

News from Nova Scotia

Partnerships for Better Health Information: The LGBTQ+ Health Guide from Dalhousie Libraries, Nova Scotia Health Authority Library Services, and Halifax Public Libraries

Robin Parker, WK Kellogg Health Sciences Library; Katie McLean, Nova Scotia Health Authority Library Services; Samantha Sternberg, Halifax Public Libraries

Introduction

Serving diverse populations is a mandate for all types of libraries. Within library literature, it is commonly acknowledged that minority groups may have different information needs, and meeting those needs requires specific efforts to recognize community interests and reach target audiences (Alpi & Bibil, 2004). When it comes to health information and health literacy, libraries must also navigate issues around sensitive information, possible stigmas, and confidentiality, especially when dealing with minoritized populations, but libraries can play an important role in facilitating access to quality health information and fostering health literacy (Whitney, 2017). Inspired by a panel presentation at an international health libraries conference in 2016, we embarked on a project to collaborate across academic, hospital, and public libraries and create a health information resource for the LGBTQ+ community.

Background

In a Canadian study done in 2015, nearly half of the trans women and men surveyed reported feeling uncomfortable discussing trans health issues with their family doctors. (Bauer, Zong, Scheim, Hammond, Thind, 2015, p. 1). In 2011, a “survey of 150 Canadian and US medical schools reported a median of five hours dedicated to teaching [LGBTQ+] content in their entire curriculum, and about 40 percent of institutions rated their curricular content as only ‘fair’ in quality” (Sharman, 2016, p. 12). Access to relevant and inclusive health information, for members of the LGBTQ+ community, healthcare providers, researchers, and those studying to enter into those roles, is a necessity. And yet, it can be hard to find.

There are several support and/or service entities within Nova Scotia (including [NSHA's prideHealth - Primary Health Care](#)) working to meet the health and related information needs of the LGBTQ+ population. Within this context, we saw an opportunity to complement the existing supports by

focussing on the information needs of researchers, clinicians (including trainees), and the general LGBTQ+ community. A partnership was formed between the academic health sciences library at Dalhousie, the hospital libraries at Nova Scotia Health Authority (NSHA), and Halifax Public Libraries in order to create a new LGBTQ+ health guide (referred to throughout as “the Guide”). Two staff involved are members of the LGBTQ+ community and we sought input from other members of the community during development of the Guide.

In this article and in the health information guide, we use *LGBTQ+* to capture the broad and diverse population that includes gay men, lesbians, bisexual, non-binary, and transgender people, as well as individuals who identify as two-spirit, intersex, asexual, queer, and questioning. It is not used in a way that is exclusive of any identities that fit under the umbrella term.

The main user groups for this Guide are:

- *Clinicians and Trainees*
Any type of health care provider or learner, including (but not limited to) social workers, public health providers, physicians, nurses, and allied healthcare providers
- *Community*
Encompasses the local population of LGBTQ+ people and interested allies of all ages and demographics
- *Researchers*
This may include faculty and research staff at universities, clinicians, undergraduate, graduate, and postgraduate students, policy makers, and members of the community participating or interested in research projects or research evidence related to the health of LGBTQ+ people

Design & Evaluation

After looking at examples of similar guides from other jurisdictions (mainly in the United States) and starting from the basic layout of other guides used at the NSHA, we determined to orient the high-level pages to the different target audiences. Our goal was to have a simple, easy to navigate format and clear presentation. This structure made more sense than separating out the resources from each partner library because there is overlap between where individual users may work, practice, or seek information. For example, a clinician at NSHA may need information to help their work with LGBTQ+ patients but could also be a researcher affiliated with Dalhousie. Community members may be looking for lay information from free resources or the public library, but may also be interested in health research information related to their identities.

We provided links to subscribed resources through the various institutions when appropriate. Thus, if a clinician from NSHA wants to access a journal from the research page, the NSHA link will provide direct access to the journal after logging in with their health authority credentials. Each organization created a list of relevant resources to add to the Guide and then members of the team, with the assistance of staff and Kellogg Library graduate student interns, populated the pages of the Guide. We divided the content

into appropriate categories such as Bookshelf, Journals, Reports, Guidelines, Organizations, Local Resources, and more. We also included a few explanatory sections such as statements regarding terminology, research methods for minority health, and we touched on the concepts of resilience and intersectionality that are relevant when considering the health of LGBTQ+ individuals and populations.

Prior to launching the Guide publicly, we created a feedback survey using Google Forms and distributed the Guide and the survey to known contacts in each domain (researchers, clinicians, trainees, and members of the LGBTQ+ community). For approximately one week, we gathered responses to inform improvement and revisions to the Guide. We solicited demographic information, such as age ranges, role(s), geographic location, and whether they identified as a member or ally of the LGBTQ+ community. This information would allow us to see if we had reached a range of potential users with the anonymous survey. Regarding the guide, we asked questions about what they liked and didn't like, any missing content, preferences regarding layout, and whether they would use the guide again or refer others to it. We also inquired about what types of LGBTQ+ health information users typically sought and where they previously looked for that information.

We received comments from 21 individuals from across Nova Scotia and made revisions to the Guide based on their suggestions. More than half of these respondents identified as members of the LGBTQ+ community and almost half as allies, with a range of ages. The feedback helped us make some changes to the layout and organization, and there were many excellent suggestions for information resources to be added to the Guide. In particular, respondents expressed interest in more local resources and links to related organizations in Nova Scotia, including Sexual Health Centres around the province and a list of LGBTQ+ safe providers (such as [this one](#) previously created by prideHealth).

Following the revisions and additions to the Guide, we published it and added links or landing pages from each institution's website:

- Dalhousie Libraries: <http://dal.ca.libguides.com/LGBTQHealth>
- NSHA Library Services: <http://library.nshealth.ca/LGBTQ>
- Halifax Public Libraries: <http://www.halifaxpubliclibraries.ca/research/topics/health.html>.

All three organizations promoted the Guide via social media and blog posts (for example: <http://library.nshealth.ca/Home/News/resource-spotlight-lgbtq-health>) and one author (SS) presented the Guide at a Lunch and Learn event hosted by prideHealth during Halifax Pride Festival in July. Since it was launched in June, the Guide has been viewed nearly 900 times as of September 2017.

Future Directions

In addition to updating, maintaining, and promoting this Guide, we hope to continue our partnership to create a limited number of guides for other minority groups in our region who have particular health issues and health information needs. Examples include health information guides for Indigenous

peoples, immigrant and refugee populations, and African Nova Scotians. We would also like to work with more libraries around Nova Scotia to increase access for these guides. Further promotion of this and future guides will help increase visibility for all the target audiences and we plan on presenting to groups such as Continuing Professional Development at Dalhousie Medicine and community organizations like the Youth Project. Within the first year of public use, we hope to develop a plan for assessment to measure impact on the various users and their information behaviours.

Conclusions

Collaborating on the LGBTQ+ Guide serves multiple purposes for the partner libraries as well as our target users, who benefit from us working beyond our usual library silos. The partner libraries supported each other in the work to develop and implement the Guide and the participating academic, hospital, and public libraries share the continued obligations to maintain, update, promote, and assess the Guide. Ultimately, we hope that this project helps to meet the information needs of people interested in LGBTQ+ health and that it can play a role in improving the health and wellness of LGBTQ+ people across Nova Scotia.

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