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HEALTH INFORMATION NEEDS OF PREGNANT WOMEN IN EDE METROPOLIS, OSUN STATE, NIGERIA

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ABSTRACT

Observation and literature revealed shows that many pregnant women experience difficulties in accessing accurate, reliable, and timely and experience many unmet health information needs. Pregnant women with no accurate and essential health information needs can have several potential consequences. These may result in health risks, complications during pregnancy, congenital disabilities, and other related health challenges. This study therefore investigated the health information needs of pregnant women in Ede metropolis, Osun State, Nigeria. It adopted a quantitative survey research design. Quantitative survey research design is justified because it allows systematic collection and statistical analysis of numerical data from a large population, enabling the identification of patterns, relationships, and generalizable findings. A self-assessed structured questionnaire was developed by the researchers to collect data from the respondents. The population for the study consists of all the pregnant women in the State Hospital Ede metropolis in Osun State. The researchers developed a self-assessed structured questionnaire to collect data from the respondents. Preliminary investigation of the hospital and the health records revealed that the hospital sees an average of 200 pregnant women per week. Therefore, the population of the study is 200 pregnant women. The convenience sampling techniques were adopted and a total of 128 respondents participated and completed the questionnaire. The findings show that all the pregnant women need health information including environmental cleanliness, immunisation, disease prevention and control, personal care, and baby care. The study also shows that pregnant women primarily relied on doctors, nurses, and prenatal health education classes as their key sources of health information during pregnancy. The findings finally show that pregnant women encountered several challenges in accessing vital health information during pregnancy which include financial difficulty, lack of awareness of the existence of information, lack of time, lack of access to mobile phones and ignorance from the pregnant women. The study concluded with the importance of providing comprehensive health information to pregnant women at State Hospital Ede, Osun State. The study recommended among others the provision of comprehensive and timely health information at State Hospital Ede, Osun State, Nigeria.

Keywords: Health information, Health information needs, Pregnant women, Information seeking behaviour

Introduction

Pregnancy is when a sperm fertilizes an egg cell to form a new cell called the zygote, which eventually develops into a new human organism to be born (Thomas, 2020). Pregnancy is the time during which one or more offspring develops (gestates) inside a woman's uterus (womb). A multiple pregnancy involves more than one offspring, such as twins. Pregnancy usually occurs by sexual intercourse but can also occur through assisted reproductive technology procedures. Pregnancy may end in a live birth, a miscarriage, an induced abortion, or a stillbirth. Childbirth typically occurs around 40 weeks from the start of the last menstrual period (LMP), a span known as the gestation age. Pregnancy is the presence of an implanted human embryo or fetus in the uterus. Pregnancy occurs when a fertilized egg implants itself in the uterus and begins to develop into a fetus. This typically lasts around nine months, during which the woman's body undergoes various changes to support the growth and development of the baby (Pascual & Langaker, 2023).

Pregnancy occurs when a sperm fertilizes the egg after it's released from the ovary during ovulation. The fertilized egg then travels down into the uterus, where implantation occurs; a successful implantation results in pregnancy (Oliver & Basit, 2019). Pregnancy is not only a period of physical changes but also a period in a woman's life when health-related behaviors are most vital, as decisions taken during pregnancy could affect the life of a mother and her unborn fetus. Pregnancy typically lasts around 40 weeks and is characterised by various physical and hormonal changes in the woman's body as the fetus grows and prepares for birth. Research has been done according to Akindeji *et al.* (2020), pregnancy is a critical phase in the marital life of two people, and it is the period of carrying a fetus within the female body. This state can be validated by affirmative results by a simple urine test, a blood test, an ultrasound, detection of a fetal heartbeat, or an X-ray. This research discovered that it is a crucial period in the lifetime of any married couple and a period of physical changes in a woman's body system because two or more lives could be involved: the mother and fetus. Pregnancy and childbirth are significant developmental periods in women's lives (Othman, 2024).

Pregnancy is a period of transition with significant physical and emotional changes. Even in uncomplicated pregnancies, these changes can affect the quality of life of pregnant women and maternal and infant health (pregnancy monitoring, pregnancy outcomes, maternal postpartum health, and the psychomotor development of the infant). Health professionals in the prenatal maternal and child health field try to satisfy their patients concerning their experience during preconception and pregnancy periods (Berglund & Lindmark, 2016). Regular antenatal care can help avoid or manage most pregnancy complications. In her study, doctors typically suggest monthly checkups until the end of the second trimester, fortnightly visits until week 36, and weekly visits beyond that. Blood tests are typically done to rule out anemia, diabetes, and certain sexually transmitted infections (STIs). An ultrasound scan in the first, second, and third trimesters is now usually part of routine antenatal care (Gavine *et al.,* 2022).

A pregnant woman is an adult female who is expecting a child or fetus to develop and grow inside her womb. Murugathas *et al*. (2020) researched that pregnant women undergo physiological, psychological, and social changes throughout pregnancy. In the study by Lagadec *et al.* (2018), the results obtained concerning physical activity and pain in pregnant women can be compared to those obtained for chronic diseases such as cardiovascular diseases, diabetes, and cancer. For pregnant women to adequately live a healthy life and ensure the safe delivery of their babies, they need to search for and acquire the information necessary for healthy living. Pregnant woman has various information needs to ensure a healthy pregnancy and safe delivery, and they seek information during pregnancy to prepare themselves for their maternal responsibilities (Vogels-Broeke *et al.,* 2022). Some critical areas of information they often seek include prenatal care, nutrition, exercise, common pregnancy symptoms, fetal development, pregnancy complications, labour and delivery, postpartum care, emotional well-being, and breastfeeding. It is also essential to guide on potential risks and when to seek medical attention. Every woman's pregnancy journey and experiences are different and unique. Pregnant women need health information to ensure their health and to have a healthy delivery (Javanmardi *et al.,* 2020).

According to the World Health Organisation (WHO), maternal health includes the absence of

maternal morbidity, severe maternal morbidity, and maternal mortality. Maternal mobility refers to health conditions that complicate pregnancy and childbirth or negatively impact a woman's health and well-being. Maternal health information is a fundamental building block of women's health during pregnancy, childbirth, and postpartum. It can help to identify existing health risks in pregnant women and to foil potential health troubles for women and their children (author unknown). Health information required includes anti-natal and post-natal care, immunisations, especially on the six killer diseases, how to prevent and manage Vascular Virginal Fistula VVF, and how to deliver pregnancy safely. Akindeji *et al*. (2020) viewed that during the nine months, a woman requires a lot of information, particularly if such a person is getting pregnant for the first time to meet her physical and psychological needs.

