

Health Sciences Librarians in the Field: Pioneers for LGBTQ+ Health

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Abstract

Health science librarians occupy a unique place in librarianship, guiding healthcare professionals and the public to quality sources of medical research and consumer health information in order to improve patient outcomes and quality of life. A broader impact of health sciences librarianship is its advocacy for improvements in public health. In recent years, health science librarians have been actively involved in advocating for adequate, responsive, and culturally competent health care for lesbian, gay, bisexual, transgender, and queer (LGBTQ+) individuals. Health sciences librarians have advocated for LGBTQ+ individuals through a variety of specialized outreach projects to address health disparities found in the LGBTQ+ community such as HIV/AIDS, women's health, or substance abuse; have collaborated with public health agencies and community-based organizations to identify health disparities and needs; and have implemented outreach to address these needs.

This chapter maps the landscape of health sciences librarian outreach to LGBTQ+ people. The authors develop this theme through case studies of health science librarians providing health information to the LGBTQ+ community and healthcare professionals. Following an overview of advocacy for LGBTQ+ health by the US National Network of Libraries of Medicine and by professional information organizations, they conclude the chapter by discussing the “pioneering” nature of these projects and the common threads uniting them, and by identifying the next steps for continued successful outreach through the development of an evidence base and tailoring of outreach and resources to address other demographic aspects of the members of the LGBTQ+ community.

Keywords: Health sciences librarians, LGBTQ+, outreach, public health advocacy

Introduction

Health science librarians occupy a unique place in librarianship. At the crossroads between information and medical practice, their primary mission is to improve patient outcomes and quality of life by guiding healthcare professionals and the public to quality sources of medical research and consumer health information (Brettle, Maden, & Payne, 2016; Lacey Bryant, Stewart, Goswami, & Grant, 2016; Marshall et al., 2013).

Library outreach, the building of community between the library and both existing and potential users, is therefore clearly a core component of the work of health librarians, as it is for many other sectors of the profession. Because health sciences librarians generally work within universities or health care organizations, this outreach has typically taken the form of building connections with health professionals, such as clinicians and faculty, or students to promote library services (Fama et al., 2005). These services can include literature searching, support for knowledge synthesis, and the teaching of classes in database searching and evidence-based practice (Dorset, 2014). Involvement in providing health information to support public health was previously seen as the subdomain of consumer health librarians or, more commonly, public librarians (Parker & Kreps, 2005). However, this lack of focus on engagement with patrons in the outside community is gradually shifting, providing opportunities for health sciences librarians to have an impact beyond the immediate context of the university or hospital (Duhon & Jameson, 2013).

In this chapter, the authors seek to raise awareness of a developing area of health sciences librarianship: improving lesbian, gay, bisexual, transgender, and queer (LGBTQ+) public health through better access to accurate and culturally competent health information. Through a

combination of purposive sampling, email questionnaires, and semi-structured interviews, the authors highlight members of the small community of health science librarians which has been actively involved in advocating for adequate and responsive healthcare for LGBTQ+ individuals, which respects their social rights. These health sciences librarians have advocated for LGBTQ+ individuals through a variety of projects and methods, including specialized outreach programs and collaboration with public health and community-based organizations to address health disparities found in the LGBTQ+ community.

LGBTQ+ Health in Context

LGBTQ+ persons face a variety of health disparities, and health sciences librarians can help make a difference in reducing these. These disparities include health concerns which, while not unique to the LGBTQ+ community, are more common in this community than in the general population. For example, lesbian, gay, and bisexual persons are more likely to abuse alcohol and drugs than their heterosexual counterparts (Green & Feinstein, 2012). Mental health is also a serious concern, as LGB individuals are also approximately twice as likely as heterosexuals to attempt suicide and are 1.5 times more likely to suffer from depression or anxiety (King et al., 2008). Mental health and substance abuse are particularly serious issues for transgender individuals; a recent study indicated that transgender persons are more than twice as likely to suffer from serious mental illnesses such as depression and panic disorder and more than four times as likely to have attempted or contemplated suicide (Brown & Jones, 2016).

