Information Needs and Seeking Behaviour of Internally Displaced Caregivers in Maiduguri, Borno State, Nigeria

Philip Gana MALGWI[1], PhD, Hauwa AHMED[2] PhD, Hauwa SADIQ[3], Shade Odunola BABATUNDE[4]

[1]Department of Library and Information Science, Federal University Otuoke, Bayelsa State
[2&3]Ramat Library, University of Maiduguri, Borno State
[4]Osun State Polytechnic, Iree, Osun State

Corresponding Author: philmalgwi@gmail.com

Abstract

Non-Governmental Organisations (NGOs) play a critical role in supporting vulnerable individuals, particularly in conflict-affected environments where access to healthcare and structured information systems is limited. In Maiduguri, Borno State, many female caregivers residing in micro Internally Displaced Persons (IDP) settlements face significant challenges in accessing reliable information required for effective caregiving. This study examined the information needs and information-seeking behaviour of caregivers in Maiduguri, Borno State, Nigeria. The study adopted a descriptive survey research design. The population comprised caregivers attending selected Outpatient Therapeutic Programme (OTP) sites within micro IDP settlements in Maiduguri. Over 1000 households were targeted, of which only lactating mothers visiting the OTP were purposively sampled for the study, thus comprising 185 caregivers. With the help of two research assistants, data were collected using a structured questionnaire and analysed using descriptive statistics, including frequency counts, percentages, mean scores, and standard deviations. The findings revealed that caregivers primarily needed information on disease management (28.1%), medication use (20.5%), hygiene and sanitation (16.2%), nutrition and feeding (14.6%), and access to healthcare services (11.9%). Health professionals (78.0%), community members/peers (70.3%) and radio (64.9%) were the most available and frequently consulted information sources. The study further showed that caregivers' information-seeking behaviour was largely situational and driven by immediate caregiving needs rather than routine information seeking. The study concluded that caregivers in Maiduguri have predominantly health-related information needs and exhibit a situational, need-driven information-seeking behaviour. Their reliance on health professionals, community networks, and radio underscores the importance of accessible and trusted information sources in conflict-affected settings. The study recommends strengthening caregiver education programmes, community health information networks, and accessible health communication channels to improve information access and caregiving outcomes.

Keywords: Information Needs, Information-Seeking Behaviour, Caregivers, Internally Displaced Persons

Introduction

Information-seeking behaviour refers to the activities and strategies individuals employ to identify, locate, access, and use information needed to address specific problems or make informed decisions. It is a fundamental aspect of human information behaviour and is often triggered by the recognition of an information need. Information needs arise when individuals perceive a gap between what they know and what they need to know to perform a task effectively (Wilson, 2000). Consequently, the nature and urgency of information needs influence how, where, and from whom information is sought. In caregiving situations, information-seeking behaviour is particularly important because caregivers require timely and accurate information to make decisions that affect the health and well-being of those under their care. Non-Caregivers play a vital role in supporting vulnerable individuals, particularly in environments where access to formal healthcare systems and structured information services is limited. Their responsibilities extend beyond routine assistance to include monitoring health conditions, administering medications, ensuring proper hygiene, managing nutrition, and providing emotional and psychological support. Their responsibilities extend beyond routine assistance to include monitoring health conditions, administering medications, ensuring proper hygiene, managing nutrition, and providing emotional and psychological support. These responsibilities are not only physically demanding but also cognitively intensive, requiring caregivers to make informed decisions daily. Consequently, access to accurate, timely, and relevant information becomes a fundamental requirement for effective caregiving (World Health Organisation, 2021).

