of Senate and as such got a lot of information from professors, researchers and a lot of stakeholders. I had an upper eye view and therefore wanted to push people to action but they were not taking it seriously.

ANSWERS TO QUESTION 2 - As head of library (or institution) what have you done via your library's contribution to sensitize the community about the pandemic?

IR1 - Same as for Q1

IR2 - Every member of staff was asked to proceed on annual leave pending when government will recall and remove lockdown. Some bottles of sanitizers were provided in all washrooms in the campus and there is running water for people to practice good hand hygiene.

IR3 - Via the library, the University library provided adequate relevant and relative information to the university community on the history of COVID-19, the virus, the shape, form, hazard and preventive and cautionary methods. Library services were rescheduled, hours of operation reduced, and number of users coming into the library also social distancing was maintained in the library and other rules of hygiene. Offering of resources was given by direct contact to users in a structured and authoritative manner. E-resources services are provided via KOHA library management systems for people within certain radius to the library. Also, disaster planning strategies on public health crisis were developed. There is planning towards emergence of digitized libraries.

IR4 - The library has intervened by coming up with a drama skit on the need to stay at home. A member of staff is working on a video that is encouraging people to stay home. And you know people from different tribes are in Kenya. The idea is to get the video in different languages. There are 46 local languages. The staff has identified one person from each community to translate to their mother tongue.

IR5 - As the Executive Director of [XYZ] (name withheld for anonymity), I got my colleagues to put out the information about the same do's and don'ts that could fight the pandemic. Also to make available, resources that can be used for free. That is what we did. To compile resources that were free from publishers. We quickly put that out and also questions and answers on the topic COVID-19 and also gave examples of what we expect librarians to do.

IR6 – The information on where access to information on COVID-19 can be found, was shared through Whatsapp and emails since the library has now been closed. Staff of the Institution also get the information.

IR7 - As the HOD [Head of Department] I can have a lot of plays, particularly among the students population, the staff and the members of the university community particularly taking precautionary measures, such as observing social distancing, issues of personal hygiene through providing fliers and posters and what have you. And even the staff, I ensured that they maintained some level of hygiene, they provide sanitizer in front of the library. Everybody who entered the library must wash their hand.

IR8 - Unfortunately there was lockdown in my school, students were at home. I can't physically run out the plan. So personally we made sure that we passed credible information through the social media using my membership to pass information to personal groups and professional groups and any other means available. We passed credible information especially to Whatsapp groups and other social media from NCDC [Nigeria Centre for Disease Control] & WHO [World Health Organization] and sensitized the people.

IR9 - The library used the binding department that got fliers already done and lifted it to inform the public about the situation, and to state that this closure is done by government. People are to stay at home. Only the 2 principal officers are to come to office (myself and a financial officer) and they were duly informed.

IR10 - The information is on the Facebook virtually. We used to sensitize on how to emulate and how to prevent yourself, and how it (the virus) manifests when somebody is affected, they are more of prevention and cautionary measures.

IR11- In fact, in my library, what we've been doing is we put posters to inform people about the pandemic and first we started amongst ourselves, trying to get an understanding of what it is. And we kept sharing information between ourselves and I would tell you, we were very confused; we did not know. A lot of what we said initially has proved to be very nonsensical now. The posters we were given by the University and the government were put all over the library and even out beyond the library. Hand sanitizers were also provided, but that was not enough and lockdown and social distancing happened.

IR12 - The information is put on Facebook and other social media. We usually sensitize on how to emulate good hygiene practices and how to prevent getting infected.

ANSWERS TO QUESTION 3 - Have you carried out any evaluation of the impact of COVID-19 on your community?

IR1 – No impact assessment. In Benue State, there is just 1 (one) case so no report yet.

IR2 – Assessment not carried out, but my observation is that the PPE [Personal protective equipment] and supplies in the State are already running out, and people under lockdown are running out of money.

IR3 - No. Not yet any such in Osun State for now.

IR4 – Impact assessment not yet done.

IR5 – Not yet done assessment.

IR6 – No impact assessment done. It is too early to get the impact.

IR7 - No [Laughter] we haven't actually we why no, because students are on lockdown we don't have the opportunity yet.

IR8 - Actually we have not done that because all the library staffs are to come to office but as far as I'm concerned no case of corona virus in Jigawa State, so no evaluation taken.

IR9 - Answer: Virtually No. I think Why NO? [He put a laugh!!!] It's something that has not been quite long and you have to allow something to take a while before taking evaluation and virtually in Nigeria it is not up to 3 months.

