INFORMATION REPACKAGING FOR TRADITIONAL BONESETTERS IN NSUKKA LOCAL GOVERNMENT AREA OF ENUGU STATE

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ABSTRACT

Information repackaging simply means the presentation of information in a more understandable, acceptable and usable forms. In today’s world old ideas are repackaged and presented in a new format. In this regard, the traditional bone setting is not left out in this bold step to rejuvenate the already existing talent of bone setters in rural areas. The study will review some literature on information repackaging and how best to disseminate repackaged information, orthodox traditional bone setting will also be examined. Four research questions will be raised on information needs of the traditional bone setters in rural communities, the impact of repackaged information on traditional bone setters and the challenges of repackaging information to the traditional bone setters in the communities. A structured interview and questionnaire will be used to elicit information from the respondents. The population of this study will comprise of bone setters in Nsukka urban, Nsukka local government area and librarians in Nsukka. The data will be analysed using descriptive statistics. Findings of the study will be shown, followed by conclusion and recommendations.

Keyword: Information Repackaging, Bone Setting, Rural Area.

INTRODUCTION

Information plays an important role in every human activity. Therefore, information can be regarded as basic resource in which the entire populace may use to improve their conditions of living which is essential to development process. Aguolu (1998) defined information as embodying interrelated or structured data which are required to enable one to
act knowledgably as well as to appreciate decisions in any given setting. Information is a vehicle for development especially in the rural communities in Africa where it is needed for social change. This brings about higher quality of life through the introduction of new ideas and methods on modern production, health, educational and other practices.

Chester and Neelameghan (2006) rightly pointed out that rural communities in Africa constitutes the larger percentage of the population whose information and developmental needs are not adequately met and consequently they have not been able to productively participate in the development process and enjoy the benefits thereof. In the same vein, Mansoor and Kamba (2010) historically acknowledged that Rural communities in Africa have suffered from enjoying any meaningful development largely because of policy implementation gap artificially created by the African government and leaders. The consequent of this neglect resulted in rural communities lacking access to basic needs, such as water, food, education, health care, information and security leading to low life expectancy and high infant mortality. Therefore there is the need to create awareness through provision of information and at the same time repackage it to the rural dwellers in a way they will understand and make necessary contribution to the community and the society in general.

Traditional (or indigenous) knowledge is often insufficient to allow the rural communities to resolve their various and complex problems in their vicinity. They require externally generated information in various areas of human endeavour to rejuvenate their indigenous knowledge. Bone setting as an aspect of human endeavour is not left out in this quest to find the suitable and effective way of making available information they require to solve their ever-changing problems they encounter in their practice. These bonesetters belong to variety of language and cultural groups making it pertinent for the information to be available to those who might need it in form that is both intelligible and culturally acceptable to be useful. This qualifies it as appropriate information as it satisfies the information need and taste of the users. To achieve this, information repackaging is indispensable.

Darimani (2007) recognizes bone setting as the practice of joint manipulation of sprain, dislocations and simple to complex fractures, by manipulating the bones by applying splints to the area around the fracture or wound. The practitioners involved in this art are called the Traditional Bonesetters (TBS). They manipulate the fractures and with some herbs, minerals and sometimes incantations effect healing to the fractured bones. Agarwal and Agarwal (2010) quoting shang, GU and Dong defined traditional bonesetters (TBS) as lay practitioners of joint manipulation, unqualified who takes up the practice of healing without having had any formal training in acceptable medical procedure. They also pointed out that these bonesetters are unorthodox health practitioners who play an important role in providing primary medical support. Bonesetters are very important in primary health care delivery system in Nigeria where majority of the populace dwell in the rural areas. It has been found by Onununyan (2004) that these people mostly patronize traditional bonesetters (TBs) for their bone cases such as dislocation and fracture.

Most times the information available to the rural communities is not in forms and formats that can be easily utilized by the users. HINARI (2009) noted that information contained in scientific and technical journals/research reports is in languages which make them inappropriate for use by most people. Therefore, for the rural communities to get appropriate information, the taste of use by the teaming population of the developing countries, the information has to be put in a plain language thereby making written and oral information easier to understand. This is a veritable tool to improving health literacy. 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. No doubt, traditional health practitioners and their recipients need health literacy programmes for effective primary health care delivery.

