

Review paper

COVID-19 and Library Users: The Role of the Librarians

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ABSTRACT: COVID-19 is a pandemic infectious disease that spreads easily. The Coronavirus that causes COVID-19 spreads through human to human transmission by close contact via airborne droplets generating by coughing, sneezing, kissing and smooching. This paper examines the roles of the libraries in the dissemination of information in the face of this pandemic. To achieve this, the paper examined the origin of COVID-19, its mode of transmission, symptoms, prevention and the roles of librarians and information specialists. The paper further acknowledged the roles the libraries should play in every situation they find themselves

occasioned by the government in order to curtail the spread of the pandemic. This may be normal situation (ie no restriction); some restrictions; full closure; and preparing for reopening. The paper therefore, concludes that the librarians have important roles to play in the phase of this pandemic. This is because the librarians need to provide adequate, latest and accurate information regarding the pandemic, like: statistics on the rate of infections; possible development of vaccine; mode of infection, methods of prevention, etc.

Keywords: COVID-19, library, users, Librarians, role

INTRODUCTION

COVID-19 is the infectious disease caused by the most recently discovered coronavirus. This new virus and disease were unknown before the outbreak began in Wuhan, China, in December 2019. COVID-19 is now a pandemic affecting many countries globally (Andersen et al., 2020). The most common symptoms of COVID-19 are fever, dry cough, and tiredness. Other symptoms that are less common and may affect some patients include aches and pains, nasal congestion, headache, conjunctivitis, sore throat, diarrhea, loss of taste or smell or a rash on skin or discoloration of fingers or toes (Nauven, 2020). These symptoms are usually mild and begin gradually. Some people become infected but only have very mild symptoms (Nauven, 2020).

Most people (about 80%) recover from the disease without needing hospital treatment. Around 1 out of every 5 people who gets COVID-19 becomes seriously ill and develops difficulty breathing. Older people, and those with underlying medical problems like high blood pressure, heart and lung problems, diabetes, or cancer, are at higher risk of developing serious illness. However, anyone can contract COVID-19 and become seriously ill. People of all ages who experience fever and/or cough associated with difficulty breathing/shortness of breath, chest pain/pressure, or loss of speech or movement should seek medical attention immediately. If possible, it is recommended to call the health care provider or facility first, so the patient can be directed to the right clinic

(UNESCO, 2020). People can contact COVID-19 from others who have the virus. The disease spreads primarily from person to person through small droplets from the nose or mouth, which are expelled when a person with COVID-19 coughs, sneezes, or speaks. These droplets are relatively heavy, do not travel far and quickly sink to the ground (Andersen et al., 2020). People can contact COVID-19 if they breathe in these droplets from a person infected with the virus. This is why it is important to stay at least 1 meter away from others. These droplets can land on objects and surfaces around the person such as tables, doorknobs and handrails. People can become infected by touching these objects or surfaces, then touching their eyes, nose or mouth. This is why it is important to wash your hands regularly with soap and water or clean with alcohol-based hand rub (Wikipedia, 2020).

COVID-19 is mainly spread through respiratory droplets expelled by someone who is coughing or has other symptoms such as fever or tiredness. Many people with COVID-19 experience only mild symptoms. This is particularly true in the early stages of the disease. It is possible to contact COVID-19 from someone who has just a mild cough and does not feel ill (IFLA, 2020).

Some reports have indicated that people with no symptoms can transmit the virus. It is not yet known how often it happens. WHO is assessing ongoing research on the topic and will continue to share updated findings (Chen et al., 2020).