Information is generally regarded as power, and its role must be considered. Information needs can be referred to as an incomplete or anomalous state of knowledge (ASK) in Individuals, particularly pregnant women. Pregnant women seek information during pregnancy to prepare themselves for their maternal responsibilities(Rezaee *et al.,* 2022). With the development of ICT and its counterparts, information is steaming quickly to its users in various forms. Therefore, information can be derived from various sources, including books, journals, the Internet, friends/relatives, persons at the workplace, or professional advisors. Pregnant women have both expressed and unexpressed information needs. Unexpressed information needs to occur when someone is not aware of the fact that information is needed in a particular circumstance or when somebody decides not to act on his or her needs.

Conversely, expressed information needs occur when an individual is aware that there is a need to fill a gap in the state of his or her knowledge. An unexpressed information need refers to ignoring the information need by not searching for information; it becomes an expressed information need when action is taken to meet it. The unexpressed needs can be triggered or exposed through browsing and information monitoring. Despite the abundance of information sources, the well-being of pregnant women remains a significant concern in the world. In the study conducted by Amusan *et al*. (2022) on nutrition and dietetics, information needs and source, as a corollary to information needs, information is sought from available sources. More so, the proliferation in the use of ICT has given rise to cheaper and easier access to information acquisition and sharing access to timely information is crucial to planning and decision-making. The United Nations also recogniseds access to information as one of the fundamental human rights because a better-informed society is a liberated society. An ideal situation is for a pregnant woman to have the information needed for maternal health, which is required during pregnancy, childbirth, and postpartum.

Statement of the Problem

However, this is not always the case, as observation and literature revealed that many pregnant women experience difficulties in accessing accurate, reliable, and timely and experience many unmet health information needs. Pregnant women with no accurate and essential health information needs can have several potential consequences. These may result in health risks, complications during pregnancy, congenital disabilities, and other related health challenges. To this end, the study set out to investigate the health information needs of pregnant women in the Ede metropolis to identify the challenges they face in seeking such information. Based on this background, this study was embarked upon to find out the information needs of pregnant women in the State Hospital, Ede, Osun State.

Objectives of the Study

The objectives of the study are to:

1. determine the health information needs of pregnant women in Ede metropolis, Osun State;
2. identify health information sources available to pregnant women in Ede metropolis, Osun State;
3. investigate the frequency of use of health information sources by pregnant women in Ede metropolis, Osun State; and
4. ascertain pregnant women's challenges in seeking and accessing health information in Ede metropolis.

Research Questions

This study sets out to provide answers to the following research questions:

1. What are the health information needs of pregnant women in Ede metropolis, Osun State?
2. What health information sources are available to pregnant women in Ede metropolis, Osun State?
3. What are the frequencies of use of health information sources by pregnant women in Ede metropolis, Osun State?
4. What challenges do pregnant women face in Ede metropolis seeking and accessing health information?

Review of Related Literature

Pregnancy is a critical phase in the marital life of two people, the husband and the wife. It is the period of carrying a fetus within the female body. This state can be validated by affirmative results by a simple urine test, a blood test, an ultrasound, detection of a fetal heartbeat, or an X-ray. Pregnancy may last nine months, measured from the woman's last menstrual period (LMP) date (Akindeji *et al.,* 2020). Ojewole and Oludipe (2017) in their assertion stated that pregnancy is a period of physical change in a woman's life when health-related behaviors are most vital because of the life of the mother and the fetus. Hence, the pregnant woman requires a continuous flow of maternal information. A pregnant woman is a potential mother who may experience different changes in her physical behaviors, health needs, and health information needs, as well as in the level of nutrition of food for her and the unborn fetus, according to Murugathas *et al*. (2020).

Pregnant women face many challenges during the pregnancy period. They need quality, reliable, and easily accessible information to face the challenges. Studies on pregnant women have noted that they experience emotional issues such as depression, anxiety, and stress (Gangakhedkar *et al.,* 2021). These physiological changes of pregnancy are caused by the hormones secreted by the placenta. During this period, health-related information is vital since the decisions and changes would affect the mother as well as the unborn fetus, who are the future citizens of the country, as the health of a baby starts from the womb of the mother. The healthcare of a pregnant woman directly reflects the healthiness of her baby, which impacts the creation of a healthy nation in the country (Downe *et al.* 2016).

Health Information Needs of Pregnant Women

A study on information needs is critical if it is planned to provide an adequate information service to meet the group's needs. The concept of information needs is the outcome of combining two terms: information and access to timely information is crucial to planning and decision-making. Amusan *et al*. (2022) conversely, expressed that information needs occur when an individual is aware that they need to fill a gap in their knowledge (Blandford, 2022).

An unexpressed information need refers to ignoringthe information need by not searching for information;it becomes an expressed information need when action is taken to meet. Pregnant women have both expressed and unexpressed information needs. The unexpressed needs can be triggered or exposed through browsing and information monitoring.

Bianchi *et al.* (2016) conducted a qualitative study on concerns, attitudes, beliefs, and information-seeking practices concerning nutrition-related issues during pregnancy. Healthcare centers provide pre-and postnatal care for pregnant women (Ezeabasili, 2024). The most crucial pregnancy issue that the participants would like to monitor is the health and safety of their fetus Fourie and Olubukola (2018). Skilled midwives and doctors are fundamental in healthcare delivery to pregnant women (Bahri Khomami *et al*. (2021). Inadequacy in healthcare human resources is causing increased staff burn-out, absenteeism, low productivity, and inadequate care provision, particularly to pregnant women (Shilinge, 2022). Mulauzi and Daka (2018) reported that women need information on the importance of regular checkups, place of delivery, birth preparedness, pregnancy period, nutrition, miscarriage, pregnancy complications/ danger signs, sexual and family relations, fetus development, expected child, TB, HIV and malaria in pregnancy, medicines in pregnancy, family planning, and exercise. While at childbirth, women require information on infant care, child immunisation, infant feeding, maternal recovery, hygiene, premature birth, and low birth.