IR11 – No, we haven't conducted a survey but librarians at JKL (not real name for anonymity), the village I work in, have our own informal group that we meet regularly and lately we talk a lot. Messages were making the community panic initially and it was emotionally draining. There was religious talk a lot in all the messages. People were talking “God, God, God!” back then, but now they realize it is a reality so the community is starting to bond and relax. Now people are at home, the messages are changing to those of sending games, coping strategies and exercise routines, etc.

IR12 – We are trying to see how we can do the assessment.

IR13 - It is in plan to evaluate the pandemic situation.

ANSWERS TO QUESTION 4 - What would you suggest as measures to fight the COVID-19 Pandemic?

IR1 – The advice is just as done by NCDC [Nigeria Centre for Disease Control]. Citizens should follow instructions and do what is required.

IR2 – On measures taken, there are many happenings. People are no longer obeying stay at home orders. People should try as much as possible to endure the rules. Even so-called giants of the world the 1st world countries, one sees the pandemic is real. There is localized index. Government has succeeded in locking the State down. The community has shielded others and this has yielded effort. Those cases coming up in Lagos are of those who had been hiding before. Government should be commended for fishing them out.

IR3 – The disaster looks periodic by my findings, so the measures to use are social distancing, and appropriate education of the populace on public health planning strategies. Librarians should strive to dig very deep into history to know the causes of these periodic plagues.

IR4 – Continue talking to people in the language they understand. The government should be encouraged in this direction. There are two official languages (English and Swahili) but there are many more local languages - the old people or those who did not go to school use them – in use. One thing I look forward to is the translation of the government information to the local languages, making fliers and sharing among the communities. The information will tell them what the corona virus is all about, and to tell them to stay at home, because there will be a lot of misinformation, e.g. the vaccination news. They should know to go to the hospital. The solution is - let's continue talking in languages the people can understand better.

Let's think about the less fortunate – feed them. Media houses are doing a good job, let's commend them and continue to use the social media. Use the Radio and TV. There is the advantage that all local governments have a local radio station. So this medium can be used to communicate with the people. Also commend the government for sending SMS, the Ministry of Health partnered with mobile service providers and they have reached out to the masses, to the researchers to get everybody. I also as a Christian, believe in the power of prayers. We need to continue praying.

IR5 – I think where we are at, we need more education, to let people know that COVID-19 is real. They should follow the protocols. Another thing is to fight stigmatization because in my community now, there is lots of stigmatization, so people don't want to voluntarily go out and be tested. Even if they have symptoms, they don't want to go. So, there should be education to let

people know it is not a matter of life and death, and if someone has been healed, it does not mean the person should be stigmatized.

IR6 - Know the rules, wash hands, use face masks and do social distancing. What I'm also expecting is that human beings can be very stubborn so if we can also show a film of a real person who has been seriously attacked and is having difficulty, to show them because that will also scare people. African people who in spite of education still don't believe that it is real, that it can kill people. If you show them serious COVID-19 cases, it may scare them and make them stay at home and obey the protocols.

IR7 – To sensitize the communities, that Personal Protection kits should be used when handling those suspected of having contracted the virus. Translation of information to local languages. The Presidential address is in English, not even translated correctly. People are not taking it serious. They think it is a disease for Kampala City (i.e. for the elite). Serious sensitization to correct their views is necessary. There is no internet so need to have fliers to leave with the people. Collaboration among researchers is necessary for research into cure, communication with the people, and alleviation of hunger while the lockdown lasts.

IR8– Measures. Personally I will advise, suggest that we comply quickly on the government directives and health officials and we should be very sure we avoid social interaction, maintain social distancing, cut out travelling, practice isolation especially people who have history of travelling, reporting such to health authorities and this will be assured way of keeping the pandemic.

IR9 - The measure I am advising people to always listen to NCDC because they are the official organs that hold or keep information on corona virus in Nigeria. They always keep information on corona virus they have a lot of communication. People can only get accurate information there are reliable media that provide information on NCDC. So much enlightenment from government that will help you to keep safe from COVID-19.

IR10 - The measures/suggestions is [sic] information on how to break the chain of disease that is the measure or way of curtaining the virus. We used to hear from the medical experts the ways to break the chain of the disease.

IR 11- We need fumigation of the facilities as much as one can. The library will need special treatment because of the nature of the resources. And also I think efficient community education is needed. A lot of people don't understand what is happening so they just go out, and don't realize they have to obey stay at home orders. One hazard is that as part of the education, we need to strengthen strategies that are used for social distancing. Improving strategies to make social distancing effective is essential. My mother for instance, talking to her, I find that they are more scared of the police trying to enforce lockdown than the COVID-19.