Practicing hand and respiratory hygiene is important at all times and is the best way to protect others and yourself (Nigeria Centre for Disease Control, 2020). When possible, maintain at least a 1 meter distance between yourself and others. This is especially important if you are standing by someone who is coughing or sneezing. Since some infected persons may not yet be exhibiting symptoms or their symptoms may be mild, maintaining a physical distance with everyone is a good idea if you are in an area where COVID-19 is circulating. If you have been in close contact with someone with COVID-19, you may be infected. Close contact means that you live with or have been in settings of less than 1 metre from those who have the disease. In these cases, it is best to stay at home (Wu and McGoogan, 2020)

However, if you live in an area with malaria or dengue fever it is important that you do not ignore symptoms of fever. Seek medical help. When you attend the health facility wear a mask if possible, keep at least 1 metre distant from other people and do not touch surfaces with your hands. If it is a child who is sick help the child stick to this advice (Wu and McGoogan, 2020). According to Holshue et al. (2020), If you do not live in an area with malaria or dengue fever please do the following:

(i) If you become ill, even with very mild symptoms you

must self-isolate.

(ii) Even if you don't think you have been exposed to COVID-19 but develop symptoms, then self-isolate and monitor yourself.

(iii) You are more likely to infect others in the early stages of the disease when you just have mild symptoms, therefore early self-isolation is very important.

(iv) If you do not have symptoms, but have been exposed to an infected person, self-quarantine for 14 days.

If you have definitely had COVID-19 (confirmed by a test) self-isolate for 14 days even after symptoms have disappeared as a precautionary measure – it is not yet known exactly how long people remain infectious after they have recovered. Follow national advice on self-isolation. Stay aware of the latest information on the COVID-19 outbreak, available on the WHO website and through your national and local public health authority. Most countries around the world have seen cases of COVID-19 and many are experiencing outbreaks. Authorities in China and some other countries have succeeded in slowing their outbreaks. However, the situation is unpredictable so check regularly for the latest news (Nauven, 2020).

You can reduce your chances of being infected or spreading COVID-19 by taking some simple precautions:

(i) Regularly and thoroughly clean your hands with an alcohol-based hand rub or wash them with soap and water. Why? Washing your hands with soap and water or using alcohol-based hand rub kills viruses that may be on your hands.

(ii) Maintain at least 1 metre distance between yourself and others. Why? When someone coughs, sneezes, or speaks they spray small liquid droplets from their nose or mouth which may contain virus. If you are too close, you can breathe in the droplets, including the COVID-19 virus if the person has the disease.

(iii) Avoid going to crowded places. Why? Where people come together in crowds, you are more likely to come into close contact with someone that has COVID-19 and it is more difficult to maintain physical distance of 1 metre.

(iv) Avoid touching eyes, nose and mouth. Why? Hands touch many surfaces and can pick up viruses. Once contaminated, hands can transfer the virus to your eyes, nose or mouth. From there, the virus can enter your body and infect you.

(v) Make sure you, and the people around you, follow good respiratory hygiene. This means covering your mouth and nose with your bent elbow or tissue when you cough or sneeze. Then dispose of the used tissue immediately and wash your hands. Why? Droplets spread virus. By following good respiratory hygiene, you protect the people around you from viruses such as cold, flu and COVID-19.

(vi) Stay home and self-isolate even with minor symptoms such as cough, headache, mild fever, until you recover. Have someone bring you supplies. If you need to leave your house, wear a mask to avoid infecting others. Why? Avoiding contact with others will protect them from possible COVID-19 and other viruses.

(vii) If you have a fever, cough and difficulty breathing, seek medical attention, but call by telephone in advance if possible and follow the directions of your local health authority. Why? National and local authorities will have the most up to date information on the situation in your area. Calling in advance will allow your health care provider to quickly direct you to the right health facility. This will also protect you and help prevent spread of viruses and other infections.

(viii) Keep up to date on the latest information from trusted sources, such as WHO or your local and national health authorities. Why? Local and national authorities are best placed to advise on what people in your area should be doing to protect themselves.

While some western, traditional or home remedies may provide comfort and alleviate symptoms of mild COVID-19, there are no medicines that have been shown to prevent or cure the disease. WHO does not recommend self-medication with any medicines, including antibiotics, as a prevention or cure for COVID-19. However, there are several ongoing clinical trials of both western and traditional medicines. WHO is coordinating efforts to develop vaccines and medicines to prevent and treat COVID-19 and will continue to provide updated information as soon research results becomes available.

