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### Information Dissemination and Collaboration of Librarians with Health Practitioners for Sustainable Mental Health Literacy among Youths in Rural Areas of North-Central, Nigeria

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#### Abstract

The study was on Information Dissemination and Collaboration of Librarians with Health Practitioners for Sustainable Mental Health Literacy among Youths in Rural Areas of North-central, Nigeria. The study was guided by two objectives and two corresponding research questions which are to determine the influence of information dissemination on the mental health literacy of the youths in the rural areas of North-central, Nigeria; find out the influence of social media on the mental health literacy of the youths in the rural areas of North-central, Nigeria. A survey research design method was adopted for the study. The total population of the youths under study was one hundred and eight thousand, seven hundred and thirty-seven (108,737). The sample size of the youth population was three hundred and eighty-three (383) drawn from Gill et al. (2010) sample size table for determining the sample size of a population. A purposive method of sampling was employed to sample six (6) participants from the public libraries and public health centres under study. The questionnaire was used as an instrument for data collection. Out of three hundred and eighty-three (383) copies of the questionnaire administered, six hundred and eighty-three (683) copies were filled, returned and used for the analysis. Descriptive statistical tools involving frequency counts and percentages mean and standard deviation as well as narrative analysis were used to analyse the data. The findings of the study indicated that mental health literacy among the rural youths of North-central Nigeria is very low and that there is a significant relationship between information dissemination, collaboration between librarians and mental health practitioners and mental health literacy. The study recommended among others that the ministries of information and ministries of health in the North-central states should form a consortium that facilitates and oversees collaboration between public librarians and mental health practitioners for a sustainable boost to the mental health literacy of the rural

Keywords: Information Dissemination, Health Practitioner, Mental Health Literacy, Youth

### 1.1 Introduction

Great efforts have been made to manage physical health diseases such as polio, measles, meningitis, chicken pox, malaria, HIV/AIDS, Ebola, monkeypox and very recently, Coronavirus, whereas awareness level and education of the public on mental health diseases seems to be quite low in comparison to physical diseases. This is of particular concern because mental health

literacy (MHL) promotes early help-seeking for mental ill-health issues which has been shown to in turn, promote early intervention and results in improved long-term outcomes (Clarke et al., 2016). Definitions of mental health literacy vary but essentially involve the access, communication, comprehension and evaluation of information about mental health which leads to the improvement, maintenance and promotion of mental health. As put by the National Network of Libraries of Medicines (2017), health literacy is the ability to access and use health information while mental health literacy is the knowledge and beliefs about mental disorders which aid its recognition, management or prevention.

Originally mental health literacy (MHL) was conceptualized as knowledge and beliefs about mental disorders which aid their recognition, management or prevention before Jorm (2017) later refined the definition to include knowledge that benefits the mental health of a person or others including knowledge of how to prevent a mental disorder; recognition of disorders when developing; knowledge of effective self-help strategies for mild-to-moderate problems; and first aid skills to help others.

The high prevalence rate of mental health disorders is an important concern for public health professionals because of the many consequences for youths and their families, as well as the socioeconomic burden on national economies. One report suggested that about half of serious mental illness cases in developed countries, and about four-fifths of cases in less developed countries, were either not recognized or received no treatment in the year before the survey (Demyttenaere et al, 2014). It is not surprising then, to learn that a good deal of scholarly activity has sought to understand the reasons for poor help-seeking rates about mental health symptoms among the youths.

Youths, according to Noel (2014) are generally regarded as those members of the

society who are young. Youth is the time of life when one is young and often means the time between childhood and adulthood (maturity). Youth can also be regarded as the appearance, freshness, vigour, spirit, etc., characteristic of one who is young.

The main role of the primary health centre is to provide continuous and comprehensive care to the patients within the locality it is situated. It also helps in making the patient available with the various social welfare and public health services initiated by the concerned governing bodies and other organizations. The other 5 major roles of a primary health care centre are to offer quality physical and mental health and social services to the underprivileged sections of society and to be authorized reference officials for cases beyond their control and management.