Health Information Sources for Pregnant Women

As a potential mother, a pregnant woman may experience different changes in her physical behaviors, health needs, and health information needs, as well as in the level of nutrition of food for her and the unborn fetus. In order to face all these challenges, proper information sources are essential during pregnancy. Self-care of a pregnant woman is essential to make decisions for the health of the mother and the fetus. Maternal and infant mortality rates are included among the health indicators when measuring the development of a country. Nowadays, people are exposed to a wide variety of information sources. It is imperative to make available or accessible the timely and reliable information that pregnant women need (Murugathas *et al*., 2020).

In the study on sources of information used by pregnant women, a study analysed the association between socio-economic status and the type of information they used during pregnancy. A study on minority ethnic women in the UK revealed that many pregnant women sought information from general practitioners and healthcare visitors for maternity information, and verbal information was preferred by pregnant women (Higginbottom *et al.,* 2019). More than half of pregnant women acquire health information by using the Internet, especially Google and other health-related tools, to find out information.

YouTube, commercial pages, and women's forums were the information sources used by these pregnant women (Almoajel & Almarqabi, 2016). It is also concluded that pregnant women with high socio-economic status mainly depended on books than women with low socio-economic status who depended on verbal communication (Murugathas *et al*., 2020). The Internet was identified as one of the preferred information sources among pregnant women in Iran (Kamali *et al.,* 2017). Family members were the primary source of information, and the Internet was rarely used to meet their information needs (Kandjimi, 2021). Nowadays, people are exposed to a wide variety of information sources. It is crucial to make available or accessible the timely and reliable information that pregnant women need.

Challenges Faced by Pregnant Women in Seeking and Accessing Health Information

Pregnant women face many challenges during the pregnancy period. They need quality, reliable, and easily accessible information to face the challenges. Various published books are available only to educated people, especially in developing countries. To ensure the safe delivery of the baby and to live a healthy life during and after the pregnancy, pregnant women must be provided with the necessary information. In the research studied by Fourie and Olubukola (2018), based on the literature, issues were also identified that women might potentially wish to monitor during their current pregnancy or immediately after giving birth. Not all the information pregnant women want to monitor can be covered by databases, journals, and books (Akanbi & Fourie, 2018). As a potential mother, she may experience different changes in her physical behaviors, health needs, and health information needs, as well as in the level of nutrition of food for her and the unborn fetus. In order to face all these challenges, proper information sources are essential during pregnancy. Self-care of a pregnant woman is critical to making decisions for the health of the mother and the fetus (Murugathas *et al.,* 2020).

According to Amusan *et al.* (2022), the respondents need help accessing nutrition and dietetics information. The most common challenges are the high cost of accessing information, difficulty accessing doctors and nurses, the need for more information materials, and lack of access to social media. The high cost of accessing needed information may relate to the high cost of Internet data subscription coupled with a high poverty level experienced by most Nigerians. Ghiasi (2021) opined that challenges hindering pregnant woman from accessing their information needs include their inability to access the libraries, lack of income, and time. However, according to (Clarke, 2016), the use of medical terminology by the information sources, which are usually not understood by the information seeker, is a significant barrier to the utilisation of health information by a pregnant woman. Also, Okolo (2023) cited unprofessional practices, attitudes, and behaviors of health personnel as barriers to the use and access of health-related information by pregnant women. Mulauzi and Daka (2018) listed several challenges women face in accessing the required information. These challenges include illiteracy, poverty, distance, language barrier, inadequate services, lack of information, inadequate human resources, poor attitudes of health workers towards women, and cultural practice.

Akindeji *et al.* (2020) examined women's information needs and seeking behaviour in selected hospitals in Ile-Ife Metropolis, Osun State. In Nigeria, a descriptive survey design was adopted for the

study. The random sampling technique was adopted to sample 120 respondents, representing 100% of the population target for the study. The gathered information was analysed using a frequency table, simple percentage, pie chart, and bar chart. The result was given along with the data, which aided the clarity of the result and made it easy to conclude from the information gathered. Findings showed that pregnant woman's information needs in Ile-Ife include breastfeeding, disease prevention and control, environment cleanliness, after delivery, sickness during pregnancy, and immunization. The study concluded that pregnant women in Ile-Ife seek their information by asking doctors, Health workers or paramedical staff, alternative medicine, the Internet, and pamphlets.

Even though pregnant women in the Ile-Ife metropolis frequent the hospital every week, they experience several challenges in their bid to meet their information needs, ranging from limited finances, household needs to take care of, having no one to accompany them to the clinic, having no one to discuss pregnancy-related issues with, having to wait a lot to see the doctor or healthcare professional and health staff attitude is not good. The study recommends that the government ensure adequate distribution of primary health care (PHC) centers, especially across the grassroots, to ensure pregnant women receive information about their pregnancy at the right source, at the right time, and at an affordable cost.

Amusan *et al*. (2022) studied the nutrition and dietetics information needs and source preferences of nursing mothers in Ede Metropolis, Osun State. The study adopted a survey method as it is the best method to collect data from a sample of individuals. The study found that most respondents need information on a balanced diet, multivitamins, food safety, and food hygiene, with less attention paid to an adequate diet. Also, the high cost of accessing information and difficulty in accessing doctors or nurses for information were the two significant challenges experienced by the respondents. The study recommends, among others, that there is a need for the hospital management to engage nutritionists and dieticians to review the procedures in booking a visit/appointment with doctors and nurses to make such less complicated need for hospitals to have libraries within their premises and engage librarians that have adequate knowledgeable of Information repackaging service.

Huong *et al*. (2024) believes that health information-seeking behaviors are critical for enabling pregnant women to make informed decisions that safeguard both their health and that of their babies. However, these behaviors are often hindered by various obstacles. Investigating these barriers is essential for developing interventions that enhance women's ability to protect, prevent, and manage their health. Such efforts can ultimately improve the overall well-being of women and their infants. Notably, there is limited information in Vietnam aims to describe the barriers to health information-seeking behavior among pregnant women in Hanoi Obstetrics and Gynecology Hospital in 2023. A cross-sectional study was conducted in 2023 with 191 women visiting Hanoi Obstetrics and Gynecology Hospital. Various personal and external environmental barriers hinder information-seeking behaviour among women. Furthermore, women with lower educational attainment encountered exacerbated difficulties related to geographical distance, communication barriers with healthcare professionals, insufficient support for transportation to medical appointments, and the lack of available counseling centers. These findings highlight the need to enhance social support and healthcare services to mitigate these barriers and particularly emphasize the need for targeted support for women with lower education levels. Enhancing support in the area can significantly improve their capacity for self-care, prevention, and overall health, benefiting both themselves and their families.

