

**INFORMATION NEEDS, SEEKING AND RESOURCES PROVISION FOR EARLY
DETECTION OF OVARIAN CANCER AMONG FEMALE IN AWKA SOUTH,
ANAMBRA STATE**

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ABSTRACT: *The paper addressed the issues of Information needs, Seeking and Resources Provision for Early Detection of Ovarian Cancer among Female in Awka South, Anambra State. The objective of this paper is to know the information needs of female, sources of seeking the information and problems faced by them in area of ovarian cancer. Descriptive survey research design was used for this study. Survey research design was used because it allowed the application of a questionnaire in the collection of data. The total population of the study was 496. It consisted of female from the selected Awka South LGA within Anambra State. Since the entire population was manageable, there was no need for sampling; therefore, an enumerative census of all the 496 females were used. The researcher used a questionnaire. Out of 496 copies of questionnaires distributed, 464 copies were correctly filled, and used for the analysis. Findings showed that female academics strongly need different information as it relates to early detection of ovarian cancer. The responses revealed that both older and younger female academics agreed that they need health information about their personal risk for ovarian cancer. These includes, information about causes of ovarian cancer, physical symptoms of cancer, health habits that might lower the risk for ovarian cancer, information about group to attend for support and relevant information, information about managing fear of occurrence, physical nature of ovarian cancer, how ovarian cancer acts in the body and sexual implication of ovarian cancer. It was found out here that married and unmarried female academics did not consult the same source of information as regards the early detection of ovarian cancer. Findings on the problems showed that female academics agreed to encounter similar problems in getting satisfied with desired information needs.*

KEYWORDS: information, needs, seeking, early detection, ovarian cancer, female

INTRODUCTION

Information is conceived as important resource that contributes immensely towards the development of a nation especially in this era of information explosion. It provides the main stay for the development of knowledge, the foundation for innovations, the resources for informed citizenry and as a result becomes a key commodity for the progress of any society. (Prabha, 2013) Information is published in a range of formats and it is important to select and use those appropriate to your need. Information is essential to all human beings and it has become the most important elements for progress in society (Abdulrahman, 2015). Information is no doubt, a channel of change and development and as a result, no organization or individual can experience change and

development if information is lacking, neither can there be any meaningful progress, if little emphasis is placed on the use of quantitative and qualitative information.

Okello-obura (2010) states that information needs are of various types, apart from express needs or articulated needs, there are unexpressed needs which the clients are aware of but does not like to express. Furthermore, Wilson (2000) opined that information needs are influenced by the variety factors such as the range of information sources available; the use to which the information will be put; the background, motivation professional orientation and individual characteristic of the user. Other factors are the socio-political, economic, legal, and regulation system surrounding the user as well as the consequence use. These variables may affect a person's interest in the type of information he needs, seeks and how he goes about obtaining that information, which leads to information seeking while the manner exhibited in the seeking process is the seeking behavior. Information seeking behavior is viewed as the attitude and characteristic which individual exhibit in the process of searching for, accessing and using information that will satisfy their identified information needs. (Kolawale & Igwe, 2016); they further added that it is a conscious effort to acquire information, as well the purposive seeking for information as a result of the consequence of need and with the objective of satisfying the needs.

Information seeking is undertaken a message that satisfy a perceived need (Wright and Guy, 1997) cited Ogbomo (2010). This activity may be actively done when taking steps to satisfy a felt need. Everyday each of us is forced to solve many different vital problems connected with working, training, education, etc. for decision making in every concrete situation, it is necessary to have complete and recent information about these things. "Information seeking is a human process that requires adaptive and reflective control over the afferent and efferent actions of the information seeker. Information seeking behaviour (ISB) resulted from the recognition of some needs, perceived by the user, who as a consequence makes demand upon on formal system such as libraries and information centers, or some other person in order to satisfy the perceived information need. The information seeking behaviour essentially refers to locate discrete knowledge elements. It is concerned with the interactive utilization of the three basic resources namely, people, information and system. Further in order, to satisfy the information needs, the user actively undergoes the information seeking process. The attempt of the user in obtaining the needed information results from the recognition of some needs, perceived by the user" (Singh & Satija, 2006).