In Nigeria today, attitude towards mental illness is gravely coloured with prejudice and misconceptions. It is believed that an estimated 20% - 30% of the population suffer from mental illnesses, regrettably, the level of awareness on mental health issues amongst the Nigerian youths is considerably dismal (Salau, 2018). WHO (2018) posited that globally, it is estimated that 10-20% of adolescents experience mental health conditions and that half of all mental health conditions start by 14 years of age, but most cases are undetected and untreated. Depression in adolescents is a major risk factor for suicide, the second-to-third leading cause of death among people who fall within the (15-29) age bracket. Edney (2014) in a literature review on Mass Media and Mental Illness, recorded that mental illnesses are characterized by fear, uncertainty and assumptions but almost all mental disorders have one common factor which is the unknown and the best solution to this is more information which could be accessed from public libraries.

Information is an important tool used in the realization of any objective or goal set by the individual. It remains the life wire of any

individual or organization. Mental health information dissemination is therefore considered very crucial to achieving mental health literacy because the feeling of coherence is developed through various learning processes. Information on Social Media for example if well harnessed, can be useful in the fight against mental health illiteracy, it's one of the information dissemination tools used by librarians. Viral social marketing (reaching out to many more people, more quickly and with minimal costs, compared to other forms of marketing/ advertising) is among the strongest aspects of social media and can play an important role in mental health literacy, promotion and outreach programmes (Gosselin and Poitras, 2018).

Nigeria is currently witnessing an increased rate of suicidal attempts and actions, with many members of the public still not able to recognize specific disorders or different types of psychological distress, not to mention how to manage the situation when confronted with it. This therefore calls for a need to study ways through which librarians, being information professionals can step in to enhance mental health literacy which is a known barrier to mental health sustenance. This will greatly enhance the ability to gain access to, understand and use information in ways that promote and maintain good mental health.

### 1.2 Statement of the Research Problem

Over the past few decades, much attention has been given to health literacy by health organizations, health practitioners, health policymakers and health information professionals. The World Health Organization (2018) also endorsed mental health as a universal human right and a fundamental goal for healthcare systems of all countries. The WHO conceptualizes optimal actions for improved service provision as establishing national policies, programs, and legislation on

mental health, providing services for mental disorders in primary care, ensuring accessibility to essential psychotropic medication, developing human resources, promoting public education and involving other sectors and promoting and supporting relevant research (WHO, 2016).

However, despite the rising research on the mental health literacy of adults, there is yet to be a parallel interest in how to ensure a sustainable mental health literacy of youths in rural areas of Nigeria. Some of the policies on mental health and development in Nigeria such as the Mental Health Policy formulated in 1991, National Adolescent Health Policy (NAHP), and National Youth Policy (NYP) do not earnestly address the issues of mental health literacy among adolescents and young persons. Several researches conducted in Nigeria have recorded mental health literacy to be very low as the individuals with mental and behavioural disorders are predominantly from middle and low-income countries, and more specifically, youths in the rural areas of those countries where mental health literacy has remained a neglected matter (Salau, 2018). It has also been revealed by several literature that awareness is one major contributing factor to the mental health illiteracy of youths in rural areas and has accounted for the reason why victims of mental health illnesses are still heavily stigmatized.

This study, therefore, seeks to assess information dissemination and collaboration of librarians with health practitioners for sustainable mental health literacy among youths in rural areas of North-central, Nigeria.

### 1.3 Objectives of the Study

- 1. Determine the influence of information dissemination on mental health literacy of the youths in the rural areas of Northcentral, Nigeria.
- 2. Find out the influence of social media on the mental health literacy of the youths in the rural areas of North-central, Nigeria.