Information repackaging is a strategy to increase utilization of information by various user groups in developing countries. Information repackaging is viewed by Stilwell (1999) as the selection of appropriate materials, reprocessing the information in a form that can be readily understood and arranging these materials in a way that is appropriate to the user. This is finding information and brings it into the form and format that is understandable and usable by target users. Process of repackaging include, knowledge of the potential users and selection of primary information sources and the evaluation of the information contents, analysis of the content, restructuring of the content (condensing, rewriting, translation etc) and dissemination of repackaged information. Therefore, representation of information in a form and format that satisfies the information needs and taste of the bonesetters in Nsukka Local Government Area of Enugu State is the crux of this study.

STATEMENT OF PROBLEM

Lack of adequate education language, form and format of information to rural communities left the primary fracture care delivery in jeopardy. Repackaging of information remains the answer to this knowledge gap among the traditional bone setters.

PURPOSE OF THE STUDY

The purpose of this research is as follows:

1. To find out the information needs of traditional bonesetters in Nsukka LGA of Enugu State.
2. To find out the various ways of repackaging information to satisfy these needs.
3. To find out the challenges faced by librarians in repackaging information.
4. To find out the impact of repackaging information on traditional bonesetters.

SIGNIFICANCE OF THE STUDY

The result of this study will be of importance to traditional bonesetters, individuals and government. It will identify the areas of health information needs of traditional bonesetters which will help health educators and the government to effect health literacy and delivering primary health care services to the rural communities. The result will also arouse the people to patronize the traditional bonesetters. The result equally will provide improved method of providing primary fracture care in Nigerian health care delivery system. It will also provide librarians the impetus to be proactive and innovative in their information service delivery.

SCOPE OF THE STUDY

It covers the repackaging of information to traditional bonesetters (TBs) in Nsukka Local Government area of Enugu State. Therefore, it includes information needs of TBs, methods of repackaging information challenges of repackaging and the impact of
repackaging on TBS. The study will cover selected communities in Nsukka Local Government Area of Enugu State.

RESEARCH QUESTION

1. What are the information needs of traditional Bonesetters in Nsukka Local Government Area Enugu State.
2. What are the information repackaging methods employed to meet the information needs of TBS.
3. What are the challenges faced by librarians in repackaging information to the traditional bonesetters (TBS).
4. What are the impacts of repackaging information on traditional bonesetters (TBS).

METHODOLOGY

Descriptive survey method was used. The research was conducted in Nsukka Local Government Area of Enugu State, Nigeria. The Local Government is made up of twelve autonomous communities. The population consists of bone setters and librarian in the Local Government Area. The sample comprises of four bonesetters from four of the autonomous communities in the LGA and the librarians in Nsukka Divisional library and Nnamdi Azikiwe Library University of Nigeria Nsukka. The four communities are Nsukka, Opi, Ede-Oballa, and Alor Uno.

Questionnaire and interview methods were used for data collection. The questionnaires were administered to the librarians while interview was used for traditional bonesetters. A total of 50 questionnaires were distributed but 40 were returned completed given a response rate of 80%. The data was organized and analyzed based on the research questions. The research questions were answered using percentages while the interview was qualitatively analyzed.

REVIEW OF LITERATURE

Traditional bonesetters are paramount to effective and efficient primary fracture care delivery system in Nigeria. Primary healthcare delivery system is a means of delivering healthcare services, to the rural populace. Bonesetters are unorthodox practitioners who play an important role in providing primary ‘medical’ support. Stressing the importance of TBS, Agarwal and Agarwal (2010) noted that with the current socioeconomic development and the type of healthcare prevailing in developing countries, it is difficult to abolish traditional bone setting because bonesetters have widespread community acceptance and support.

Nwadrukwu, Okwesili, Harris and Katz (2011) stated that in Nigeria, there is a shortage of surgeons formally trained in fracture care. Many of the injured seek care from traditional bonesetters. They purposed that bone setters not only be taught certain injury management techniques but also be incorporated into the Nigerian healthcare scheme. Rural community has little or no access to modern hospitals (orthopedic) and equipments because of non-availability and long distance to the cities where they can be obtained. They usually resort to the TBS as emphasized by Beckett (1999) that in the third world especially in the South America and Africa where majority do not have access to health insurance or government health care, treatment from the bonesetters is all they can afford. He also noted...
that shortage of qualified medical professional necessitated the training of bonesetters and
other medicine men by the world health organization (WHO). In other words, they are
internationally recognized as good source of primary healthcare provision.