Du (2025) described the content and current situation of maternal information needs and support, providing a basis for building maternal information needs assessment tools and improving information support systems. Retrieve articles related to the topic from domestic and foreign databases and ultimately include 54 articles. Summarize from the aspects of information demand content, influencing factors, evaluation tools, and information support channels. The study found that the information needs of pregnant women are rich in content, but the existing information support content is limited, and the form is single. There is an urgent need to establish scientific and effective information needs assessment tools, as well as diverse information support systems.

Hansen *et al*. (2025) explored worries and information-seeking behaviour among pregnant women in Norway using social media. An anonymous, web-based survey was conducted among 1402 pregnant women in Norway from January to March 2022, distributed via *Facebook* and *Instagram*.

Pregnancy and postpartum worries are widespread among pregnant women using social media, especially among first-time mothers and those with financial insecurity. Most pregnant women prefer quality-assured websites and healthcare personnel for information. Antenatal care could benefit from offering more tailored information and follow-up, particularly for first-time mothers and financially insecure women.

Rivera *et al.* (2024) synthesized and identified gaps in knowledge about communication preferences during pregnancy care among patients with Spanish primary language Qualified language service providers (QLSPs) professional interpreters or multilingual clinicians certified to provide care in another language are critical to ensuring meaningful language access for patients. Designing patient-centered systems for language access could improve quality of pregnancy care. it also performed a scoping review of original research studies published between 2000 and 2022 that assessed communication preferences in Spanish-speaking populations during pregnancy care. Studies underwent title,

abstract, and full-text review by three investigators. Data were extracted for synthesis and thematic analysis. Although seven studies reported a strong patient preference to receive prenatal care from Spanish-speaking clinicians, none of the included studies assessed clinician Future studies to improve communication during pregnancy care for patients with primary Spanish language require intentional analysis of their communication preferences, including precision regarding language proficiency among clinicians.

Murugathas *et al.* (2020) conducted a study on the information needs and information-seeking behavior of pregnant women attending antenatal clinics at Jaffna Teaching Hospital. The descriptive survey research strategy was used in the study. The data was collected using an interviewer-administered questionnaire. A sample of four hundred pregnant women was selected from the women attending antenatal clinics of Jaffna Teaching Hospital using a systematic sampling technique. Collected data from the questionnaires were analysed using quantitative techniques in SPSS software. Correspondence analysis was performed to find out the association between the information sources that pregnant mothers used and other study variables. Most pregnant women (61%) searched for information either always or often. Publishing more information in the native languages of pregnant women on web-based and printed media is suggested to improve the easy accessibility of health information.

Dlamini and Dlamini (2024) ascertained that maternal health information handouts are used by midwives to facilitate health education of pregnant women during their antenatal care (ANC) period. South Africa's Saving Mothers Report 2014 showed that delay in accessing medical help, as a patient-related avoidable factor, accounted for 27% of maternal and neonatal mortality. The study was conducted at three primary health care (PHC) clinics (two PHC and one CHC [Community Health Care]) that provided ANC in the Msunduzi sub-district, KwaZulu-Natal, in 2019. It used a qualitative approach, and focus group discussions (FGDs) were conducted with 10 participants from each clinic. Data were transcribed and analysed using thematic analysis. This ascertained the perceptions of pregnant women attending ANC in the Msunduzi sub-district in Mgungundlovu District, towards the maternal health information handouts. The authors concluded that although the maternal information handouts were given to the mothers during their maternal health visits, few of them were aware of these handouts. New strategies should be employed to deliver this vital information, as suggested by mothers. The awareness of pregnant mothers about the information handouts contributes to the positive perinatal outcomes at clinic levels.

Gesese *et al.* (2023) investigated many developing countries maternal morbidity and mortality which are challenging issues. Increasing the knowledge of women about the danger signs of pregnancy is the first essential step to reduce the adverse outcomes of pregnancy and delay in deciding to seek obstetric care, which in turn improves early detection of obstetric complications. This study aimed to assess knowledge of danger signs of pregnancy and health-seeking action among pregnant women. A health facility-based cross-sectional study was conducted in public health facilities from1 March 2017 to 30 April 2017 on 414 pregnant mothers .Bivariate and multivariable logistic regression analyses were done to estimate the crude and adjusted odds ratio with a confidence interval of 95% and a *P* value of less than 0.05 considered statistically significant. The study concluded that the knowledge of pregnant

women about the danger signs of pregnancy was low, while the practice of the mothers in response to danger signs of pregnancy was encouraging. Therefore, it is needed to the empowerment of women by increasing access to get an education, especially for rural women.

Gaps Identified in the Literature

The purpose of the literature review was to identify the works of scholars in areas related to this study. The literature reviewed other information on health information needs of pregnant women. The area which the study examined includes conceptual, theoretical and empirical review. Significant amount of literature has so far been critiqued and extensively reviewed in this research work. It is obvious that different authors have begun to explore the application of these variables but the gap in the existing studies show that there is a dire need to understand the health information needs of pregnant women in rural area like Ede metropolis, Osun State, Nigeria. Literature reviewed reveals a seeming consensus among scholars on the claim that health information needs is important for pregnant women. No earlier study has been seen by the researchers on health information needs of pregnant women in Ede metropolis, Osun State, Nigeria as they exist in the literature. This is the justification for this study.

Methodology

The study adopted a quantitative survey research design. Quantitative survey research design is justified because it allows systematic collection and statistical analysis of numerical data from a large population, enabling the identification of patterns, relationships, and generalizable findings. A self-assessed structured questionnaire was developed by researchers to collect data from the respondents. The population for the study consists of all the pregnant women in the State Hospital Ede metropolis in Osun State. The researchers developed a self-assessed structured questionnaire to collect data from the respondents. Preliminary investigation of the hospital and the health records revealed that the hospital sees an average of 200 pregnant women per week. Therefore, the population of the study is 200 pregnant women. The convenience sampling technique was adopted, and a total of 128 respondents participated and completed the questionnaire, giving a response rate of 64%.