### 1.4 Research Questions

- 1. What is the influence of information dissemination on mental health literacy of the youths in the rural areas of Northcentral, Nigeria?
- 2. What is the influence of social media on the mental health literacy of the youths in the rural areas of North-central, Nigeria?

#### 2.1 Literature Review

## 2.2 The Concept of Mental Health and Mental Health Literacy

Health literacy refers to how well individuals can understand basic health information to make informed choices about their health care (Suleiman, 2017). Having low literacy may hurt health and health care given the complexity of health care systems in the United States (US) (Alonso et al. 2017). Most existing studies are conducted in Australia and other Western countries. Yet, increasing numbers of studies are noted in non-western countries including Asia, the Middle East, African, and South American countries (Furnham and Swami, 2018). Current literature reports that people in Western countries tend to have mental health notions that are like mental health practitioners' perspectives, compared to people in non-western countries (Furnham and Igboaka, 2017).

Depression and schizophrenia are the most studied disorders in research. Efforts to understand the various types of mental disorders have expanded to other types of mental disorders, including anxiety disorders, children's mental disorders, Post Traumatic Stress Disorders (PTSD), perinatal depression, and personality disorders (Yeung et al, 2017).

### 2.3 Mental Health Literacy in Rural Areas

According to an exploratory study

conducted by Wickstead and Furnham (2017), mental health and mental disorders were identified as the fourth highest-ranking rural health concern among the 28 functional areas identified. In this study, 37 percent of the state and local rural health leaders in their responses, selected mental health and mental disorder as one of their top rural health priorities, after access, oral health, and diabetes. There was substantial agreement on the rural priority status of mental health relative to all other functional areas. Although mental health ranked in 12th place among the most often identified priorities by local public health officials, it ranked among the top five most frequently selected priorities among state health leaders and leaders of rural community health centres clinics and rural hospitals.

Mental disorders are widespread in urban and rural areas alike and affect approximately 20 per cent of the population each year. An estimated 20 per cent of children and adolescents age 9 to 17 and as many as 25 per cent of those 65 years and older suffer from mental illness each year. Approximately onehalf of the population experience a mental disorder over a lifetime. Compared to other chronic diseases, mental disorders strike earlier, often in the period extending from the teens to the mid-twenties. Of those who experience a mental disorder, only a minority report treatment in the preceding year. The prevalence of lifetime and recent mental disorders appear to be similar in rural and urban areas. However, rural residents with mental illness may be less likely than their urban counterparts to define.

## 2.4 The Role of Librarians in Advancing Health Literacy

Libraries not only provide access to high-quality health and wellness information but also help people build the health literacy skills they need to navigate such information. In addition, they enable access to this information by offering Internet access, digital

literacy training, and other sustained forms of support. Like basic or digital literacy relative to overall information access and use, health literacy is fundamental to full participation in managing personal and family health and wellness. As noted by the National Network of Libraries of Medicine (NNLM), health literacy is complex and includes aspects of traditional literacy measures, numeracy skills, and cultural competency (Theresa, 2016).

Libraries offer guidance to community members with diverse needs related to learning about health and healthcare, nutrition, access to government and an array of healthcare support programs and services. They also provide and enhance access to health sciences for professionals seeking research regarding medical developments and clinical trials.

### 2.5 Librarians and Mental Health Practitioners – The Need for Collaboration

common definition of health literacy is the degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions (Office of Disease Prevention and Health Promotion, 2016). While the availability and accuracy of health information are important, so are the accessibility and readability of that information. The efficient delivery of primary healthcare relies heavily on high-quality patient education, which not only improves the overall health of the population (Joint Commission on Accreditation of Healthcare Organizations, 2017).