In conflict-affected regions, caregiving becomes significantly more complex due to infrastructural disruption, displacement, and weakened institutional systems. In Maiduguri, years of insurgency have resulted in large-scale displacement of populations, leading to the emergence of both formal camps and informal micro settlements (International Organisation for Migration, 2023; United Nations Development Programme, 2022). While some internally displaced persons have returned to their original communities, a considerable number of caregivers continue to reside in dispersed settlements within the metropolis. These settlements are often characterised by overcrowding, limited healthcare access, poor sanitation, and inadequate communication infrastructure (International Organisation for Migration, 2023). Within these environments, caregivers operate under conditions of uncertainty and constraint. Healthcare services are often overstretched, and access to professional guidance may be irregular. As a result, caregivers are frequently required to rely on their own judgment and available information to manage health conditions and respond to emergencies. Information, therefore, becomes not only a support tool but a critical resource that directly influences caregiving outcomes (United Nations High Commissioner for Refugees, 2021).

In caregiving contexts, information needs are often immediate and practical, including information on disease management, medication use, hygiene practices, nutrition, and access to healthcare services. According to Wilson (2000), information behaviour is shaped by contextual variables such as environment, accessibility of resources, and social conditions. In similar terms, Kuhlthau (1994) explains that information seeking is influenced by uncertainty and emotional factors, which are often heightened in stressful caregiving situations. Recent studies have demonstrated that caregivers across different contexts exhibit diverse information needs that are largely health-related. For instance, caregivers require information on medication, nutrition, disease management, and available health

services. A study conducted in Nigeria found that caregivers actively seek information from healthcare professionals because they are perceived as reliable and accessible sources (Nwagwu & Akanji, 2024). Similarly, global evidence indicates that caregivers managing health conditions such as childhood illnesses often depend on a combination of formal and informal information sources, with their choices influenced by accessibility and trust (Arias, So, Chen, and Moles, 2024).

However, access to reliable information in low-resource and conflict-affected settings remains uneven. Caregivers in Maiduguri often depend on informal networks such as community members, local health workers, and radio broadcasts due to limited access to digital technologies and structured information systems. While these sources are accessible, they may not always provide comprehensive or accurate information, thereby affecting the quality of caregiving practices. Despite the critical importance of caregivers in sustaining community health, there is limited empirical evidence focusing specifically on their information needs and information-seeking behaviour within micro internally displaced settlements in Maiduguri. Most existing studies tend to generalise displaced populations without isolating caregivers as a distinct group with unique information challenges. In this study, caregivers refer to lactating mothers residing in selected micro Internally Displaced Persons (IDP) settlements in Maiduguri who attend Outpatient Therapeutic Programme (OTP) centres and are primarily responsible for the day-to-day care, feeding, health monitoring, and well-being of children and other vulnerable household members. These caregivers serve as the principal decision-makers regarding health-related practices and information use within their households. This study, therefore, provides a focused examination of caregivers in Maiduguri to generate context-specific insights that can inform policy, practice, and intervention strategies.

Objectives of the Study

The objectives of this study were to:

1. determine the information needs of caregivers in Maiduguri, Borno State.
2. identify the information sources available to caregivers in Maiduguri, Borno State.
3. examine the frequency of information source consultation among caregivers in Maiduguri, Borno State.

Research Questions

The following research questions guided the study:

1. What are the information needs of caregivers in Maiduguri, Borno State?
2. What information sources are available to caregivers in Maiduguri, Borno State?
3. What is the frequency of information source consultation among caregivers in Maiduguri, Borno State?

Literature Review

Information needs among caregivers are largely shaped by the nature of caregiving responsibilities and the health conditions of care recipients. Empirical studies consistently show that caregivers prioritise information that directly supports their daily caregiving tasks, particularly in health-related contexts.

Nwagwu and Akanji (2024) found that caregivers in Nigeria demonstrated a high demand for information related to disease management, medication use, and healthcare services. Similarly, Arias et al. (2024) reported that, caregivers managing childhood illnesses actively seek information on symptoms, treatment procedures, and preventive care. These findings align with earlier work by Adelman et al. (2014), which established that caregivers require continuous access to health information to manage complex care responsibilities. In another study, Washington, Meadows, Elliott and Koopman (2018) examined caregivers of patients with chronic illnesses and found that their information needs extended beyond clinical care to include emotional support and coping strategies. This indicates that caregiving is multidimensional, requiring both practical and psychosocial information. Likewise, Bangerter, Griffin and Dunlay (2019) reported that caregivers often struggle with gaps in knowledge about long term care and disease progression, which increases their dependence on accessible information sources.