Irrespective of the immense need of TBS in the rural areas, Onuninya (2009) point out
the TBS relies solely on the conservative method of fracture treatment that has led to major
complications as non-union, malunion, traumatic Osteomyelitis and Limb Gangrene.
Onunlade and Alonge (2002) highlighted some of the deformities, financial loss and
amputations resulting from the management by the traditional bonesetters. As a result, they
suggested adequate communication through televisions, radio and the press as ways to
improve this malady. Actually there has been a lot of cry for gangrene and amputation arising
from crude fracture splint practice by the TBS. Nwankwo and Katchy (2005) therefore,
suggested that there is the need to avert this unnecessary limb loss by educating, the public in
general and enlightenment of traditional bonesetters to know, and drop procedures that are
harmful in their practice. They went further to state that limb gangrene usually result, because
of the traditional bonesetter’s crude fracture splint application on the one present with limb
injury whether there is fracture or not because radiological examination is not usually done.
To achieve good fracture management, Nwachukwu, Harris Okwesili and Kiat, (2011)
provided an integrated model of fracture care in developing counties where bonesetters
perform large proportion of fracture cure. In an integrated scheme, bonesetters would mange
fractures for which they can achieve acceptable outcomes, referring others to local hospital.
Onunuiya, obekpa, Ihezure Ukegbu and Onabuwale (2006) point that most of the major
amputations performed in their study, were due to fracture mismanagement by TBS.

Traditional bone setting to serve the rural population must have well trained and
educated TBS practitioners as a solution to minimize complications and improve practice
potentially (Agarwal and Agarwal, 2010). There are some other fundamental health
challenges posed by the growing influence of traditional bonesetters in West Africa. West
African Insight (2011) mentioned this challenge as lack of modern medical facilities such as
wheel chairs ventilated wards and beds for patients. It also identified that the practitioners
lack safety gloves as they use their bare hands in examining and treating patients. This poses
greater health risk for both the patient and the practitioners.

Traditional bonesetters need training and education, suitable health environment, best
methods, and safety techniques to be able to thrive in competitive fracture care practice with
the orthodox orthopedic practitioners. Information on these is indispensable for primary
fracture care delivery.

REPACKAGING

Information as a priceless commodity to achieve its aim must be presented in a form
and format that it will be valuable to the users. For it to be valuable to users, it must be
interpreted, and converted to a form that the user can understand and assimilate. Igbeka
(2008) and Udensi (2010) saw information repackaging as the ability and method of making
information available to groups of people in a particular format that could best be accessible
to them, instead of the former format that was difficult for them to understand and access.
Stilwell (1999) pointed out that information contained in scientific and technical
journals/research reports is in language which makes them inappropriate for use by most
people. He also maintained that absence of ‘education language’ for health necessitates
repackaging Sturges and Chimsen (1996) noted that materials to be repackaged include
published materials, raw data collected by research institute and government statistical services and networks, and the people’s indigenous knowledge. Repackaging published books and journals is of very importance to the rural communities. As a result, Aboyade (1987) recommended the repackaging of information into acceptable forms to the local population. Sturges and Chimseu (1996) were of the opinion that mere acquisition of information materials is not enough but that an active information consolidation and repackaging exercise is required so as to provide information capable of effective dissemination? They noted that consolidation and repackaging of information provides a level ground for development communication especially for informal, community – based, user-oriented, information services. In the same vein, Namponya (1986) and Aina (1991) indicated that illiteracy is a great obstacle to information delivery to farmers and advocated that information providers in which library is one should be willing to interpret, repackaging, and apply information to user’s situation and help communities act on the information they have received.

Information repackaging can take different strategies as identified by different authors. This includes the processes and methods of repackaging. Stilwell (1999) stated that repackaging involves the study of potential users, selecting of information sources and evaluation of the information content; then analysis of the content to permit restructuring (condensing, rewriting, translation etc) and repackaging of information with subsequent diffusion, or dissemination of the repacked information. He maintained that simple and clear presentation of the information; testing the information for readability; use of short sentences, generally less than about 25 words, the use of everyday alternatives for specialized vocabulary and give concrete and specific examples when possible, forms the repackaging process.