Data Analysis and Results

The results section presents the findings from the analysis, offering insights that address the research objectives and questions for this study.

Table 1: Frequency Distribution of Demographic Information of the Respondents

Demographic Information	**Labels**	**Frequency**	**Percentage (%)**
Age Range	20 years and below	48	37.5
	21 – 30	53	41.4
	31 – 40	20	15.6
	41 years and above	7	5.5
Academic Qualification	Below SSCE	59	46.1
	SSCE Level	48	37.5
	ND Holders	16	12.5
	HND/BSC holders	5	3.9
Occupation	Full Housewife	40	31.3
	Trading	56	43.7
	Employed	32	25
Number of Pregnancy	First Pregnancy	45	35.2
	Second to Fourth Pregnancy	58	45.3
	Above Fourth Pregnancy	25	19.5
Gestation Period	First Trimester	28	21.9

Second Trimester	48	37.5
Third Trimester	52	40.6

N = 128

Field Survey, 2025

From Table 1, the result shows that 53(41.4%) respondents were between the age range of 21 and 30 years, while only 7(5.5%) respondents were between the age range of 41 years and above. The result shows that 59(46.1%) respondents were below SSCE holders, while only 5(3.9%) were HND/BSc holders. The result shows that 56 (43.7%) respondents were into trading, while only 32(25) were employed. The result shows that 58(45.3%) respondents were carrying between the second and fourth pregnancy, while 25(19.5%) were carrying above the fourth pregnancy. The result shows that 52(40.6%) of the respondents were in their 52 (40.6) respondents were in their third trimester, while only 28(21.9) respondents were in their first trimester.

Table 2: Frequency Distribution of Health Information Needs of the Respondents

Health Information Needs	**YES (%)**
Environmental Cleanliness	128 (100%)
Immunization	128 (100%)
Disease Prevention and Control	128 (100%)
Personal Care	128 (100%)
Baby Care	128 (100%)
Information on Nutrition/Diet during Pregnancy	128 (100%)
Information after delivery	128 (100%)
Information on Family Planning	128 (100%)
Information on sexual relationships during Pregnancy	128 (100%)
Information on medication during Pregnancy	128 (100%)
Information on disease prevention and control during pregnancy	128 (100%)
Information on miscarriage	128 (100%)
Information on maternity	128 (100%)
Information on Labor and related matters	128 (100%)
Information on Breastfeeding	128 (100%)

N = 128

Field Survey, 2025

From Table 2, the result shows that all the respondents agreed that they need information on environmental cleanliness, immunisation, disease prevention and control, personal care, baby care, information on nutrition/diet during pregnancy, information after delivery, information on family planning, information on the sexual relationship during pregnancy, information on medication during pregnancy, information on disease prevention and control during pregnancy, information on miscarriage,information on maternity, information on labor and related matters, and information on breastfeeding. This result implies that all the respondents' need health information.

Table 3: Respondents' Health Information Sources

Health Information Sources	**Yes (%)**	**No (%)**
Doctors	128 (100%)	-
Nurses	128 (100%)	-
Pre-natal health education classes	128 (100%)	-
Television/Radio	92 (71.9)	36 (28.1%)
Friends/Family	126 (98.4)	2 (1.6%)
Books	19 (14.8%)	109 (85.2%)
Other Pregnant Women	120 (93.7%)	8(6.3%)
Newspaper or Magazines	52 (40.6%)	76 (59.4%)
Film/Slide Projection	49 (38.3%)	79 (61.7%)
Internet/ Social media	40 (31.3%)	88 (68.7%)
Bulletins/Newsletter	58 (45.3%)	70 (54.7%)
Library	23(18%)	105 (82%)

N = 128

Field Survey, 2025

From Table 3, the result shows that 128(100%) respondents used Doctors, Nurses, and pre-natal health education classes as their sources of health information needed during pregnancy, respectively. The result further shows that 92(71.9%) respondents used television/radio, 126(98.4%) respondents used friends/family, 19 (14.8%) respondents used books, 120(93.7%) respondents used other pregnant women, 52(40.6%) respondents used newspapers, 49(38.3%) respondents used film/slide projection, 40(31.3%) respondents used Internet/social media, 58(45.3%) used bulletins/newspaper, and 23(18%) respondents used library.

Table 4: Challenges Faced by the Respondents Seeking Access to Health Information

Challenges	**Strongly Agreed (%)**	**Agreed (%)**	**Disagreed (%)**	**Strongly Disagreed (%)**
Financial problem	115 (89.8%)	8 (6.3%)	-	5 (3.9%)
Lack of awareness of the existence of information	115 (89.8%)	5 (3.9%)	5 (3.9%)	3 (2.3%)
Lack of time	125 (97.6%)	3 (2.3%)	-	-
Lack of access to mobile phones	105 (82%)	14 (10.9%)	5 (3.9%)	4 (3.1%)
It is too far to get to the clinic	112 (87.5%)	8 (6.25%)	5 (3.9%)	3 (2.3%)
My elders think their advice is enough	120 (93.8%)	5 (3.9%)	3 (2.3%)	-
Ignorance from the pregnant women	122 (95.3%)	5 (3.9%)	1 (0.8%)	-

N = 128

Field Survey, 2025

From Table 4, the result shows that 115(89.8%) respondents strongly agreed they faced financial problems. The result shows that 103(80.5%) respondents strongly agreed that they were faced with the high cost of information. The result shows that 125 (100%) respondents strongly agreed they did not

have time. The result shows that 105(82%) respondents strongly agreed that they lack access to mobile phones. The result shows that 112(87.5%) respondents strongly agreed it was too far to get to the clinic. The result shows that 120(93.8%) respondents strongly agreed that their elders think their advice was enough. The result shows that 122(95.3%) respondents strongly agreed that they were Ignorant of pregnant women. This result implies that many of the respondents are faced with some challenges in accessing health information.