In 2017, the Public Library Association (PLA) initiated a partnership with the National Network of Libraries of Medicine (NNLM) to increase public library staff knowledge and skills related to consumer health information, health reference, health literacy, and health programming (Salau, 2018). This national

work is exposing thousands of public librarians to educational programs such as Stand Up for Health and the opportunity to become a designated health information specialist. This work connects to the increased public library focus in the National Library of Medicine's 2017-2027 strategic plan, A Platform for Biomedical Discovery and Data-Powered Health, which emphasizes expanding partnerships with public libraries and community groups to improve awareness of NLM's resources, increasing the capacity of public library staff to improve health literacy, and providing new tools to public librarians on data management and interpretation of data-driven discovery to help public libraries support the scientific research community and citizen science.

### 2.6 Social Media Influence on Mental Health Literacy

Social media (SM) platforms have been defined as Internet-based applications that stimulate user-generated content and engage users and groups within an online social network (Halsall, Garinger, Dixon and Forneris, 2019). In the past, the predominant means of contact with a medical institution or health facility was face-to-face, reading from a book, magazine, or newspaper or through electronic media such as a report on the radio or footage in film. Today, by means of new information and communication technology, we can learn a lot about health matters, health professionals, and health institutions.

The onset of mental health problems peaks between adolescence and young adulthood; however young people face barriers to treatment and are often reluctant to seek professional help. Many are instead seeking support and information regarding their mental health via the web, especially via social networking sites (SNS), and hence, there is a promising opportunity to use social networking sites (SNS) to deliver or integrate with youth-focused online mental health

interventions (Ridout and Campbell, 2018).

### 2.7 Information Dissemination and Its Influence on Mental Health Literacy

The World Health Organization (WHO) and other health international organizations according to Reavley et al. (2012) have done so much to checkmate the global spread and burden of both physical and mental health diseases. Huge investments (human and financial) have gone into research, treatment, awareness campaigns and education of the public to prevent, reduce, manage and eventually eliminate some of the diseases, awareness level and education of the public on mental health diseases seem to be quite low in comparison to physical diseases (Wickstead & Furnham, 2017).

In the last few years, the rapid and very exciting developments in information technology have revolutionized how information is collected, displayed and accessed. The synergy between information and communications technology is allowing access to information in ways hardly imaginable when the last Guidelines were published in 1986 (McCaffrey, 2016). Health information dissemination via self-help tools (e.g. books, the Internet and mobile devices such as smartphones and tablets can help prevent depression (WHO, 2016). Yakushi, Kuba, Nakamoto, Fukushara, Koda, Tanaka and Kondo (2017) stated that a lack of understanding about diseases often results in depressive disorder. This implies that a lack of knowledge and understanding about depression symptoms and how they manifest is one strong reason many people become depressed.

### 2.8 The Library, Librarians and Relationship with Mental Health Literacy

The Ministry of Health in New Zealand championed a National Mental Health Information Strategy in 2015 in recognition of the importance of information

to the delivery of quality mental health services to consumers. The priority focus of this strategy was to evolve a process that deploys information technology to collect relevant information purposely to enhance the improvement of the quality of services (Ministry of Health New Zealand, 2015). Vernon, Trujillo, Rosenbaum, and DeBuono (2017) pointed out that librarians should continue to draw the attention of healthcare providers to the importance of accurate, relevant and timely health information for making health decisions. This is because not all information available in the public space is safe for the consumers of information. According to the National Network of Libraries of Medicines (2017);

"Countless lives are lost due to insufficient access to quality health information. The availability of accurate, timely, and analysed data is directly relevant to the quality of an individual's health and the healthcare system in general, the delivery of individual care, and the understanding and management of overall health systems."

In addition, NLM has an excellent emergency and disaster management and response system (National Network of Libraries of Medicines, 2017).