Case (2016) noted that information behavior is a field of which deals with information and people. The scholar explain that there must be subjective expression for a person to experience information needs and to engage in information seeking behavior. Cancer is a major life-threatening disease that can evoke deep-rooted fear of death and sense of loss of hope, such that the word "cancer" has powerful connotations of anxiety, pains and suffering (Al-Amri, 2009). Cancer is a disease of cells in the body. People with cancer can suffer a high incidence of psychological distress, which needs adjustment strategies (Sweeney, 2006).

The term cancer is used generically for more than 100 different diseases including malignant tumors, of different sites. These factors act together or in sequence to cause cancer (American Cancer Society, 2016). According to WHO (2002), cancer as a disease arises principally as a

consequence of exposure of individual to carcinogenic (cancer-causing) agents in what they inhale, eat and drink, and are exposed to in their work or environment.

The nature of the diseases shows that a large proportion of women diagnosed with ovarian cancer, often have a relatively short illness trajectory and this may be due to the fact that 70 to 80 percent of women with ovarian cancer have diseases recurrence following their first-line treatment (Sweeney, 2017). Now more than ever, cancer patient wants health information (Shea- Budgell, Kostaras, Myhill & Hagen, 2014). Patients with various types of cancer have most common information needs priorities and these priorities include information that relates to prognosis, diseases, and treatments (Tariman, Dorenbos, Schepp, Singhal & Berry, 2014). Ankem (2006) pointed out that a diagnosis of cancer is a stressful life and that, the nature of the diseases requires patients to learn about the illness, and make difficult decisions regarding treatment, and cope with the consequences of the illness.

Throughout the world, there is a growing interest in people taking more responsibilities and involvement in their own health and having an involvement that will enable them to understand that they can maintain a healthy lifestyle. Patients with various types of cancer have information needs priorities which include information that relates to prognosis, diseases and treatment (Tariman, Doorenbos, Schepp, Singhal & Berry, 2014). Ovarian cancer is known as abnormal growth of cells in the ovaries, which is the reproductive organs that produce the ova, egg cells in women. There are numerous types of ovarian tumors and overall, they fall into benign, borderline, malignant. About 80% are benign which occur mostly in young women between the ages of 20 and 45, borderline tumors occur at older women, malignant tumors are more common in older women between 45 and 65years. Ovarian cancer amounts to 3% of the cancers in females and is the fifth most common cause of death due to cancer in women. According to Iyoke (2011) Management of Ovarian cancer requires a multi- disciplinary approach involving the gynecological oncology surgeon, general surgeon, medical oncologist, oncology nurse, clinical psychologist, hospice care givers and pathologist.

Statement of the Problem:

The importance of health information to medical doctors or females' academics cannot be over emphasized. Females' academics need health information for early detection of ovarian cancer, academic work, research work, decision making, information dissemination and administrative purposes among others. Most significant among these information needs is that associated with clinical work. Clinical medicine has to do with direct patient treatment and care. It involves diagnosis, treatment, delivery of care and other formal and informal tasks such as counseling or rendering professional advice to patients (Nwafor-Orizu & Onwudinjo 2015).

Despite the established importance of health information in medical practice, it had been observed that females' academicians in the region under study do not seem to make frequent or optimal use of health information resources for current knowledge as expected. Why? This seems to result in obvious preventable medical errors (a mistake of commission) and malpractices that harm the patients as often witnessed in the teaching hospitals. Examples abound in these teaching hospitals of doctors' - poor attitude to patient care; ineffective diagnosis and treatment; unethical procedures; use of outdated drugs and procedures; inefficient handling of cases; nonchalant attitude to patients'

pains and sufferings; exploitation of patients; abandonment of duty posts and general abuse of the Hippocratic oath. Yet better healthcare delivery in the region can only be achieved through proven and clinically effective practices, arising from unhindered use of health information resources by the doctors. Apart from this, the literature is silent on the barriers faced by females in Awka South, Anambra State, in accessing health information. It therefore became very needful to spot these barriers and proffer solutions because ideally females' academics should have express access to health information at the point of need.

