Author/s:
Naccarella, L;Horwood, J

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Author Details

- Lucio Naccarella, Centre for Health Policy, Melbourne School of Population and Global Health, The University of Melbourne, l.naccarella@unimelb.edu.au
- Jacqui Horwood, Senior Program Manager, Library Sector Engagement, State Library Victoria. jhorwood@slv.vic.gov.au

Corresponding author: Lucio Naccarella, l.naccarella@unimelb.edu.au

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DR LUCIO NACCARELLA (Orcid ID : 0000-0001-7163-3022)

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Introduction

Now more than ever, in this COVID–19 pandemic, our individual and collective ability to access, understand and apply information to inform our health care and broader lifestyle decisions, that is, to be health literate - has life or death consequences.[1] Health literacy is recognised as key to supporting people to better manage their own health and has the potential to improve health-related outcomes of disadvantaged populations.[2] Various levels (functional, interactive, and critical health literacy) have also been proposed to explain the relationships between health literacy and the healthcare and education systems.[3,4] Health literacy is an evolving concept with the recognition that it comprises of individual, organizational and systems lens. Health literacy from an individual or consumer lens has been defined as "the knowledge, motivation and competencies of a consumer to access, understand, appraise and apply health information to make effective decisions and take appropriate action for their health and health care".[5] With the recognition that organizations have a core responsibility to support everyone's health literacy across the full range of diversity of health literacy needs, strengths and preferences, not just people who may have particular needs (low health literacy), the concept of health literate organizations has emerged, defined as "An organisation that makes it easy for anyone to find, understand, and use information and services".[6] Health literacy is also now increasingly recognised as the product of the dynamic interaction between individual (patients, citizens, workforce), organizational and system level capabilities and the health literacy–related demands and complexities of the health care system.[7]

As unique trusted community organizations public libraries are well positioned to contribute to the health literacy movement. The XXXXXXX public library sector is a XXXX service that is well patronized. One in three Victorians are members of their local libraries,[8] and XXXXX libraries attract 30 million visitors a year in Victoria.[9] They provide the general public with: universal free access to information and services; early literacy programs and support; extensive in-house and outreach educational collaborative learning opportunities; and health and wellbeing support by being

a welcoming, safe, and trusted community space. Public libraries are recognised as contributing to healthy communities by providing education and supporting the wellbeing of populations at every stage of their life.[10] Public libraries' as health literate organisation can help reduce health and social inequities by: promoting access to healthcare by providing direct healthcare services, easy to understand health information, and linkage to services; and by providing designated safe spaces for vulnerable population groups. [11]

Public library health literacy efforts occur at an organisational and individual level, that is, librarians. At an organisational level, in-house and outreach health literacy programs occur for older adults, underserved populations, the general public, healthcare professionals, medical students, and patients[12]. Research literature also highlight health literacy efforts for the general public focus on collaboration between public libraries and other organizations. Partnerships between libraries' and health institutions and local community organizations can benefit the consumer. [13] At an individual level, librarians are well positioned to contribute to the health literacy movement as champions of information literacy and being liaisons with researchers and healthcare professionals who strive to improve health literacy.[14] However, health literacy is a concept that many librarians struggle with, as often librarians have a partial understanding of health literacy as a public health issue.[14]

The role and contribution of public libraries in health literacy is not new. For example, in 2019 the Australian Library and Information Association (ALIA), the ALIA Australian Public Library Alliance (APLA) and ALIA Health Libraries Australia (HLA) were funded by the Australian Digital Health Agency to run train the trainer programs for library staff from September 2019 to June 2020 on digital health literacy.[15] While the outcomes of the training programs are not available yet, they will inform the future roles of public libraries in health literacy. XXXXX Library Service is currently piloting having a social worker in their libraries. Based on long-running US library programs, the social worker pilot project will help raise the health literacy of library patrons who are affected by homelessness, mental health issues and other societal issues as well as raising the health literacy of library staff working with these patrons. Health literacy is not specifically stated in the position description of the social worker at XXXXX Library Service. It is however an outcome of the activities of the social worker. The person in this role is expected to help vulnerable library users to navigate the health system, advocate on their behalf; and connect them to services. The social worker also builds up the knowledge of library staff and their ability to assist and care for people in need. All of these activities contribute to the health literacy of both library staff and library users.

However, overall there is limited discussion about the merits of public libraries as health literate multi-purpose workspaces, nor what principles and frameworks could guide and sustain their efforts.