Zhou et al. (2020) submitted that the most effective ways to protect yourself and others against COVID-19 are to:

- (i) Clean your hands frequently and thoroughly
- (ii) Avoid touching your eyes, mouth and nose
- (iii) Cover your cough with the bend of elbow or tissue. If a tissue is used, discard it immediately and wash your hands.
- (iv) Maintain a distance of at least 1 metre from others.

A BRIEF HISTORY OF SPREADING OF 2019-NCOV /COVID-19

A brief history of spreading of 2019-NCOV /COVID-19 as compiled by WHO (2020) revealed that On 31 Dec. 2019, China, East Asia, most populated country in the world informed WHO regarding pneumonia cases with unknown etiology. Till 3 Jan. 2020 a total of 44 pneumonia cases were detected. On 7 Jan 2020, Chinese research authorities announced that they have isolated new virus from sea food market in Wuhan city; Named 2019-nCoV. On 13 Jan. 2020 Ministry of public health Thailand reported 01 patient from Wuhan, China.

On 15 Jan. 2020, the ministry of health, labor and welfare of Japan reported first case from Wu-han China. On 20 Jan. 2020, National IHR Focal point from the Korea reported first case of 2019-nCoV in Korea. On 23 Jan. 2020, United State of America confirmed first case of 2019-nCoV in America. On 24 Jan. 2020, Vietnam reported First case of human to human transmission of corona virus. On 24 Jan. 2020, the government of Singapore confirmed First case of 2019-nCoV. On 25 Jan. 2020, the government of Australia, federal democratic republic of Nepal and French republic confirmed first case of 2019-nCoV. Other countries also detected and reported the cases of 2019-nCoV as On, 26 Jan. 2020 (Malaysia), 27 Jan. 2020 (Canada), 28 Jan. 2020 (Cambodia, Ger-many, Sri Lanka), 29 Jan. 2020 (United Arab Emirates), 30 Jan. 2020 (Philippines, India , Finland), 31 Jan. 2020 (Italy), 1 Feb. 2020 (Russian Federation, Spain, Sweden, United Kingdom), 5 Feb. 2020 (Belgium), 6 Feb. 2020 (Japan), 15 Feb. 2020 (Egypt).etc.

ROLES OF LIBRARIANS AND INFORMATION SPECIALISTS IN COVID-19 PANDEMIC

According to the African Library and Information Associations and Institutions (2020), the roles of librarians and information specialists in COVID-19 pandemic is:

- (a) To promote public health awareness by creating and disseminating information relating to preventive measures.
- (b) To support research team, researchers and faculty by providing information regarding the latest developments, research and literature.
- (c) To meet the core needs of regular library users.

Libraries in different parts of the world are facing very different situations, from broadly maintaining a full service to complete closure. Drawing on experience around the world, libraries and librarians are finding themselves in one of a number of situations - in an attempt to curtail the spread of the pandemic (COVID-19): this paper explains the role the librarians should adopt during and after the pandemic is over.

In the case of no restrictions: in some countries, cases of the virus have been limited and governments have not taken any specific measures. Nonetheless, normal recommendations around good hygiene apply. In this situation, libraries are, for example:

- (i) Ensuring access to soap and warm water.
- (ii) Ensuring they have a supply of hand sanitizer.
- (iii) Keeping surfaces clean, including toys and library computers.

(iv) Ensuring that staff and users are encouraged to take time to recover if they are feeling ill, rather than coming in to work.

(v) Providing pages with useful links to reliable information for users on their websites and promoting media literacy faced with potential misinformation online.

In the case of some restrictions: there are more cases, and governments are beginning to act in order to limit larger events, as well as actively encouraging people to take extra measures to protect hygiene. In this situation, libraries are, for example:

(a) Reconsidering programming such as story times or workshops, especially for groups at risk such as older users. Additional efforts to ensure hygiene, including through disinfecting hard surfaces. Removing riskier items such as toys or virtual reality headsets from circulation.