#### 3.1 Research Method

The research design adopted for this study is a descriptive survey research design. The population size for this study was 108,737. The population for this study were librarians in public libraries, mental health practitioners in public health centres and youths in rural areas proposed for the study in North-central Zone, Nigeria. The population of the librarians in the public libraries was 63, the population of health practitioners was 6 and the population of the youths in the rural areas was estimated to be 108,674 thus, resulting in a total population of 108,737 for the study. Table 1.0 simplifies the population breakdown:

Table 1.0: Population of the Study

S/N	State	Villages	Rural youths	Public Library	Librarians	Public Health Centres	Health Practitioners
1.	Nasarawa	Panda	23,880	8	8	Centres	1
2.	Kogi	Iyamoye	16,504	6	6		1
3.	Niger	Garatu	12,674	7	7		1
4.	Plateau	Miango	11,003	11	11		1
5.	Kwara	Ogidi	31,090	17	17		1
6.	Benue	Adoka	13,517	14	14		1
Total			108.668	63	63		6

**Source:** Google search for Nigeria population census record (2006 & 2012)

### 3.2 Sample and Sampling Techniques

The simple random sampling technique and purposive sampling technique were used to select the sample size for the study. Gill et al. (2010) indicated that for a desired accuracy in sapling technique in a study, a population size of 100,000 gives a sample size of 383, and for a population size of 250,000, a sample size of 384 is adequate. This therefore validates 383 as an adequate sample size for the youth population size of 108,668. For desired accuracy, the simple random sampling technique was used to select a sample size of 383, which was selected from a target population size of 108,668 rural youths, at a confidence level of 95% and a margin error of 0.5. The purposive sampling technique was further used to select from

among the rural youths who are illiterate. The purposive sampling method was also used to select the chief librarians and unit heads of the public library and primary health centres respectively as they are in the best position and equipped to provide the necessary data sought from respective sectors by this study. The population size of the librarians in the public library was 63, while the population size of the primary health practitioners was 48 inclusive of one (1) chief librarian and one (1) unit head respectively which have purposefully been selected as the sample sizes respectively. This therefore puts the sample size of the public librarians at 6 and the sample size of the public health practitioners at 6 too. Consequently, the total population size for this study was 395.

Table 1.1: Sample Size of the Study

S/N	Name of Villages	Rural Youths	Librarians (Public Library)	Public Health Practitioners
1.	Panda – Nasarawa State	85	1	1
2.	Iyamoye – Kogi State	58	1	1
3.	Garatu – Niger State	44	1	1
4.	Miango – Plateau State	39	1	1
5.	Ogidi – Kwara State	109	1	1
6.	Adoka – Benue State	48	1	1
	Total	383	6	6

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The simple random sampling technique was used to draw sample size for the rural youth population as it allows for the sampling error to be calculated reduces selection bias and gives each member of the population an equal chance, or probability of being selected while the purposive sampling method was afterwards, used to select from amongst the randomly sampled participants. To draw a sample size for the librarians and public health practitioners for the study, the purposive sampling technique will be used as it is the most suitable approach towards focusing on the particular characteristics of interest based on the purpose of the study.

### 3.3 Instruments for Data Collection

The data collection instrument used for this study was a questionnaire. The questionnaire was used to collect data from rural youths and librarians as it enabled respondents to express their opinions for the study.

### 3.4 Method of Data Analysis

For the adequate analysis of the data

collected, the researcher made use of descriptive statistical tools which comprise frequency distribution, mean and percentages.

### 4.1 Results and Discussion

### 4.2 Response Rate

A total number of seventy-two (72) rural youths participated in the focus group discussion across the six rural areas that were studied and a total number of three hundred and eighty-three (383) copies of the questionnaire were administered to the youths in rural areas in the six (6) states that makes up North-central Nigeria. Six (6) copies of the questionnaire were also administered to librarians in the study area and six (6) public health practitioners were interviewed. Of the three hundred and eighty-three (383) copies of the questionnaire administered to the youths, three hundred and fifty-two (352) copies of the questionnaire were filled, returned and found usable for the analysis representing a 92% response rate. One librarian each in the six (6) rural areas filled out the questionnaire and all were found useful for the analysis representing a 100% response rate.