HIV infection is a further major health concern which disproportionately affects the LGBTQ+ community. For example, the majority of new HIV infections in the United States (more than 70

percent) are gay, bisexual, and other men who have sex with men (MSM) (Centers for Disease Control and Prevention, 2016). Similarly, recent surveillance data show that about half of new cases in the United Kingdom and more than half of reported new HIV cases in Canada are MSM (Kirwan, Chau, Gill, Delpech, & Contributors, 2016; Public Health Agency of Canada, 2015). Pre-exposure prophylaxis (PrEP) has so far proven to be a safe, reliable tool for reducing infections, and awareness and use of the drug therapy is gradually increasing within the target population (Tetteh et al., 2017). While PrEP is preventing some HIV infections, other sexually transmitted infections such as syphilis and hepatitis C are increasing, especially among MSM (Abara, Hess, Neblett Fanfair, Bernstein, & Paz-Bailey, 2016; Chan, Sun, Wong, Lee, & Hung, 2016).

While sexually transmitted infections have a disproportionate impact on the health of men in the LGBTQ+ community, there are also serious disparities adversely affecting the health of women in the LGBTQ+ community. Lesbian and bisexual women are more likely to be overweight or obese than heterosexual women (Boehmer, Bowen, & Bauer, 2007). When combined with the higher tendency to drink, smoke, or use drugs more than heterosexual women, the increased weight puts LGBTQ+ women at an elevated risk for comorbidities such as cardiovascular disease, certain cancers, and type 2 diabetes (Boehmer, Bowen, & Bauer, 2007; Eliason, Sanchez-Vaznaugh, & Stupplebeen, 2017).

Through outreach to the public and to healthcare professionals, health sciences librarians alleviate these disparities by increasing awareness of appropriate and reliable health information resources (Whitney, Keselman, & Humphreys, 2017). They also provide information on supportive community services and healthcare providers, helping LGBTQ+ individuals access the services they need. In the following sections, the authors share the stories of several health

sciences librarians who have engaged in outreach activities, promoting their services and health information resources as a way to improve the overall health of the LGBTQ+ community.

Methodology

The case studies described in this chapter were drawn from a systematically conducted purposive sample of the health sciences librarian community conducted throughout 2017. Because three of the authors of this chapter are active members of the Medical Library Association's LGBTQ Health Science Librarians Special Interest Group (SIG), the authors were already personally familiar with the outreach work of some of the case study interviewees. To ensure a systematic approach to data collection, the authors located other health sciences librarians engaged in LGBTQ+ outreach activities by emailing listservs such as those of the MLA LGBTQ SIG, the Canadian Health Libraries Association, and the European Association for Health Information and Libraries. The authors also contacted other organizations directly, such as the Australian Lesbian and Gay Archives, ALIA Health Libraries Australia, and the Library and Information Association of New Zealand Aotearoa (LIANZA).

Librarians who responded to the general email call for volunteers were asked if they were willing to share their experiences for a written work. One author conducted a semi-structured interview with each librarian by telephone or Skype (the script is provided at Appendix A). Four interviews were conducted using this method, each lasting between 20 and 60 minutes. In the remaining cases, a synchronous interview was not possible due to scheduling conflicts or difference in time zones so a written questionnaire was emailed to the participants instead. When later clarification on points was required, one of the authors emailed the librarian for follow-up.

As already noted, the literature on health librarian work with the LGBTQ+ community is extremely limited. For this reason the authors studied responses using Grounded Theory, a popular methodology for contexts where existing theoretical frameworks are either limited, or do not exist at all (Charmaz, 2014; Robson, 2004). Using this approach, the authors gathered data from the phone interviews and initial emails, and returned to gather more data through follow-up emails until saturation. This approach allowed the authors to discover the variations and common themes inherent in the studies. Case studies were selected in order to demonstrate the broadest range of outreach models and institutional contexts.

The authors then conducted a thematic analysis of the case studies through open coding, by identifying specific characteristics from each study such as setting, audience and institution; the themes from this analysis are outlined in the sections below. As a final stage, the case studies were further synthesized through axial coding, and examined through the lens of *Diffusion of Innovations Theory* in order to attempt predictions about the future of health librarian outreach to LGBTQ+ communities, and to assemble recommendations about how interested librarians might like to approach this area of work.