It is in the light of the above that this study seeks to identify the health information needs of females' academics, the information sources, information agencies/institutions that females' academics access information resources, the problems the females' academics in accessing information related to ovarian cancer and possible ways of enhancing the satisfaction of the information needs of females in Awka South, Anambra State.

Purpose of the Study

The specific objectives of the study are as follows:

1. Identify the health information needs of females in relation to early detection of ovarian cancer.
2. Find out the information sources consulted by females' academics in relation to early detection of ovarian cancer.
3. Find out the problems females encounter in accessing information related to ovarian cancer.

RESEARCH METHODOLOGY

Descriptive survey research design was used for this study. Survey research design was used because it allowed the application of a questionnaire in the collection of data. This made the data to be qualitative, easy to analyze and helped in appropriate deduction of inferences (Aina & Ajiferuke, 2002). The total population of the study was 496. It consisted of females from the selected Awka South LGA within Anambra State. Since the entire population was manageable, there was no need for sampling; therefore, an enumerative census of all the 496 females were used. The researcher developed and used a questionnaire titled "Information Needs, Seeking and Information Resources utilization for Early Detection of Ovarian Cancer among Female in Awka South Anambra (INSIRUEDOCF).

Out of 496 copies of questionnaires distributed, 464 copies were correctly filled, and used for the analysis. The copies of the questionnaire were personally administered with the help of research assistants. The questionnaires were distributed and collected by the researcher and research assistants by hand. The data for the study was analyzed using mean scores and standard deviation.

DISCUSSION AND FINDINGS

Research Question 1: What are the health information needs of females in Awka South, Anambra as it relates to early detection of ovarian cancer?

Table 1: Mean ratings of the females in Awka South, Anambra on their health information needs in early detection of ovarian cancer based on age.

S/N	ITEMS	Older N= 220			Younger N= 224		
		\bar{x}_0	SD ₀	Decision	\bar{x}_y	SD _y	Decision
	Health information needs of women in relation to ovarian cancer						
1.	Information about your personal risk of ovarian cancer	3.84	.37	Agreed	3.87	.33	Agreed
2.	Information about what causes ovarian cancer	3.65	.54	Agreed	3.56	.55	Agreed
3.	Physical symptoms of women with ovarian cancer	3.68	.53	Agreed	3.71	.45	Agreed
4.	Information about changes in health habits that might lower risk for ovarian cancer	3.77	.42	Agreed	3.66	.62	Agreed
5.	Information about group to attend for support and relevant information	3.39	.70	Agreed	3.33	.92	Agreed
6.	Information about managing fear of occurrence	3.42	.75	Agreed	3.45	.71	Agreed
7.	Physical nature of ovarian cancer	3.49	.66	Agreed	3.25	.83	Agreed
8.	How ovarian cancer acts in the body.	3.39	.74	Agreed	3.48	.61	Agreed
9.	Sexual implication of ovarian cancer	3.61	.48	Agreed	3.50	.65	Agreed
	Grand Mean	3.58	0.57	Agreed	3.53	0.63	Agreed

The data presented on table 1 above indicated that the respondents agreed to the responses/items in the table presented. The older women mean ranged from 3.39 to 3.84 while the younger women ranged from 3.25 to 3.87. The older and younger women have grand mean ratings of 3.58 and 3.53 as well as standard deviations of 0.57 and 0.63 respectively. This shows that, the respondents strongly agreed to the items on table 1 as to the health information needs of females in Awka South, Anambra

Research Question 2:

What are the information sources consulted by the females in Awka South, Anambra in connection with early detection of ovarian cancer?