Chisita (2011) and Iwhiwhu (2008) also enumerated various forms of repackaging as theatre, drama, story telling and the use of songs. He further stressed that modern technology is a sure way of repackaging information through its integration of text and graphics. Like wise, information technology assists in repackaging information into oral forms, for example the use of podcasts in rural areas to record oral history and songs. The use of tape recorders also assist in capturing a fading memory with regards to traditional knowledge in agriculture. Iwhiwhu (2008) and Stilwell (1999) agrees with Boadi (1987) who stated ways of providing information in a usable format as abstracting and indexing, Selective Dissemination of Information special bulletins and other current awareness services.

Sturges and Chimseu (1996) recognize that Iwuji (1989) suggests civic centres as information resources where most of the community activities are carried out such as work-based adult education, like agricultural extension instructions on new ways of doing old things, general reading materials for new literates, art and cultural exhibitions and festivals, viewing of records of oral literature and traditional meetings and workshops organized by various interest groups in the community and other activities intended for enhancing the social craft of the people are done.

Ezema (2011) recommended the following strategies in repacking information to the rural dwellers: Among them are:

- Transforming of printed information into oral form.
- Use of local group discussion
- Translation of Existing Information into local languages.
- Use of posters/handbills
Igbeka (2008) described the steps involved in repackaging as collection of information, analysis of information extraction of information and presentation of information.

Mansor and Kamba (2010) emphasize that information in a coherent form; can raise aspiration by turning people from fatalism and fear of change to desire for a better life and the determination for it. They also made it clear that repackaged information creates an intellectual climate that stimulates people to take a look at their current practices and future perspectives.

**FINDINGS AND DISCUSSIONS**

Probing into information needs of traditional bonesetters, through interview, it was discovered that most of the practitioner don’t even know what they need. Rather, they are conservative clinging to their old ways of doing things claiming that they received it from their ancestors according to Pius Ezugwu from Opi. On his own part, Stephen Nweze from Owerre Village Nsukka, insisted that his practice was revealed to him after a two year terrible illness. Therefore, it was gotten from God; as a result he doesn’t need any other thing to improve the practice. However, Pius, indicated that they need orthodox doctors’ collaboration for effective injury management. They now use crape bandage and radiographic materials (x-ray) for fracture treatment which is a borrowed idea from the orthodox. Benjamin Ishiwu from Ede Oballa who said he learnt his own practice from experience and interest, said he is interested but as illiterate doesn’t know how to go about acquiring more knowledge

The result of the interview indicates that these bonesetters are ignorant of their needs to improve their services. This stems from the fact that they claim that they are better than the orthodox practitioners, because of this; their needs should be assessed and made known to them. Therefore, librarians, information practitioners and health workers should identify their information needs and repackaged same. Such information needs to be repackaged include injuring management technique, modern methods of fracture treatment, use of modern medical facilities (wheel chairs, ventilated wards, beds for patients), safety techniques and health literacy. It was also found that knowing these needs is one thing but the fund to acquire them is another thing. As a result many of them are operating in small scale in one or two room apartment in their compound.
Table 1: Percentage responses on the information repackaging methods employed to meet the information needs of traditional bonesetters (TBS)