Themes from Case Study Analysis

Few outreach scenarios are identical. The demographics of communities can differ greatly, as can the work environments and the skills of health sciences librarians. This makes qualitative analysis of outreach projects challenging, as oversimplification and categorization can lead to a loss of project detail, which could be useful to other librarians interested in implementing similar outreach. However, for the purposes of analysis and discussion, the authors were able to group

the case studies into broad categories based on the librarian's outreach targets. Some outreach projects were intended to reach members of the LGBTQ+ community, either generally or by targeting a specific demographic. Others were focused on those working within a professional community, such as healthcare providers or other health sciences librarians. In this section, the authors will highlight the activities described by the case study librarians, as grouped into similar types of outreach.

Librarians Promoting Health Information at Pride and Other Community Events

One popular venue for librarian outreach to the LGBTQ+ community is pride events. For more than four decades pride events have been the most visible public gatherings for the LGBTQ+ community. In 1970, to commemorate the first anniversary of the Stonewall Riots, the first Pride marches took place in New York, Chicago, San Francisco, and Los Angeles. During the 1970s these events grew into "Gay Freedom Day" and "Gay and Lesbian Pride Week" celebrations, eventually evolving into the Pride marches and festivals of today (Beemyn & Conerly, 1998). Because they are large gatherings of the LGBTQ+ community and straight allies, Pride events are excellent opportunities for health science librarians to reach out to many LGBTQ+ persons at one time and provide them with valuable health information targeting their specific needs (Centers for Disease Control and Prevention, 2007).

Pride events have spread beyond their origins in major cities with large LGBTQ+ populations such as New York and San Francisco, and are now found across the world in communities of all sizes. Likewise, health science librarians in both large and small communities are also participating in Pride events and using them as outreach opportunities to advocate for better LGBTQ+ health. An example of a librarian working in a smaller community is Emily Glenn at

the University of Nebraska Medical Center (UNMC) in Omaha. She is also a co-chair of the LGBTQ+ Employee Alliance at UNMC and Nebraska Medicine. In 2017, the Alliance participated for the first time in Heartland Pride, the Pride event for the Omaha, Nebraska/Council Bluffs, Iowa area. She and other Alliance members marched in the parade and later staffed a booth at the festival. At the booth, Glenn and the other UNMC representatives provided health materials to attendees, such as information on how to talk to one's doctor and on resources available at UNMC. Based on the positive feedback they received from attendees and from the campus community, as well as the increase in the number of people who signed up for the Alliance's mailing list, she felt that their participation was a success. The Alliance plans on continuing its participation in Heartland Pride (E. Glenn, personal communication, August 15, 2017). Like other healthcare professionals involved with the Alliance, Glenn is able to make a positive impact on LGBTQ+ health through her outreach activities at Pride.

Just like their counterparts in the US, international Pride events provide opportunities to address health issues through outreach to the LGBTQ+ community. One of the events held during Auckland Pride in New Zealand in 2017 was *Ending HIV Big Gay Out*. *Ending HIV* is a public awareness campaign of the New Zealand AIDS Foundation (NZAF), an organization primarily funded through the New Zealand Ministry of Health (New Zealand AIDS Foundation, n.d.). While this event included many of the usual Pride festival features such as music and vendors, the event's focus was on ending HIV transmissions through testing and the encouraging of safer sex practices. The first national trial of the drug Truvada for PrEP in New Zealand started in 2017, and in November 2017 the New Zealand governmental agency PHARMAC proposed public funding of PrEP for those at risk (PHARMAC, 2017). In the same year the Ministry of Health began focusing heavily on HIV prevention. NZAF has the further goal of eliminating all

new HIV infections in New Zealand by 2025. For these reasons, and due to HIV's significance as a major health disparity for the LGBTQ+ community, a Pride event focused on preventing HIV transmission in New Zealand is a natural place for health sciences librarian outreach. NZAF has a small library focusing on HIV/AIDS and other related areas such as sexual health and sexuality. The organization's librarian Wayne Carter was one of the people who participated in the Big Gay Out by helping to staff an information tent. He handed out condoms and provided information, both on the event and on preventing HIV infection. His participation in 2017 was his second year as a Big Gay Out volunteer, and he stated that it has been an enjoyable, worthwhile experience (W. Carter, personal communication, July 5, 2017). By engaging in outreach through his employer's event, his dissemination of safer sex information was an action which can have the long-term public health effect of potentially reducing HIV infections.