Public libraries as Health Literate Organizations

Given that public libraries not only have a core role in improving universal access to information, making it easy for anyone to find, understand, and use information and their services (i.e., a health literate organization[6]) – conceptualizing and supporting public libraries as Health Literate Organizations appears very appropriate- hence a broader discussion is warranted. Organizational health literacy is increasingly viewed as a key element of the healthcare system as it shapes consumer care experiences, quality of care and health outcomes.[7] However, organizational health literacy is a complex, multifaceted and a multilayered system issue, which includes how the system engages and interacts with consumers.[16,17] To improve organizational health literacy multiple changes are now recognised as required, including: aligning the organizational values and purpose, embedding changes within core business, workforce development, ensuring clear communication is utilised in all situations and ensuring consumers are involved in health systems design, development and evaluation.[18,19] A practical health literate organizational framework[6] outlining key requirements for being a health literate organization has been suggested, including: 1) A workforce with appropriate knowledge and skills; 2) To partner with consumers; 3) To plan user friendly services; 4) To provide information and communication in ways that are easy to understand; and 5) A commitment for leadership at all levels. Given that public libraries are well positioned to contribute to the health literacy movement, the health literate organizational framework is very relevant. The framework can reinforce, coordinate and sustain investments by public libraries to go beyond supporting 'Health Information Literacy[14] and be recognized as health literate organizations.

Public libraries as Multi-Purpose Workspaces

Public libraries are widely recognised as spaces with multiple purposes including: being welcoming spaces, safe spaces, information spaces, community spaces and indeed as workspaces. A 2016 review of the intrinsic value of libraries as public spaces commented: "Libraries are a third space for many community members, they are welcoming, safe, free and customers can stay all day – *people can "escape" from their own spaces, meet and talk* with others, participate in programs and events, study, read, relax, celebrate community diversity*"*.[22]

To date, limited discussion exists about public libraries as multi-purpose workspaces for building health literacy workspaces, nor what principles may guide and support such efforts. Health literacy change efforts typically operate in dynamic environments striving to meet and serve diverse needs of diverse individuals and communities. Diversity demands responsiveness and adaptation of initiatives and efforts. For such initiatives, principles are advocated to provide guidance and a framework for how to design and evaluate such efforts.[23] For example, the eight principles that underpin the Ophelia (Optimising Health Literacy and Access) approach have been suggested to guide the aims, development and implementation of structured interventions to improve health and equity outcomes in communities (Outcome-focussed; Equity driven; Co-design approach; Needs-diagnostic approach; Driven by local wisdom; Sustainable; Responsiveness; and Systemically applied).[24]

Given that public library health literacy change efforts operate in complex and dynamic environment, we propose five principles that can guide public library health literacy workspace efforts:

1. **Empowerment** - Public libraries as workspaces where library staff, the community and organizations feel safe and have a voice in relation to their health literacy
2. **Equitable** - Public libraries as workspaces where staff and the community are treated fairly and equitably in relation to health information literacy
3. **Inclusive** - Public libraries as workspaces that values and recognizes diversity in the health literacy needs, strengths and preferences of individuals, organizations and systems
4. **Collaborative** - Public libraries as workspaces that support and authorizes collaborative health literacy efforts between all library staff, the community and relevant partners
5. **Integrated** - Public libraries as workspaces with integrated strategies, systems and frameworks that support community health literacy and wellbeing

The principles were generated via a thematic synthesis of research literature of public libraries health literacy efforts and the first authors experiences of evaluating organisational health literacy initiatives. The principles were generated due to recognition that as public library health literacy change efforts operate in complex and dynamic environment, principles to guide such efforts, and not rules were appropriate. The proposed principles were envisaged to guide the XXXX health literacy planning, implementation and evaluation efforts. For example: Principle 1: Empowerment –

advocates and guides the XXXXX to review the extent to which its staff (for example) feel safe and have a voice in relation to their health literacy capabilities.

While principles are not new for informing the strategic priorities of public institutions such as public libraries, principles have not been used to inform the design, implementation nor evaluation of public libraries as workspaces for improving health literacy. The following key evaluation questions are also worth consideration:

- What meaningful and evaluable public library health literacy workspace principles matter to the librarians and the community?
- How can public library health literacy workspace principles be supported in practice?
- What benefits can result from public library health literacy workspace principles for the individuals, communities, organizations and systems ?

Conclusion

Public libraries are unique community organizations with much to offer. Understanding the needs of their communities and participating more fully in addressing them affords libraries a significant opportunity to contribute to public health. The current COVID-19 pandemic has highlighted assumptions about the capacity of individuals, communities, organizations and systems to access, acquire, understand and apply information and adapt behaviours rapidly, that is, to be health literate. The opportunity to strengthen the role and contribution of public libraries as health literate multi-purpose workspaces is more important than ever.

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