<table>
<thead>
<tr>
<th>S/N</th>
<th>Item</th>
<th>SA</th>
<th>A</th>
<th>D</th>
<th>SD</th>
<th>Total Freq</th>
<th>Total perc</th>
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<tbody>
<tr>
<td>1</td>
<td>Transforming of printed information into oral forms</td>
<td>20</td>
<td>50</td>
<td>15</td>
<td>37.5</td>
<td>40</td>
<td>100</td>
</tr>
<tr>
<td>2</td>
<td>Use of focal group discussion</td>
<td>11</td>
<td>27.5</td>
<td>25</td>
<td>62.5</td>
<td>40</td>
<td>100</td>
</tr>
<tr>
<td>3</td>
<td>Translation of existing information to local language</td>
<td>20</td>
<td>50</td>
<td>18</td>
<td>45</td>
<td>40</td>
<td>100</td>
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<tr>
<td>4</td>
<td>Use of posters/handbills</td>
<td>16</td>
<td>40</td>
<td>24</td>
<td>60</td>
<td>40</td>
<td>100</td>
</tr>
<tr>
<td>5</td>
<td>Use of radio programme and jingles</td>
<td>20</td>
<td>50</td>
<td>19</td>
<td>47.5</td>
<td>40</td>
<td>100</td>
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<tr>
<td>6</td>
<td>Use of television/home videos</td>
<td>16</td>
<td>40</td>
<td>23</td>
<td>57.5</td>
<td>40</td>
<td>100</td>
</tr>
<tr>
<td>7</td>
<td>Use of community library and information centre</td>
<td>16</td>
<td>40</td>
<td>20</td>
<td>50</td>
<td>40</td>
<td>100</td>
</tr>
<tr>
<td>8</td>
<td>Use Of Community Based Organizations (CBOs)</td>
<td>14</td>
<td>35</td>
<td>23</td>
<td>57.5</td>
<td>40</td>
<td>100</td>
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<tr>
<td>9</td>
<td>Use of community leaders</td>
<td>14</td>
<td>35</td>
<td>25</td>
<td>62.5</td>
<td>40</td>
<td>100</td>
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<td>10</td>
<td>Use of civic centre as information resource</td>
<td>13</td>
<td>32.5</td>
<td>23</td>
<td>57.5</td>
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<td>100</td>
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<tr>
<td>11</td>
<td>Use of songs</td>
<td>14</td>
<td>35</td>
<td>22</td>
<td>55</td>
<td>40</td>
<td>100</td>
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<tr>
<td>12</td>
<td>Use of story telling</td>
<td>19</td>
<td>47.5</td>
<td>16</td>
<td>40</td>
<td>40</td>
<td>100</td>
</tr>
<tr>
<td>13</td>
<td>Use of drama</td>
<td>15</td>
<td>37.5</td>
<td>22</td>
<td>55</td>
<td>40</td>
<td>100</td>
</tr>
<tr>
<td>14</td>
<td>Use of popular theatre</td>
<td>12</td>
<td>30</td>
<td>23</td>
<td>57.5</td>
<td>40</td>
<td>100</td>
</tr>
<tr>
<td>15</td>
<td>Use of charts/diagrams</td>
<td>12</td>
<td>30</td>
<td>27</td>
<td>67.5</td>
<td>40</td>
<td>100</td>
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<tr>
<td>16</td>
<td>Use of models and photographs</td>
<td>14</td>
<td>35</td>
<td>25</td>
<td>62.5</td>
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From the table above, it can be observed that 20 (50%) of the respondents strongly agree that transforming of printed information into oral forms is a veritable method of repackaging information. 25 (62.5%) of the respondent agree that the use of focal group discussion is also a way of repackaging information. Translation of existing information to local language has been strongly acknowledged by 20 (50%) as a means of repackaging information. 24 (60%) also agreed that poster/hand bills helps to repackege information. Use of radio program and jingles are strongly agreed upon as a repackaging strategy by 20 (50%) of the respondents. Television and home videos are agreed upon as a way of information repackaging by 23 (57%) of the respondents. 20 (50%) of them, also agreed that community library and information centres can be used for information repackaging. Equally 23 (57.5%) agreed that the use of Community Based Organization is a method of information repackaging. Community leaders can also be used as agreed by 25 (62.5%). Civic centre as information resource can be used for information repackaging as agreed by 23 (57.5%). The following percentages of the respondent also agreed that these are the methods of information repackaging. 22 (55%) use of gongs, 22 (55%) use of drama, 23 (67.5%) use of popular theatre, 27 (67.5%) use of charts/diagrams and 25 (62.5%) use of models and photographs.
With regards to the methods of repackaging information, majority of the respondents strongly agree and agree to the various ways of repackaging information. These methods include transformation of printed information into oral forms, use of focal group discussion, translation of existing information to local language, use of posters/hand bill, use of radio programme and jingles, television home videos, use of community based information centre, use of community based organization (CBO), use of community leaders, use of civic centre as information resource use of songs, use of drama, use of popular theatre, use of charts/diagrams and use of models and photographs. This is in line with the views of Chisita (2011) and Iwhiwhu (2008), Sturges and Chimseu (1996), Ezema (2011) and Udensi (2010). These methods, go a long way in bringing the traditional bonesetters to better understanding and assimilation of the information thereby helping them to make appropriate health decisions.