Research Question 1: What is the influence of information dissemination on mental health literacy of the youths in the rural areas of North-central, Nigeria?

**Table 1.2:** 

		SD	D	A	SA	N	FX	X	SDT	Decision
S/N	Statement	1	2	3	4					
1	Information dissemination has helped me quit smoking	100	110	83	59	352	806	2.29	1.05	Disagreed
2	Information dissemination has helped me stop stigmatizing people with disorders.	65	86	123	78	352	918	2.61	1.03	Agreed
3	Information dissemination has equipped me with appropriate help-seeking knowledge.	108	106	80	58	352	792	2.25	1.07	Disagreed
4	Information dissemination has helped me recognize possible mental disorder symptoms.	130	113	67	42	352	725	2.06	1.02	Disagreed
5	Information dissemination has improved my overall knowledge of the importance of mental stability.	74	77	107	94	352	925	2.63	1.09	Agreed

6 Information dissemination has 86 89 102 75 352 869 2.47 1.08 Disagreed helped me with the right approaches towards helping mental health patients.

Overall Mean 2.38 1.05

Key: SD = Strongly Disagreed, D = Disagreed, A = Agreed, SA= Strongly Agreed

Research Question 2: What is the influence of social media on the mental health literacy of the youths in the rural areas of North-central, Nigeria?

Table 1.3

Item	Scale	Frequency	Percent (%)
Which of the following	Facebook	193	54.8
social media do you use?	Facebook & WhatsApp	53	15.1
	Facebook, WhatsApp & Instagram	20	5.7
	Facebook, Whatsapp, Instagram & Twitter	17	4.8
	Facebook, Whatsapp, Instagram, Twitter & TikTok	15	4.3
	None	48	13.6
	Others	6	1.7
	Total	352	100.0

## Research Question One: What is the influence of information dissemination on the mental health literacy of the youths in the rural areas of North-central, Nigeria?

The findings from research question one showed that the respondents with an overall mean value of 2.38 disagreed that information dissemination influences their mental health literacy. They disagreed on whether information dissemination had assisted them in quitting smoking, acquiring appropriate help-seeking knowledge, or recognising possible mental health disorder symptoms. This could be due to the absence of information dissemination on mental health by the public librarians. However, they agreed that information dissemination has helped them to stop stigmatizing people with disorders, improve their overall knowledge of the importance of mental stability, and help them with the right approaches towards helping mental health patients. This could be a result of the general advice against those vices by non-information professionals – as opined

by a respondent during the focus group discussion.

# Research Question Two: What is the influence of social media on the mental health literacy of the youths in the rural areas of North-central, Nigeria?

The findings from research question two showed that the respondents with an overall mean value of 2.40 disagreed that social media has a significant influence on their mental health literacy. This could be a result of social media not being harnessed by librarians to disseminate information on mental health literacy to the youths of Northcentral, Nigeria. They disagreed that social media has helped them recognise possible mental disorder symptoms, equipped them with appropriate help-seeking knowledge or helped them quit smoking.

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#### **Conclusion**

The conclusion, based on the findings of the study is that mental health literacy is abysmally low among youths in rural North-central Nigeria. It was also revealed that the role of public librarians, in collaboration with mental health practitioners for effective dissemination of mental health information is very crucial to the mental health literacy of the rural youths but unfortunately, non-existent and at best, seldom made available. The enormous possible impact of information dissemination, harnessing of social media and the collaboration of librarians with mental health practitioners was also reinforced by the result of the study.

#### **Recommendations**

- 1. There should be a follow-up procedure by librarians and mental health professionals to ascertain that a mental health knowledge gap was bridged after every outreach or any information service directed at creating mental health awareness in rural areas.
- 2. The public libraries in North-central Nigeria should ensure to dissemination of information on mental health via social media platforms. It could be an online group that is created to cater for information, guides and steps on how to recognize and identify mental disorder symptoms and where to seek adequate intervention.

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