Research by Chi, Demiris and Pike (2020) further revealed that caregivers frequently experience unmet information needs, particularly in areas related to healthcare navigation and decision-making. In low-resource settings, these unmet needs are often more pronounced due to limited access to formal information systems. Similarly, a study by Abaraogu, Ezenwankwo and Duru (2017) in Nigeria found that caregivers of stroke patients expressed strong needs for information on rehabilitation practices and home-based care. Studies on other populations provide additional insights into how information needs are shaped by context. For instance, research on university students shows that their information needs are primarily academic and research-oriented, influenced by institutional requirements and access to digital resources. In contrast, caregivers' information needs are immediate and survival-oriented, reflecting the urgency and responsibility associated with caregiving roles. Empirical evidence suggests that caregivers' information needs are practical, urgent, and closely tied to caregiving responsibilities. These needs are further shaped by environmental conditions, access to resources, and the nature of the health conditions being managed.

The sources of information available to caregivers are influenced by accessibility, trust, and the socio-environment. In many developing and conflict-affected settings, caregivers rely on a combination of formal and informal sources to meet their information needs. Nwagwu and Akanji (2024) found that healthcare professionals remain the most trusted source of information among caregivers due to their perceived credibility and expertise. Similarly, Arias et al. (2024) observed that caregivers frequently combine formal sources such as hospitals with informal sources such as family members and peers. Further studies reinforce this pattern. For instance, Jacobs et al. (2017) reported that caregivers often rely on interpersonal communication, particularly when access to formal information systems is limited. In the same vein, Stellefson et al. (2019) found that while digital sources are increasingly available, many caregivers still prefer face-to-face interactions with healthcare providers due to issues of trust and comprehension. In low-resource settings, traditional media also play a significant role. According to Andreas-Ibegbulem and Oji (2025), regular exposure to health-related radio programs significantly increases both awareness and the adoption of healthy practices in rural communities. Similarly, research on rural populations has shown that community networks and local leaders are important channels for disseminating information, especially where literacy levels are low (Andreas-Ibegbulem & Oji, 2025). Digital technologies are gradually influencing information access, although their use remains uneven. Alhassan et al. (2020) found that caregivers increasingly use mobile phones to access health information, but barriers such as cost, network availability, and digital literacy limit their effectiveness. This digital divide continues to shape how caregivers access and utilise information. Comparative studies on other

populations, such as farmers and students, reveal similar patterns. Farmers often rely on extension workers and radio, while students depend more on digital and institutional sources. These differences highlight the importance of environmental context in determining the availability and use of information sources.

The frequency of information seeking among caregivers is largely influenced by the nature of caregiving demands and the availability of information sources. Unlike other populations that engage in continuous information seeking, caregivers often exhibit situational or reactive patterns. Arias et al. (2024) found that caregivers typically seek information in response to immediate health concerns, such as the onset of symptoms or changes in a patient's condition. This reactive behaviour suggests that information seeking is driven by urgency rather than routine. Similarly, Nwagwu and Akanji (2024) observed that caregivers do not consistently engage in proactive information seeking due to constraints such as time, access, and competing responsibilities. Further empirical evidence supports this pattern. Rees Cosgrove and McInerney (2017) found that caregivers often delay information seeking until they perceive a critical need, which may affect the timeliness of care. Likewise, Greenwood, Habibi, Smith and Manthorpe (2018) reported that caregivers tend to seek information intermittently, depending on the severity of caregiving situations. A study by Lam and Lam (2020) highlighted that caregivers' information-seeking behaviour is influenced by stress levels and emotional burden, which can either motivate or hinder information seeking. In some cases, caregivers avoid seeking information due to fear or uncertainty. Studies on other populations provide useful contrasts. Students typically engage in regular information seeking due to academic requirements, while farmers seek information seasonally based on agricultural cycles. In contrast, caregivers' information-seeking behaviour is unpredictable and closely tied to caregiving events. This indicated the need for information systems that are easily accessible and capable of providing timely support when needed. It also highlights the importance of designing interventions that accommodate the situational nature of caregivers' information behaviour.