(b) Considering whether to close study spaces where people may spend a longer time in the company of others.

(c) Preparing for potential further restrictions, for example by ensuring that all staff have the skills and tools to work remotely (if this is possible) and that services, as far as possible, can still be provided digitally.

In the case of minimal service: in many countries there are stricter measures still, with tougher limits on public gatherings, specific warnings for people at risk, and closures in the most affected regions. In these situations, libraries are, for example:

(a) Fully closing spaces and only offering the possibility to borrow or return books at a counter, or via a book drop. Some countries are experimenting with drive-through pick-up and return of books. Others are only allowing visitors who have pre-booked.

(b) Implementing quarantine policies on returned books (see below for further details).

(c) Implementing plans to offer remote services for example e-Lending, e-Learning, or support to remote teaching.

(d) Finalizing and testing measures for all staff to work remotely and allowing those who can to do so already.

In the case of Full closure: where measures are strictest, libraries have either been forced to close, or have chosen to do so following consideration of the risks to users and staff. In these situations, libraries are, for example:

(i) Ensuring that all staff working from home unless completely necessary. Where staff are coming into work, ensuring that they can do so while respecting rules around social distancing.

(ii) Librarians are being reassigned to other duties in other departments within their municipalities, for example using information management skills to support health and social services.

(iii) Providing ongoing communication with users about opportunities to use library resources or services.

Organizing digital story-times where copyright permits

(i) Promoting use of digital libraries and other tools - including potentially investing in more content/licenses.

(ii) Offering an amnesty on borrowed physical books, and increasing the number of eBooks users can borrow.

(iii) Making library spaces and equipment available for other activities, such as printing personal protective equipment.

(iv) Raising awareness of digital offers, both on the front pages of their websites, and through putting up posters in the windows of library buildings.

Preparing for re-opening: in a number of countries, there are already steps towards lifting restrictions, at least partially, with libraries potentially part of this. Timings remains uncertain, and clearly safety should be a priority. In this situation, libraries are:

(i) Starting to make plans for gradual reopening when rules, permissions and library buildings and resources themselves permit this to happen safely, and making necessary changes to library policies. Carrying out a risk assessment, focused both on library activities and the wider situation, can be a key part of this.

(ii) Setting limits on numbers of people using the library at any one time, and establishing how to enforce these (for example through advanced booking, ticketing, or using other means of counting numbers of users), as well as preventing situations where people may gather closely together, for example using one-way systems, limiting furniture, keeping reading rooms closed, or continuing to postpone programming, and keeping toilets closed.

(iii) Implementing regular cleaning processes (including through short closures of the library), especially focused on surfaces where the virus appears to be able to last for longest (plastics, metals other than copper), or at least intensifying clearing.

Developing click-and-collect or drive-through services in order to allow access to books without human contact:

(i) Developing protocols for how to respond if someone Ensuring that staff have the equipment and training necessary to stay safe, including consideration of screens if necessary, limiting contact as far as possible and enabling work from home for as long as possible, and provide regular updates.

(iv) Making with symptoms is identified in the library.

(ii) clear when it is impossible to open safely, and

otherwise ensuring that those taking decisions understand the nature of library spaces, including through a gradual approach to resuming services only when each one is safe.

(v) Continuing to promote online services and resources in order to limit numbers looking to visit the library.

(vi) Communicate clearly about all any new rules to library users, both online and onsite, and provide regular updates.

(vii) Ensuring that plans are in place for a potential return to lock-down in case of new peaks in infection rates

CONCLUSION

The main role of librarians and information specialists in a pandemic is to promote public health awareness by creating and disseminating information relating to preventive measures. For better dissemination of information, especially in a time of great need for accurate health-related information resources, libraries should establish working relationships with health agencies and communication organizations with the objective of cooperative developments of collections, referrals and information shared and learning for users. Librarians should also adapt to any form of restriction, (as highlighted above) and perform their duties creditably- especially in this era of COVID-19 pandemic.

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