While Pride events are the most obvious community outreach opportunities for health science librarians, there are other events led by librarians that address LGBTQ+ health. One example is the LGBTQ Summit held at Kaiser Permanente's Woodland Hills Medical Center (WHMC) in California's San Fernando Valley. Started in 2014, this annual event addresses aspects of LGBTQ+ health for both health professionals and the community. As president of the Woodland Hills chapter of Kaiser's LGBTQ+ group KP Pride, the health sciences librarian David Keddle has been one of the driving forces behind the implementation of the summit. The event originated to address a specific community problem — the large number of homeless LGBTQ+ youth in the San Fernando Valley. LGBTQ+ youth are more at risk of homelessness than cisgender heterosexual youth, creating a significant health disparity (Choi, Wilson, Shelton, & Gates, 2015). The medical center's "homeless navigator" suggested that Kaiser increase its focus on addressing the health needs of these teens; this idea led to the formation of the first summit,

with about 100 attendees. By 2017, the number of attendees had doubled (D. Keddle, personal communication, August 11, 2017).

The summit runs for six hours and features speakers on various LGBTQ+ health topics. Previous topics have included bullying and, in 2017, transgender health. Speakers have included university professors, healthcare professionals, and representatives from organizations such as the Human Rights Campaign. During the event, representatives from the medical center's administration and community affairs speak on how Kaiser supports LGBTQ+ health, illustrating the depth of support that the Summit receives from the organization (Kaiser Permanente, 2017). One part of the summit is designed specifically for healthcare professionals; a clinical hour is held on an LGBTQ+ health topic, offering continuing medical education (CME) credit for the physicians attending. Despite the professional nature of the hour, the event is mainly promoted to the community and roughly 80 to 90 percent of attendees are not affiliated with the medical center. Community members are encouraged to join KP Pride in the planning and implementation of the event.

In addition to his work in organizing the LGBTQ Summit, Keddle also engages in other activities to promote LGBTQ+ health awareness. On the medical center's Diversity Day he staffs a booth for KP Pride, he presents videos on LGBTQ+ health to employee groups that request diversity training, and he has built a collection of LGBTQ+ materials in his library. Keddle is the author of an online resource guide on LGBT health resources for both providers and patients (Kaiser Permanente, n.d.). Finally, he promotes the library as a safe space and welcomes all who are interested in learning more about LGBTQ+ health and other related issues. Through the LGBTQ Summit and his other activities, Keddle is a strong advocate for LGBTQ+ health and his actions lead to better quality care for LGBTQ+ patients.

Librarians Partnering with Clinics and Healthcare Professionals

Health information outreach at pride and other public events is a good way to reach members of the LGBTQ+ community and creates a more informed population that hopefully will be proactive in making decisions regarding their own healthcare. However, it is just as important to inform and educate healthcare professionals about the special health and cultural needs of the LGBTQ+ community. Some healthcare curricula are now incorporating LGBTQ+ awareness as part of diversity or cultural competence training (Obedin-Maliver et al., 2011, Ton et al., 2016). However, there are still many physicians, nurses, and other professionals who are unaware of LGBTQ+ health disparities and are unsure of how to treat LGBTQ+ individuals without causing unintentional harm or offense. Health science librarians can play a role in improving the LGBTQ+ competency of healthcare professionals by creating pathways to LGBTQ+ health information for these professionals.

One project designed to provide LGBTQ+ health information both to the community and to healthcare professionals was the collaboration of Lindsay Blake, formerly of Augusta University, with the students and faculty at Augusta's Equality Clinic. The student-run clinic provides free health services to uninsured and underinsured LGBTQ+ persons. Blake knew most of the family medicine faculty involved with overseeing the clinic through her work as a Clinical Information Librarian at Augusta, so she was better able to identify ways to provide needed services. She approached faculty with the idea of creating a web portal to provide health information to the LGBTQ+ clients at the clinic, and subsequently obtained an award from the National Network of Libraries of Medicine, Southeast Atlantic Region (NNLM/SEA) to hire a part-time web librarian to create the portal. An unforeseen potential use for the portal, though, came about when a third-year resident met with a transgender woman. The patient was on hormone therapy and had

previously received treatment in Atlanta but now she wanted to establish care at the Clinic. However, the resident was unsure of how exactly to address the woman's specific needs. This knowledge gap on transgender hormone therapy was important to address because about 70 percent of the Equality Clinic's patients are transgender (L. Blake, personal communication, July 11, 2017). It was crucial to provide adequate information on all aspects of LGBTQ+ health to the residents and other healthcare providers in the clinic; therefore, the web portal was expanded to include a separate site for healthcare professionals on medical and psychological resources for working with LGBTQ+ patients, with a focus on transgender individuals. (Augusta University, n.d.).