Statement of the Problem

In an ideal situation, caregivers are expected to have adequate access to accurate, timely, and relevant information that enables them to provide effective care and make informed health decisions. This ideal condition assumes the presence of functional healthcare systems, accessible communication channels, and sufficient literacy levels that support the acquisition and use of information.

Caregivers operate in an environment characterised by limited healthcare infrastructure, restricted access to formal information systems, low levels of digital inclusion, and socio-economic hardship. These conditions significantly affect their ability to obtain, evaluate, and utilise reliable information for caregiving purposes. Evidence from recent studies indicates that caregivers often rely heavily on healthcare professionals and interpersonal networks as primary sources of information, while access to digital and institutional sources remains limited due to infrastructural and economic constraints (Nwagwu & Akanji, 2024). Furthermore, studies have shown that caregivers' information-seeking behaviour is largely reactive, occurring mainly in response to immediate health challenges rather than as a continuous or proactive process (Arias et al., 2024). Despite these realities, there is insufficient empirical data that clearly identifies the specific information needs of caregivers in these communities, the sources available to them, and how frequently they seek information. This lack of evidence limits the ability of policymakers, healthcare providers, and information professionals to design targeted interventions that address the unique challenges faced by caregivers.

This study, therefore, seeks to examine the information needs and information-seeking behaviour of caregivers in Maiduguri, Borno State, with a view to bridging this knowledge gap and providing evidence-based recommendations for improving care-giving support systems.

Methodology

The study adopted a descriptive survey research design. The study was conducted in Maiduguri, Borno State, focusing on caregivers residing in micro internally displaced persons (IDP) settlements around the former Bakassi IDP Camp, behind Tijjani Bolori Mega Secondary School, and parts of Fori in Jere Local Government Area. The population of the study comprised caregivers attending Outpatient Therapeutic Programme (OTP) centres within these communities. Over 1000 households were targeted, of which only lactating mothers visiting the OTP were purposively sampled for the study, thus comprising 185 caregivers. A sample size of 185 caregivers was used for the study, who indicated interest in participating in the study during the period of data collection. The sampling technique adopted was purposive sampling because only individuals actively engaged in caregiving activities were selected. With the help of two research assistants, data were collected using a structured questionnaire designed to obtain information on caregivers' information needs, available information sources, and frequency of information seeking. The questionnaire consisted of closed-ended items. To ensure the validity of the instrument, face and content validation were carried out through expert review by specialists in Library and Information Science and health-related research. The instrument was pilot-tested using 20 caregivers outside the study area to ascertain its reliability and clarity. The reliability of the instrument was established using Cronbach's alpha, which yielded a reliability coefficient of 0.78, indicating that the instrument was reliable for the study. Data collection was carried out with the assistance of trained research assistants who facilitated questionnaire administration and provided clarification to respondents where necessary, particularly for respondents with low literacy levels. Ethical considerations were strictly observed throughout the study. Participation was voluntary, informed consent was obtained from all respondents, and confidentiality of responses was assured. In addition, respondents were informed of their right to withdraw from the study at any stage without penalty. The data collected were analysed using descriptive statistics, specifically frequency counts, percentages, mean scores, and standard deviations.

Results and Discussion

Research Question One: What are the information needs of caregivers in Maiduguri, Borno State?