Table 2:

Mean ratings of the married and unmarried females on the information sources consulted in respect to early detection of ovarian cancer.

S/N	ITEMS	Married N= 348		Unmarried N= 116			
	Interpersonal sources	\bar{x}_m	SD _m	Decision	\bar{x}_{um}	SD _{um}	Decision
1.	Family members	3.31	.82	Agreed	3.56	.77	Agreed
2.	Friends/co-workers	3.19	.78	Agreed	3.55	.66	Agreed
3.	Face to face support groups	2.46	1.04	Disagreed	2.91	1.28	Agreed
4.	Online support groups	2.18	.97	Disagreed	2.19	1.22	Disagreed
5.	Other cancer patient	2.56	.82	Agreed	2.96	1.06	Agreed
6.	Telephone hotlines	2.62	1.18	Agreed	3.06	1.21	Agreed
	Media Sources:						
7.	Television	3.28	.94	Agreed	3.61	.82	Agreed
8.	Radio	3.42	.78	Agreed	3.68	.64	Agreed
9.	Books, brochures, pamphlets	3.26	.83	Agreed	3.24	.92	Agreed
10.	Newspapers, magazines	3.49	.75	Agreed	3.60	.70	Agreed
11.	Internet sources	3.60	.68	Agreed	3.44	.78	Agreed
12.	Posters/handbills	3.26	.80	Agreed	2.94	.90	Agreed
13.	Personal doctor	3.39	.78	Agreed	3.56	.72	Agreed
14.	Other health professionals	3.19	.87	Agreed	3.77	.51	Agreed
15.	Medical books	2.77	.86	Agreed	2.87	1.19	Agreed
	Grand Mean	3.06	0.86	Agreed	3.26	0.88	Agreed

The data presented on table 2, revealed that the respondents did not all agree to the information sources consulted. The married females' academics mean ranged from 2.18 to 3.60 but disagreed with the unmarried females' academics on the consultation of face to face support groups for information, while the unmarried females' academics mean ranged from 2.19 to 3.77.

However, both the married and unmarried females' academics disagreed on the use of online support groups as a source of information to the early detection of ovarian cancer. The married and unmarried females' academics have grand mean ratings of 3.06 and 3.26 as well as corresponding standard deviations of 0.86 and 0.88 respectively.

Research Question 3:

What are the problems affecting the satisfaction of the information needs of females' academics?

Table 3: Mean ratings of older and younger females' academics on the problems affecting the satisfaction of the information needs of females' academics.

S/N	ITEMS	Older N= 220			Younger N= 224		
		\bar{x}_O	SD _O	Decision	\bar{x}_y	SD _y	Decision
1.	Problems affecting the satisfaction of the information needs of women Not finding specific health information needs.	3.71	.51	Agreed	3.76	.42	Agreed
2.	Conflicting reports of information sources	3.61	.48	Agreed	3.79	.40	Agreed
3.	Unfamiliarity with the organization of information sources in libraries	3.58	.55	Agreed	3.47	.60	Agreed
4.	Inadequate knowledge of the library system.	3.52	.56	Agreed	3.47	.60	Agreed
5.	Inadequate knowledge about medical sources.	3.58	.55	Agreed	3.56	.60	Agreed
6.	Language barriers affects the satisfaction level of women	3.45	.66	Agreed	3.26	.60	Agreed
7.	Inability to utilize computer systems	3.65	.59	Agreed	3.54	.64	Agreed
Grand Mean/SD		3.58	0.56	Agreed	3.55	0.55	Agreed

The data on table 4 above shows that the respondents agreed to all the items in the table presented. The older females' academics mean ranged from 3.45 to 3.71 while the younger females' academics mean range from 3.26 to 3.79. The older and younger females' academics have grand mean ratings of 3.58 and 3.55 as well as standard deviations of 0.56 and 0.55 respectively. Thus, the respondents agreed that the items on table 4 are the problems affecting satisfaction of the information needs of female Awka south, Anambra.