The two portals have received positive feedback from both target audiences (patients and healthcare professionals), although Blake admits that the feedback from patients was not as robust as they would have liked. A survey of portal users, both healthcare providers and patients, helped identify gaps in the portal's content, and members of the community have since contributed suggestions, especially on local resources. As another measure of success, the portal has received more than 3000 page views since its launch in January 2016. Because Blake has presented on this portal at two conferences, other health science librarians have learned about the portal project and have asked her for advice on how to create similar portals at their institutions, which could have a ripple effect and inspire other librarians (Blake, Kriegel, & Stepleman, 2016). Ultimately, though, the most significant impact has been the increased ability of healthcare professionals in Augusta to provide appropriate levels of service to LGBTQ+ patients through greater access to health information, improving overall health for the community.

Another form of outreach which plays particularly well to the strength of librarians is the collaborative creation of trusted resource lists. Robin Parker at Dalhousie University was

inspired by a 2016 conference panel on LGBTQ health librarianship (Hawkins et al, 2016) when developing her collaboration with the local health authority and public libraries in Nova Scotia. One theme of the panel was the lack of LGBTQ health information for patients, health professionals, and researchers, which Parker decided to tackle by collaborating to create a guide covering curated resources for all three user groups. The jointly created guide has specific sections for researchers (curated by the health sciences library at Dalhousie), for clinicians and trainees (curated by the Nova Scotia Health Authority), and for community members (curated by Halifax Public Libraries). Technical work to input URLs and code aspects of the guide was conducted by team members along with interns, and the links will be checked and updated every 6-12 months.

The project required a significant amount of communication between the partners, not only in the selection of resources but also to ensure that the branding of all three contributing organizations was reflected in the finished product, thus demonstrating their involvement in the project. An important aspect of the work was involvement from members of the LGBTQ+ community, represented both by LGBTQ+ librarians working on the project and through user feedback of a draft version of the guide. Parker hopes that the guide will serve a model for other similar guides catering to traditionally underserved populations such as indigenous people, which would again be developed in collaboration with the same partners and with input from target communities (R. Parker, personal communication, September 20, 2017).

Occasionally, health science librarians even find the need to reach out to fellow librarians to improve their awareness of LGBTQ+ health information. As a way of promoting his services and the benefits of his library, Wayne Carter of NZAF presented at the annual Health Study Days for the Health Librarians Special Interest Group of the Library and Information Association of New

Zealand Aotearoa (LIANZA). During his talk, he spoke to the other librarians about his library's collections and how he and the library were available to assist with HIV research or with related clinical questions. While he admits that his outreach did not immediately result in referrals or collaborations with other librarians, he believes that creating awareness of NZAF's library could ultimately produce long-term benefits (W. Carter, personal communication, July 5, 2017).

Promoting what he and his library can offer was another way that Carter could leverage the library's resources and make a greater impact on patient health beyond the confines of his organization.

Librarians Participating in Public Health Initiatives

Many of the outreach activities previously mentioned concern the broader LGBTQ+ community and did not specialize in targeting one segment of the community. The Equality Clinic project in Augusta eventually focused on transgender health when they discovered that the majority of their patients were transgender. However, they also provide services to cisgender LGB individuals and the web portal still includes health information not specifically tailored to transgender needs (L. Blake, personal communication, July 11, 2017). There do exist, however, some instances of health sciences librarians reaching out to LGBTQ+ subgroups, specifically to transgender individuals. An example of this may be found in Miami, where health sciences librarians from the Florida International University (FIU) Medical Library participated in outreach to improve the health of transgender women in South Florida through engagement in a public health program.