Table 1: Information Needs of Caregivers (n = 185)

Information Needs	Frequency	Percentage (%)
Disease management	52	28.1
Medication use	38	20.5
Hygiene and sanitation	30	16.2
Nutrition and feeding	27	14.6
Access to healthcare services	22	11.9

Emotional/psychological support	16	8.6

The findings in Table 1 revealed that caregivers in Maiduguri predominantly require information related to disease management and medication use. This reflects the immediate and practical nature of caregiving responsibilities within resource-constrained environments. The prominence of these needs aligns with the findings of Nwagwu and Akanji (2024), who reported that caregivers in Nigeria prioritize health related information that directly supports treatment and care decisions. Similarly, the demand for information on hygiene and nutrition highlights the preventive dimension of caregiving. These findings are consistent with Arias et al. (2024), who observed that caregivers managing childhood illnesses actively seek information on preventive care practices such as hygiene and feeding. This suggests that caregivers are not only concerned with treatment but also with maintaining overall health and preventing complications. The relatively lower emphasis on emotional and psychological support indicates a possible gap in awareness or access to psychosocial information. This supports the findings of Washington et al. (2018), who noted that caregivers often have unmet needs in the area of emotional support despite experiencing significant stress. In the same vein, Bangerter et al. (2019) emphasised that caregivers frequently lack adequate information on coping strategies and mental well-being. The pattern of information needs observed in this study confirms that care-giving in conflict-affected environments is largely health-focused and problem-oriented. The findings also support the theoretical position of Wilson (2000), which posits that information needs are shaped by contextual realities and task demands.

Research Question Two: What information sources are available to caregivers in Maiduguri, Borno State?

Table 2: Information Sources Available to Caregivers (n = 185)

Information Source	Frequency	Percentage (%)
Health professionals	144	78.0
Community members/peers	130	70.3
Radio	120	64.9
NGOs/aid workers	102	55.1
Mobile phones	74	40.0

The findings in Table 2 indicated that health professionals are the most available source of information among caregivers. This suggests that caregivers in Maiduguri have relatively better access to formal healthcare providers compared to other sources. This aligns with Nwagwu and Akanji (2024), who found that caregivers rely heavily on healthcare professionals due to their credibility and direct relevance to caregiving needs. Community members and peers were also identified as widely available sources of information. This reflects the importance of interpersonal communication in environments where formal information systems are limited. The finding supports Jacobs et al. (2017), who reported that individuals in low-resource settings depend on social networks for information due to accessibility and familiarity. Radio also emerged as a major source of information, indicating its continued relevance in disseminating health information. This is consistent with Andreas-Ibegbulem and Oji (2025), who emphasised the role

of radio as an effective communication tool in Nigeria, particularly in underserved communities. The relatively lower availability of mobile phones as an information source highlights infrastructural and economic constraint. This supports Alhassan et al. (2020), who noted that although mobile technology can enhance access to health information, its use is limited by cost, network issues, and digital literacy challenges. The findings suggest that caregivers rely on a combination of formal and informal sources, with availability largely shaped by environmental and socioeconomic factors.

Research Question three: What is the frequency of information source consultation among caregivers in Maiduguri, Borno State?

Table 3: Frequency of Information Source Consultation (n = 185)

Information Source	Very Often f (%)	Often f (%)	Occasionally f (%)	Rarely f (%)	Mean	Std. Dev.
Health professionals	83 (45%)	56 (30%)	31 (17%)	15 (8%)	3.12	0.89
Community members/peers	65 (35%)	52 (28%)	41 (22%)	27 (15%)	2.83	1.02
Radio	56 (30%)	46 (25%)	56 (30%)	27 (15%)	2.70	1.05
NGOs/aid workers	37 (20%)	46 (25%)	65 (35%)	37 (20%)	2.45	1.08
Mobile phones	28 (15%)	37 (20%)	56 (30%)	65 (35%)	2.15	1.12