<table>
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<tr>
<th>S/N</th>
<th>Item</th>
<th>SA freq</th>
<th>A %</th>
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<th>SD freq</th>
<th>Total freq</th>
<th>Total pert</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Lack of trained professionals on IR</td>
<td>24</td>
<td>60</td>
<td>15</td>
<td>37.5</td>
<td>40</td>
<td>100</td>
</tr>
<tr>
<td>2</td>
<td>Inadequate assessment of information needs of TBS</td>
<td>20</td>
<td>50</td>
<td>15</td>
<td>37.5</td>
<td>40</td>
<td>100</td>
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<tr>
<td>3</td>
<td>Lack of funds for extension services</td>
<td>17</td>
<td>42.5</td>
<td>21</td>
<td>52.5</td>
<td>40</td>
<td>100</td>
</tr>
<tr>
<td>4</td>
<td>Lack of awareness by librarians of the importance of IR</td>
<td>16</td>
<td>40</td>
<td>19</td>
<td>47.5</td>
<td>40</td>
<td>100</td>
</tr>
<tr>
<td>5</td>
<td>Ineffective policy addressing information service delivery to rural areas</td>
<td>22</td>
<td>55</td>
<td>16</td>
<td>40</td>
<td>40</td>
<td>100</td>
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<tr>
<td>6</td>
<td>Inadequate security for the dissemination of the repackaged information</td>
<td>14</td>
<td>35</td>
<td>18</td>
<td>45</td>
<td>40</td>
<td>100</td>
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<tr>
<td>7</td>
<td>Non-availability of materials from research institutes, government sources, online services and Networks</td>
<td>14</td>
<td>35</td>
<td>18</td>
<td>45</td>
<td>40</td>
<td>100</td>
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</table>

Table 2 shows that 24 (60%), of the respondents strongly agree that lack of trained professionals on IR affects information repackaging likewise 20 (50%) strongly agreed that inadequate assessment of information needs of TBS poses a problem to information repackaging to rural communities. 21 (52.5%) agreed that lack of funds for extension services hampers information repackaging. 22 (55%) strongly agree that ineffective policy addressing information service delivery to rural areas hinders effective information repackaging to the rural communities.

The analysis of table 2 concerning the challenges hampering information repackaging, with a percentage 24 (60%) it can be inferred that many librarians are not professionally trained from library school to repackaging information.
Most times it is impossible to ascertain the needs of the traditional bonesetters as they usually remain skeptical in divulging their information needs because of conservation. Though community library and information resource centre such as civic centre is available for information repackaging, public and academic libraries lack enough funds for extension services to the rural communities. Therefore, serving their immediate community becomes more paramount. Lack of funds and initial training on IR created lack of awareness of the importance of IR to libraries. Librarians need to repackage information in a form and format that will facilitate easy information service delivery. However, there is no effective policy backing information service delivery to rural areas. Therefore library is slack in encouraging repackaging of information to rural communities.

The Impacts of information repackaging to the traditional bonesetters (TBS) were also solicited from the TBS through interview and discussion. From the interview, Chief Ezugwu Pius a bone setter from Opi admitted that the health literacy he acquired has helped him know some drugs that help in orthopedic treatment. He equally noted that the skeletal model he saw in the University of Nigeria, Nsukka has broaden his understanding of the skeletal make up of man and has been applying this knowledge in his traditional practice.

Apart from this man, the other bone setters did not show any appreciable impact in their practice even though they apply some acquired knowledge in one way or the other.

CONCLUSION

Rural development includes good health care services delivery to the rural communities. For effective fracture care by the TBS, repackaged health information that will inculcate health literacy and improved services is indispensable. To achieve this, some of the repacking methods that can effectively impact on the TBS should be employed.

Recommendation

1. IR should be given a prominent place in library school curriculum. This will help in producing library and information science professionals adept in serving the rural populace of Africa.
2. Librarians, information professional and health workers have to use their discretion from research, observation and development perspective to identify the information needs of these rural communities and repackage them in a form that will enhance their living standard, ignoring their conservatism.
3. Libraries irrespective of type should consider effective service delivery to the rural areas for development as a policy.
4. Librarians should be proactive by engaging themselves in entrepreneurial librarianship such as information repackaging.

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