Discussion of the Findings

The findings from this study show that all the pregnant women needed health information on environmental cleanliness, immunisation, disease prevention and control, personal care, baby care, information on nutrition/diet during pregnancy, information after delivery, information on family planning, information on the sexual relationship during pregnancy, information on medication during pregnancy, information on disease prevention and control during pregnancy, information on miscarriage, information on maternity, information on labor and related matters, and information on breast feeding.This finding agrees with Akindeji *et al.*(2020) who investigated the information needs and seeking behaviour of pregnant women in selected hospitals in Ile-Ife Metropolis, Osun State and reported that information needs of pregnant women in Ile-Ife include breastfeeding, disease prevention and control, environment cleanliness, after delivery, sickness during pregnancy and immunization. Beyond pregnancy, they express the need for guidance on postnatal care, including family planning, breastfeeding, and sexual relationship during and after pregnancy. Understanding the safe use of medication, recognising signs of miscarriage, and having accurate knowledge on labor, delivery, and maternity services are also identified as critical areas (National Institute for Health and Care Excellence [NICE], 2021). This holistic information equips pregnant women to make informed decisions, promotes safe motherhood, and enhances their ability to care for themselves and their babies effectively.

The study revealed that pregnant women primarily relied on doctors, nurses, and prenatal health education classes as their key sources of health information during pregnancy. This aligns with previous research, highlighting the importance of healthcare professionals in providing trusted and accurate maternal health information (Grimes, Forster & Newton, 2024). Doctors and nurses were frequently cited as the most credible and accessible sources, offering personalized guidance on prenatal care, nutrition, medication safety, and fetal development. This trust in formal healthcare providers maystem from their perceived expertise and direct involvement in maternal health services (Zaman *et al.* (2025). Furthermore, prenatal health education classes were also widely used, serving as structured platforms for disseminating critical information on pregnancy and childbirth. These classes not only enhanced knowledge but also empowered women to make informed health decisions and engage more confidently in their maternity journey (Gagnon & Sandall, 2017). The findings underscore the essential role of professional and organised health education in meeting pregnant women's informational needs, suggesting that strengthening these avenues could further improve maternal outcomes. The finding of this study also corroborated Akindeji *et al.*(2020) who concludes that pregnant women in Ile-Ife seek their information through asking doctor, health workers or paramedical staff. This study also supported Vogels-Broeke *et al.* (2022) who reported that majority pregnant women most used midwives as their information sources.

The findings of this study reveal that pregnant women encountered several challenges in accessing vital health information during pregnancy. One of the predominant barriers identified was financial difficulty, which hindered their ability to afford transportation to health centers or purchase data for accessing digital platforms containing maternal health information (Maitanmi *et al.,* 2023). Moreover, a significant number of women were not aware of the existence of specific health information services or educational resources, indicating a gap in awareness and outreach by healthcare providers and government programmes (Okereke *et al.,* 2019). Time constraints due to household responsibilities and work commitments also posed a limitation, making it difficult for women to attend health education sessions or prenatal classes (Fagbamigbe & Idemudia, 2025). Additionally, limited access to mobile phones and digital devices further exacerbated the challenge, particularly in rural areas where women often relied on their spouses or others for access to such technology (Okonofua *et al.* (2023). These findings highlight the need for more inclusive and accessible maternal health information systems,

especially for women in low-resource settings. This finding also agreed with Amusan *et al.* (2022), who reported that pregnant women were faced with various challenges in accessing nutrition and dietetics information; the most common challenges are the high cost of accessing information and the high cost of information, which constitutes their low level of access to the information need.

Conclusion

Based on these findings, the study concluded that the importance of providing comprehensive health information to pregnant women at State Hospital Ede in Osun State cannot be overstated. Access to accurate and timely health information empowers expectant mothers to make informed decisions about their health and that of their unborn babies. It plays a crucial role in promoting safe pregnancies, preventing complications, encouraging proper nutrition, and fostering awareness of personal and neonatal care. Moreover, educating pregnant women on topics such as immunization, family planning, labor, breastfeeding, and postnatal care contributes to better maternal and child health outcomes, ultimately reducing maternal and infant mortality rates in the region.

Recommendations

Based on the findings of the study, the following recommendations were made:

1. Comprehensive and timely health information covering environmental cleanliness, immunization, disease prevention and control, personal care, baby care, nutrition during pregnancy, postnatal care, family planning, sexual health during pregnancy, medication use, miscarriage, maternity, labor, and breastfeeding should be made readily accessible to pregnant women to promote their well-being and that of their babies at State Hospital Ede, Osun State.
2. Healthcare providers, especially doctors and nurses, should continue to strengthen prenatal health education classes and maintain open communication channels with pregnant women, as they are the primary and most trusted sources of health information during pregnancy at State Hospital Ede, Osun State.
3. Targeted interventions be implemented to address the challenges pregnant women face in accessing vital health information through improved outreach, education, and accessible communication channels at State Hospital Ede, Osun State.

REFERENCES

Akindeji, N. Y., Jimoh, O. R., Isiaka, I., Isiwele-Ishola, R. O., Ishola, B. C. (2020). Information needs and seeking behaviour of pregnant women in selected hospitals in Ile-Ife Metropolis, Osun State, Nigeria. *Library Philosophy and Practice*, 1-20. https://digitalcommons.unl.edu/libphilprac/4495

Almoajel, A., & Almarqabi, N. (2016). Online health-information seeking behavior among pregnant women in prenatal clinics at King Saud Medical City, Riyadh. *Journal of Womens Health, Issues and Care*, *3*(2), https://doi.org/10.4172/2325-9795. 1000228

Amusan B. B., Akpobasah-Amugen S., & Sulaiman B. O. (2022). Nutrition and dietetics information needs and source preferences of nursing mothers in Ede metropolis, Osun State. *Middlebelt Journal of Library and Information Science, 20*, 22-32. https://www.mbjlisonline.org/index.php/jlis/article/view/173/160

Bahri Khomami, M., Walker, R., Kilpatrick, M., de Jersey, S., Skouteris, H., & Moran, L. J. (2021). The role of midwives and obstetrical nurses in the promotion of healthy lifestyle during pregnancy. *Therapeutic Advances in Reproductive Health*, *15*, 1-12. https://doi.org/10.1177/26334941211031866

Berglund, A., & Lindmark, G. (2016). Preconception health and care (PHC): A strategy for improved maternal and child health. *Upsala Journal of Medical Sciences*, *121*(4), 216-221. https://doi.org/10.1080/03009734.2016.1191564