FINDINGS

It was found out that females' academics strongly need different information as it relates to early detection of ovarian cancer. The responses revealed that both older and younger females' academics agreed that they need health information about their personal risk for ovarian cancer. These includes, information about causes ovarian cancer, physical symptoms, cancer, health habits that might lower the risk for ovarian cancer, information about group to attend for support and relevant information, information about managing fear of occurrence, physical nature of ovarian cancer, how ovarian cancer acts in the body and sexual implication of ovarian cancer.

The finding of this study that women have similar information regarding health issues especially cancer is in agreement with Stewart (2000), who posited that women with cancer want more information about and participation in all aspects of their health care includes decision-making. He further explained that over eighty percent of these women wanted detailed information about

ovarian cancer during the diagnosis, treatment and post treatment stages of their disease. In particular, they wanted information pertaining to the disease, treatment and self-care issues.

It was found out here that married and unmarried females' academics did not consult the same source of information as regards the early detection of ovarian cancer. The responses revealed that both married and unmarried females' academics agreed that they consult information sources such as the family members, friends/co-workers, cancer patients, telephone hotlines, television, radio, books, brochures, pamphlets, newspapers, magazines, internet sources, posters/handbills, personal doctor, health professionals and medical books. Females' academics both married and unmarried disagreed to the fact that online support group is not part of the information sources consulted. However, the married females' academics also do not consult face to face support group while the unmarried group consult face to face support groups. The result of this findings relates with the findings of Ankem (2006), who posited that medical professionals provide information to patients while caring for them, in addition to conveying oral information during interactions health care professionals present their knowledge to consumers through pamphlets, web sites, medical books, articles in journals.

Findings on the problems showed that females' academics agreed to encounter similar problems in getting satisfied with desired information needs. The findings revealed that the problems encountered by the respondents in satisfying their health information needs include; not finding specific health information needed, conflicting reports of information sources, unfamiliarity with the organization of information sources in libraries, inadequate knowledge of library system, inadequate knowledge about medical sources, language barrier and lack of computer literacy.

CONCLUSION AND RECOMMENDATIONS

From the interpretation and discussion of findings of this study as they affect the research questions and hypotheses, the following conclusions were made. This study has shown that females' academics both older and younger need information to address their health needs as regards early detection of ovarian cancer.

Females' academics both married and unmarried at some point consult various information sources. In respect to early detection of ovarian cancer, this is to help them with the knowledge for effective management and ensure that they live a quality life. However, their inability to access specific health information, inadequate knowledge of the library system and organization of information sources as well as language barriers and inability to utilize the computer systems affects effective information services delivery on ovarian cancer. Based on the findings of the study, the following recommendations were made.

1. Government should encourage policies for provision of quality health information in Anambra State and beyond.
2. Libraries should make information resources on health-related matters readily available to patrons.
3. Health institutions and agencies should organize seminars, workshops to sensitize the females on the need for regular examination and proper care of the body which leads to early detection of cancer.

4. Social media at this age of information communication technology should be used to disseminate health information for a wider coverage.