IR13 - Suggestion is to provide information on how to curtail the disease, how to prevent the transmission of the disease. That is the major thing to cut the channel between one person and the other. That one is, to stay at home and if going out by putting masks, and doing regular washing of hands. That is my recommendation.

ANSWERS TO QUESTION 5 - Looking to the future, what would you suggest be done to curb future pandemics or prepare against it?

IR1- There should be health education for all the masses. The government should try to equip our hospitals and also community should be taught how to live in a clean environment and maintain hygiene to avoid the occurrence of pandemics.

IR 2 – In this part of the world, we are never prepared. Our health facilities and health institutions, attention should be pushed to them to pay more attention. This pandemic really exposed our weaknesses and I hope those at the helm of affairs will learn some lessons. Usually we pay lip service to development of our health infrastructure. COVID-19 is a leveler – there is nowhere to run to. Let us improve on our health facilities as a nation. The government at all levels should be up to their responsibilities. Look at China, they were prepared, not for COVID-19 per se but for all health disasters. Nigeria should do the same. In addition, Nigeria should have data and databanks. This situation has exposed the country. For example, palliatives were to be provided but there wasn't sufficient data to guide the distribution. People clustered together struggling to get the relief package because there is no data bank. As information professionals we should be the ones championing the cause of creating a National databank to guide government projects and projections.

IR3 – Public health management should be taken seriously considering the social, psychological and economic effects on the society. Librarians must stick to the formulated policies on disaster planning strategies to save lives and property.

IR4 – Equip our Centre for Disease Control (CDC) adequately. There is need for modern equipment, beds, water supply and others. Members need to do more research to get to go hand in hand with CDC to get a better understanding of the COVID-19. It is informative that there was a film – The Contagion. It was done in 2011. For those that watched the movie, we should have done more research. We should not take things for granted.

IR5 – Yes, pandemics come especially those we don't have cure for. We should look at our healthcare facilities, improve them so that when such things come up we can be able to contain it. Secondly, the medical people should have enough tools and equipment to work with not when you are now running all over from pillar to post looking for Personal Protective Equipment (PPE). There must be something there already. Another thing is, immediately we should start educating people, not wait until there are cases in our country, before we start.

IR6 – I think communication should be improved. WHO [The World Health Organization] should have communicated to the world early enough so that it could be contained in China. Then the issue of transparency. The United States of America is complaining. If a country gets such a pandemic, they should be transparent enough to come out and speak in good time. The government should provide enough health facilities. Be prepared for putting up enough health systems that can contain a pandemic.

Trained personnel. In Uganda, the District Health Officer works in another city from the main district he heads. When doing recruitment, it is better to leave personnel in Districts where they are born. This makes commitment to the health facilities better. Collaboration. Between different health sectors there should be collaboration. The Disease Control (CDC) working together with researchers, can find solutions.

IR7 - I think this is a global pandemic or global emergency. The solution should be global especially between superpowers who are well to do, have infrastructure and they are working on serious researches. We need more collaboration between the scientists in the developed countries, any scientist that works out the issues of disease surveillance and they are working. On serious scientists, they exchange ideas, exchange data, they collaborate on drugs, vaccines against such epidemic and unto us developing countries; we should not fold our arms. We must improve. At the moment we are not ready "is her opinion".

IR8 - The government should prepare for the worst. The government must have very care facilities, it must provide many facilities that will help the medical personnel to assist people against this

pandemic, but this kind of pandemic never happened even the develop countries support besides their facilities, medical facilities they are suffering, the government should prepare the worst should invites medicals facilities, all measures like on government and try to narrow down towards the better future and this can solve the problems for better future of its citizens.

IR9 - It's the same thing, people aren't ready for war, education research as you know librarians are the major stakeholder on research. My suggestion is to turn our meeting Africa to Africa and African to Africans so as to device our own means of defending ourselves. Conducting research and presentation of the research findings. Is that all, Executive Secretary (just laugh!!!).

IR11 – I recommend that there be transparency. Any community or nation that gets the first impact or exposure should alert the others. A lot of information sharing and that of other communities can help curb future pandemics.

IR13 - We should have ready our healthcare system. Government should invest more to be able to handle the pandemic. Finally issue of awareness; now people have seen what is happening people need to be sensitized and they should do sure that the disease started as anything but now escalated and become a global emergency. I think early detection should have taken aspects.

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