Bianchi, C. M., Huneau, J. F., Le Goff, G., Verger, E. O., Mariotti, F. & Gurviez, P. (2016). Concerns,

attitudes, beliefs and information seeking practices withrespect to nutrition-related issues: A qualitative study in French pregnant women. BMC pregnancy and childbirth. *Journal of the University Librarians Association of Sri Lanka*, *16* (1), 2-14. https://doi.org/10.1186/s12884-016-1078-6

Blandford, A., & Attfield, S. (2022). *Interacting with information*. Springer Nature. https://link.springer.com/book/10.1007/978-3-031-02189-3

Chalak, A. M., & Riahi, A. (2017). Information needs of pregnant women referred to health centers in Behshahr city within 2016-2017. *Journal of Community Health Research, 6*(3), 165-74.https://applications.emro.who.int/imemrf/689/J-Comm unity-Health-Res-2017-6-3-165-174-eng.pdf

Clarke, M. A., Moore, J. L., Steege, L. M., Koopman, R. J., Belden, J. L., Canfield, S. M., ...,

& Kim, M. S. (2016). Health information needs, sources, and barriers of primary care patients to achieve patient-centered care: A literature review. *Health Informatics Journal*, *22*(4), 992-1016. https://doi.org/10.1177/14604582156029 39

Dlamini, T. M., & Dlamini, S. (2024). Perspectives of pregnant women on maternal health information handouts at KwaZulu-Natal sub-district. *African Journal of Primary Health Care & Family Medicine*, *16*(1), 1-8. https://doi.org/10.4102/phc fm.v16i1.4158

Downe, S., Finlayson, K., Tunçalp, Ö.,& Metin Gülmezoglu, A. (2016). What matters to women: A systematic scoping review to identify the processes and outcomes of antenatal care provision that are important to healthy pregnant women. *BJOG: An International Journal of Obstetrics & Gynaecology*, *123*(4), 529-539. https:// doi.org/10.1111/1471-0528.13819

Du, J. W., & Jin, L. H. (2025). Research progress on information needs of perinatal women. *Nurs Commun*, *9*, 1-7. https://doi.org/10.53388/IN2025002

Ezeabasili, A. C. (2024). Health information needs and risk health behaviors of pregnant women in Anambra State, Nigeria. *Journal of Medical Library and Information Science, 5*(51), 1-10. https://doi.org/10.22037/jmlis.v5i.44327

Fagbamigbe, A. F., & Idemudia, E. S. (2015). Barriers to antenatal care use in Nigeria: evidences from non-users and implications for maternal health programming. *BMC Pregnancy and Childbirth*, *15*(1), 95. https://doi.org/10.1186 /s12884-015-0527-y.

Fourie, I., & Akanbi, O. M. (2018). Information needs of pregnant women–once-off needs and needs for information monitoring revealed by the McKenzie two-dimensional model. *Innovation Journal of Appropriate Librarianship and Information Work in Southern Africa*, *56,*163-190. https://repository.up.ac.za/ server/api/core/bitstreams/52b80d51-eae9-45ca-9a0e-cfb10f7cfd7d/content

Othman, A. (2024). The effects of pregnancy and childbirth on women's health-related quality of life: A scoping review. *Evidence-Based Nursing Research*, *6*(1), 39-52. https://doi.org/10.47104/ebnrojs3.v6i1.321

Gagnon, A. J., & Sandall, J. (2017). Individual or group antenatal education for childbirth or parenthood, or both. *Cochrane Database of Systematic Reviews*, *3*. https:// doi.org/10.1002/14651858.CD002869.pub2.

Gangakhedkar, G. R., & Kulkarni, A. P. (2021). Physiological changes in pregnancy. *Indian Journal of Critical Care Medicine,25*(3), 189- 192. 10.5005/jp-journals-10071-24039

Gavine, A., Shinwell, S. C., Buchanan, P., Farre, A., Wade, A., Lynn, F., ...& McFadden, A. (2022). Support for healthy breastfeeding mothers with healthy term babies. *Cochrane Database of Systematic Reviews 10*(10). https://doi.org/10. 1002/14651858.CD001141.pub6

Gesese, S. S., Mersha, E. A., & Balcha, W. F. (2023). Knowledge of danger signs of pregnancy and health-seeking action among pregnant women: A health facility-based cross-sectional study. *Annals of Medicine and Surgery*, *85*(5), 1722-1730. https://doi.org/10.1097/MS9.0000000000000610

Ghiasi, A. (2021). Health information needs, sources of information, and barriers to accessing health information among pregnant women: A systematic review of research. *The Journal of Maternal-Fetal & Neonatal Medicine*, *34*(8), 1320-1330 https://doi.org/10.1080/ 14767058.2019.1634685

Hansen, M. H., Mørkved, H. S., Austad, B., Vie, G. Å., Getz, L. O., & Mjølstad, B. P. (2025). Worries and information seeking during pregnancy: A cross-sectional study among 1402 expectant Norwegian women active on social media platforms. *Scandinavian Journal of Primary Health Care*, *43*(2), 488–499. https://doi.org/10.1080/02813432.2025.2461036

Grimes, H. A., Forster, D. A., & Newton, M. S. (2024). Sources of information used by women during pregnancy to meet their information needs. *Midwifery*, *30*(1), 26-33. https://doi.org/10.1016/j.midw.2013.10.007

Higginbottom, G. M. A., Evans, C., Morgan, M., Bharj, K. K., Eldridge, J., & Hussain, B. (2019). Experience of and access to maternity care in the UK by immigrant women: A narrative synthesis systematic review. *BMJ Open*, *9*(12), 029478.https://doi.org/10. 1136/bmjopen-2019-029478

Huong, N. T. D., Loan, P. T. T., Diep, P. B., Giang, K. B., & Toan, D. T. T. (2024). Barriers to health information-seeking behaviors within pregnant women in Hanoi obstetrics and gynecology hospital in 2023. *Journal of Control Vaccines and Biologicals*, *4*(3). https://doi.org/10.56086/jcvb.v4i3.164

Javanmardi, M., Noroozi, M., Mostafavi, F., & Ashrafi-Rizi, H. (2020). Exploring women's Health information needs during pregnancy: A qualitative study. *Journal of Family & Reproductive Health*, *14*(4), 252-258. https://doi.org/10.18502/jfrh .v14i4.5209