The results in Table 3 showed that health professionals are the most frequently consulted source of information, with the highest mean score (Mean = 3.12). This indicates that caregivers not only have access to healthcare providers but also rely on them consistently for information. This finding corroborates Nwagwu and Akanji (2024), who identified healthcare professionals as the primary and most trusted source of information among caregivers. Community members and peers recorded a moderate mean score (Mean = 2.83), suggesting that interpersonal sources are frequently consulted, although not as consistently as healthcare professionals. This aligns with Jacobs et al. (2017), who found that social networks play a significant role in information dissemination, especially in low-resource environments. Radio also showed moderate usage (Mean = 2.70), indicating that it remains an important but supplementary source of information. This supports Andreas-Ibegbulem and Oji (2025), who emphasised the continued relevance of radio in health communication. NGOs and aid workers recorded a lower mean (Mean = 2.45), suggesting that while they are present, they are not consistently consulted. This may be due to limited interaction opportunities or irregular service delivery. Mobile phones had the lowest mean score (Mean = 2.15), indicating infrequent use as a source of information. This reinforces the presence of a digital divide, as noted by Alhassan et al. (2020), where access and usage of mobile technologies remain constrained. Overall, the findings reveal that caregivers exhibit a situational pattern of information seeking**,** where sources are consulted based on immediate needs rather than regularly. This supports Arias et al. (2024), who found that caregivers typically seek information in response to specific health events. Similarly, Rees et al. (2017) and Greenwood et al. (2018) observed that caregivers engage in intermittent information seeking influenced by urgency and caregiving

demands. The implication is that information services for caregivers must be accessible, timely, and responsive**,** as their information-seeking behaviour is largely reactive rather than continuous.

Findings of the Study

The study revealed the following findings:

1. Caregivers demonstrated strong information needs that are primarily health-related, with the highest demand in areas such as disease management, medication use, hygiene practices and nutrition.
2. The findings also revealed that caregivers rely heavily on accessible and familiar sources of information, which may not always provide comprehensive or accurate guidance.
3. The study found that health professionals are the most trusted and frequently used source of information among caregivers. Other important sources include community members, radio, and humanitarian workers, reflecting a reliance on both formal and informal channels.

Implications for Information-related Practice

Because respondents were selected from the Out-Patient Therapeutic Programme Centre (OTP), findings may not fully represent caregivers who do not access formal healthcare services within the State or metropolis. Hence, the study has the following important implications for healthcare delivery, information services and community-based interventions in conflict-affected settings:

1. There is a strong reliance on health professionals and the need to strengthen caregiver–provider communication within primary healthcare and Outpatient Therapeutic Programme sites cannot be overemphasised. Healthcare workers should be supported to provide structured, clear and repeated information tailored to caregivers' information needs.
2. The continued use of familiar sources such as radio and community networks suggests that traditional communication channels remain highly relevant and community information centres must be strengthened to support such sources of information.
3. The irregular nature of information-seeking behaviour indicates that caregivers require information systems that are accessible on demand. This calls for the development of simple, user-friendly, and context-appropriate information tools that can be easily accessed during emergencies or critical caregiving moments.

Conclusion

This study examined the information needs and information-seeking behaviour of caregivers in Maiduguri, Borno State, particularly those residing in micro internally displaced settlements. The findings demonstrate that caregivers operate within a complex and constrained environment that significantly shapes their information behaviour. Caregivers' information needs are predominantly health-related and closely tied to their daily caregiving responsibilities. Their reliance on health professionals, community members, and traditional media reflects both trust in these sources and limitations in accessing formal and digital information systems. Furthermore, the situational and irregular nature of information seeking highlights the reactive approach adopted by caregivers in response to immediate needs. The study emphasises the importance of context in shaping information

behaviour and emphasises the need for targeted, accessible, and reliable information systems that support caregivers in vulnerable settings. The findings of this study may not be fully generalisable to caregivers outside Out-Patient Therapeutic Programme Centre (OTP) centres, as the study focused on caregivers who already indicated accessing the Out-Patient Therapeutic Programme Centre (OTP) and the healthcare services.

Recommendations

Based on the findings of the study, the following were recommended:

1. Healthcare providers should incorporate structured caregiver education sessions into routine services at Out-Patient Therapeutic Programme Centre (OTP) and primary healthcare centres to ensure consistent information delivery.
2. Community-based information support systems should be developed to leverage existing social networks and improve the flow of reliable information among caregivers.
3. Further research should be conducted to explore the impact of information access on caregiving outcomes in conflict-affected environments.

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