References

- Abdulrahman, A. B. (2015). Strategies for meeting information needs of people with learning disabilities (Dyslexia) by public libraries in Nigeria. *Journal of Library and Information Sciences*, 3 (2), 107-113. <http://dx.doi.org/10.15640/jlis.v3n2a6>
- Al-Amri, A. M. (2009). Cancer patients' desire for information: a study in a technology hospital in Saudi-Arabia. *Eastern Mediterranean Health Journal*, 15(1), 19-24
- American Cancer Society (2014). Ovarian cancer: Available online at: <https://www.cancer.org/.../cancer.../cancer...cancer.../2014/cancer-facts-and-figures-201...>
- American Cancer Society (2016). Cancer facts and figures. Available online at: www.cancer.org
- Ankem, K (2006). Use of information sources by cancer patients: results of a systematic review of the research literature. Available www.informationr.net/ir/11-3/paper254.html.
- Cancer Support Community (2015). Ovarian Cancer. Available online at: www.cancersupportcommunity.org.
- Fact Sheet (2015). Ovarian Cancer. Available online at: www.ovacome.org.uk/.../Fact-sheet-2-ABOUT-OVARIAN-CANCER-draft-1-2016.pdf.
- Nwafor-Orizu, O.E and Onwudingo, O.T.U(2015). Barriers to optimal utilization of health information resources by doctors in Nigeria. *Developing Country Studies*, Vol5(18) 1-8
- Nwosu, O., Ogbomo, E. F. & Anaehobi, E. S. (2013). Health information availability and utilization by medical practitioners for chronic disease management in central hospitals, Warri-Delta State. *IOSR Journal of Pharmacy*, 3 (3), 18 -23.
- Ogbomo, E. F(2010) Undergraduate information seeking behaviour in an ICT based environment: the case of library and information science, Delta State University, Abraka. Nigeria. *Information Impact: Journal of Information and knowledge management. Vol 1(3) 72-80.*
- Onifade G. O. & Popoola S. O. (2015). Information needs, accessibility and utilization of library and information resources as facilitators of teaching effectiveness of lecturers in library and information science schools in Nigeria. *Middle Belt Journal of Library and Information Science*, 13: 32-53
- Ovarian Cancer Action (2013). Ovarian cancer: what you need to know. Available online at www.ovarian.org.uk
- Ovarian Cancer Action (2013). Ovarian cancer: what you need to know. Available online at www.ovarian.org.uk
- Oyelude, A. A. & Bamigbola, A. A. (2012). Women empowerment' / through access to information (ATI): The strategic roles of non-governmental organizations in Nigeria. <http://conference.ifla.org/ifla78>
- Prabha, K. (2013). Information seeking behavior of different types of users in selected libraries of Delhi. *International Research: Journal of Library & Information Science*, 3 (2), 308 - 322.
- Shea-Budgell, M. A., Kostaras, X., Myhill, K. P. & Hagen, N. A. (2014). Information needs and sources of information for patients during cancer follow-up. *Current Oncology*, 2165-173; doi: <http://dx.doi.org/10.3747/co.21.1932>.

- Smith-McLallen, A., Fishbein, M. & Hornik, R. C. (2011). Psychosocial determinants of cancer related information seeking among patients. *Journal of Health Communication*, 16:2, 212 - 225. Url: <http://dx.org/10.1080/10810730.2010.522227>
- Stewart, D.E. (2000). Information needs and decisional preferences among women with ovarian cancer. Retrieved from www.ncbi.nlm.nih.gov/m/pubmed/10831342/Hfft.
- Sweeney, E. (2006). Identifying the information needs of women with ovarian cancer. *Cancer Nursing Practice*, 5 (10), 37-39. Accessed online on April 11, 2017.
- Tariman, J. D., Doorenbos, A., Schepp, K. G., Singhal, S. & Berry, D. L. (2014). Information needs priorities in patients diagnosed of the cancer: a systematic review. *Journal of the Advanced Practitioners on Abdulrahman, A. B.* (2015). Strategies for meeting information needs of people with learning disabilities (Dyslexia) by public libraries in Nigeria. *Journal of Library and Information Sciences*, 3 (2), 107-113. <http://dx.doi.org/10.15640/jlis.v3n2a6>
- Siatri, R. (1999). Evolution of user studies. *Libri*, 49, 132-141.
- Singh K.P. & Satija M.P. (2006). A review of Research on Information Seeking Behaviour of Agricultural Scientists: International Perspectives. *DESIDOC Bulletin of Information Technology*, 26(2). P30.
- Uhegbu, A. N. (2007). *The information user: issues and themes*. 2nd ed. Okigwe: Whytem.
- World Health Organization (2002). *National cancer programmes: policies and managerial guidelines*. 2nd.ed. Geneva: World Health Organization 1 (4),