Kamali, S., Ahmadian, L., Khajouei, R., & Bahaadinbeigy, K. (2018). Health information needs of pregnant women: Information sources, motives and barriers. *Health Information & Libraries Journal*, *35*(1), 24-37. https://doi.org/10.1111/hir.12200

Kandjimi, E. (2021). *Effects of the shortage of midwives on performance and quality of care, in maternity ward, Rundu Intermediate hospital and Nyangana district hospital, Kavango East region* (Doctoral dissertation, University of Namibia). https://repository.unam.edu.na/server/api/core/bitstreams/badca12a-e285-4751-bf94-d7ec6f0419bd/content

Khouj, M. A., Albasri, S., Albishri, A. A., Softa, S. M., Almaslamani, A. S., & Ahmad, H. M. (2022). Prevalence of stress, anxiety, and depression among pregnant women in Jeddah. *Cureus*, *14*(7), 27174. https://doi.org/10.7759/cureus.27174

Lagadec, N., Steinecker, M., Kapassi, A., Magnier, A. M., Chastang, J., Robert, S., ...& Ibanez, G. (2018). Factors influencing the quality of life of pregnant women: A systematic review. *BMC Pregnancy*

and Childbirth, *18*, 1-14. https://doi.org/10.1186/s12884-018-2087-4

Maitanmi, B. T., Adelaja, A. A., Okunola, D. R., Maitanmi, J. O., Tola, Y. O., & Akingbade, O. (2023). Association between socioeconomic status and the utilisation of maternal health Services in Nigeria. *Iranian Journal of Nursing and Midwifery Research*, *28*(5), 514-519. https://doi.org/10.4103/ijnmr.ijnmr_61_22.

Mulauzi, F., & Daka, K. L. (2018). Maternal health information needs of women: A survey of literature. *Journal of Lexicography and Terminology, 2*(1), 57-82. https://journals.unza.zm/index.php/jlt/article/view/17/13

Murugathas, K., Sritharan, T., & Santharooban, S. (2020). Health information needs and information seeking behavior of pregnant women attending antenatal clinics of Jaffna Teaching Hospital. *Journal of the University Librarians Association of Sri Lanka*, *23*(1), 73-90. https://doi.org/10.4038/jula.v23i1.7967

Mwangakala, H. A. (2016). *Pregnant women's access to maternal health information and I ts impact on healthcare utilisation behaviour in rural Tanzania* (Doctoral dissertation, Loughborough University). 1-324. https://core.ac.uk/download/pdf/ 288369839.pdfNational Institute for Health and Care Excellence (NICE). (2021). *Antenatal care for uncomplicated pregnancies*. https://www.nice.org.uk/guidance/ng201

Ojewole, F., & Oludipe, Y. O. (2017). Pregnancy-related information need and information-seeking pattern among pregnant women attending antenatal clinic at Ikorodu General Hospital, Lagos State, Nigeria. *European Scientific Journal, 13*(24), 436.https://doi.org/10.19044/esj.2017.v13n24p436

Okereke, E., Aradeon, S., Akerele, A., Tanko, M. N., & Yisa, I. (2019). Knowledge of safe motherhood among women in rural communities in Northern Nigeria. *Nigerian Journal of Clinical Practice*, *22*(6), 768–773.https://doi.org/10.1186/ 1742-4755-10-57.

Okolo, S. E. (2023). Information Need and Seeking Behaviour of Pregnant Women in Ughelli General Hospital, Delta State. *Library Philosophy and Practice (e-journal). 7931*. https://digitalcommons.unl.edu/libphilprac/7931

Okonofua, F., Ntoimo, L., Johnson, E., Sombie, I., Ojuolape, S., Igboin, B., ...& Adeniran, J. (2023). Texting for life: A mobile phone application to connect pregnant women with emergency transport and obstetric care in rural Nigeria. *BMC Pregnancy and Childbirth*, *23*(1), 139. https://doi.org/10.1186/s 12884-023-05424-9

Pascual, Z. N., & Langaker, M, D. (2023). Physiology, Pregnancy. https://www.ncbi.nlm.nih.gov/books/NBK559304/

Rezaee, R., Ravangard, R., Amani, F., Dehghani Tafti, A., Shokrpour, N., & Bahrami, M. A. (2022). Healthy lifestyle during pregnancy: Uncovering the role of online health information seeking experience. *PLoS One*, *17*(8), 0271989. https:// doi.org/10. 1371/journal.pone.0271989

Rivera, L., Butler, H., Salinas, K. E., Wade, C., Bazan, M., Larson, E., & Molina, R. L. (2024). Communication preferences during pregnancy care among patients with primary Spanish language: a scoping review. *Women's Health Issues*, *34*(2), 164-171.https://doi.org/10.1016/j.whi.2023.08.008

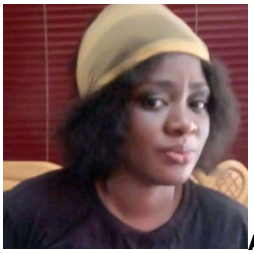
Shilinge, F. N. (2022). *Shortage of public sector health workers: A case study undertaken at a selected hospital in Windhoek, Namibia* (Doctoral dissertation, Cape Peninsula University of Technology). https://etd.cput.ac.za/handle/20. 500.11838/3791

Thomas, L. (2024). An overview of pregnancy. https://www.news-medical.net/health/ An-Overview-of-Pregnancy.aspx.

Vogels-Broeke, M., Daemers, D., Budé, L., de Vries, R., & Nieuwenhuijze, M. (2022). Sources of information used by women during pregnancy and the perceived quality. *BMC Pregnancy and Childbirth*, *22*(1), 1-12. https://doi.org/10.1186/ s12884-022-04422-7

Zaman, A., Fadlalmola, H. A., Ibrahem, S. E., Ismail, F. H., Abedelwahed, H. H., Ali, A. M., ... & Saad, A. M. (2025). The role of antenatal education on maternal self-efficacy, fear of childbirth, and birth outcomes: A systematic review and meta-analysis. *European Journal of Midwifery*, *9*, 1-16. https://doi.org/10.18332/ejm/ 200747

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