Studies on health disparities in the transgender community have been challenging because there is a distrust of researchers among many transgender persons. This distrust leads to

underrepresentation and underreporting in many studies. Based on available studies, HIV infection is a major health disparity for this group; these studies have estimated that more than 20 percent of transgender women in the United States are HIV positive, and that number is significantly higher for transgender women who are sex workers and for transgender women of color (Baral et al., 2013). Between 2009 and 2014, more than one quarter of transgender women diagnosed with HIV in the United States were Hispanic or Latina (Clark, Babu, Wiewel, Opoku, & Crepaz, 2016).

Because of this great need to reduce HIV infection rates among transgender women, FIU's Herbert Wertheim College of Medicine and the Stempel School of Public Health obtained a GLBT Community Projects Fund grant from the nonprofit Miami Foundation in 2015 to provide workshops on HIV prevention for these women. As faculty within the College of Medicine, Francisco Fajardo and the other medical librarians at FIU joined their colleagues in the planning and implementation of their workshops. The three workshops focused on transgender health, safer sexual practices, and Pre-Exposure Prophylaxis (PrEP) as a prevention tool. In order to find participants for the workshops, the FIU medical librarians contacted community-based organizations that serve the LGBT community in Miami-Dade and Broward counties. Six organizations ultimately participated in the project, all of which had previously collaborated with FIU on other events. The organizations hosted the FIU workshops in their centers as part of regular monthly support group meetings. The workshop organizers administered surveys to the women before the workshops in order to obtain demographic information and to determine their existing knowledge of safer sex practices and PrEP. Post-workshop surveys were also given to assess what the participants learned and how they plan to implement these safer sex practices in their lives (F. Fajardo, personal communication, June 25, 2017).

To supplement the workshops the librarians created an online guide on medical, legal, and social resources, including pages dedicated to healthcare and counseling services, a provider list and resources for providers, and PrEP information (FIU Herbert Wertheim College of Medicine Medical Library, n.d.). These public resources allow the workshop attendees to learn more about the information and services available to them. Additionally, the online resource guide serves as an outreach tool to the transgender women who could not attend the workshops. Like their colleagues at Augusta University, the FIU librarians have presented their findings at conferences, which has inspired other health sciences librarians to consider transgender outreach opportunities through their own institutions (Fajardo, Perez-Gilbe, & Perez, 2016).

Despite the best intentions of the librarians and other researchers at FIU, there were challenges in reaching the target population. Because of the previously mentioned distrust of researchers, some women were reluctant to come forward and participate in the workshop. Additionally, none of the facilitators of the workshops were transgender. On reflection, Fajardo stated that he felt a transgender co-facilitator could have been useful to building trust with the participants. However, the feedback from the transgender women was positive, especially because they obtained useful information such as how to locate a trans-friendly physician and how to obtain discounts and vouchers for HIV medications and PrEP. Ultimately, the librarians and their colleagues made a positive impact on the health of a vulnerable population through their outreach and education.

Regional Medical Librarians/NNLM Outreach to Librarians and Healthcare Professionals

The National Library of Medicine (NLM) is the world's largest biomedical library. It maintains and makes available a vast print collection, produces electronic information resources on a wide range of topics and supports and conducts research, development, and training in biomedical

informatics and health information technology. NLM awarded eight academic health sciences libraries the National Network of Libraries of Medicine (NNLM) cooperative agreement to improve the public health by 1) providing U.S. health professionals equal access to biomedical information and 2) improving the public's access to information, enabling them to make informed decisions about their health and healthcare (U.S. National Library of Medicine, 2017b).

The NNLM is the core of NLM's outreach program to reduce health disparities and improve health information literacy (U.S. National Library of Medicine, 2017a). The NNLM does this by teaching classes for all audiences, creating educational resources, funding community-based health information outreach projects, and exhibiting at health professional and community events. NNLM's work to address health disparities is largely influenced by government initiatives outlined by the *Healthy People* initiative. The initial *Healthy People 2010* benchmarks did not include LGBT health as a topic. A companion document created by the Gay and Lesbian Medical Association and LGBT health experts was published after the release of *Healthy People 2010* that outlined and discussed the health disparities specific to the LGBT population (Gay and Lesbian Medical Association, 2001). This document was acknowledged by Healthy People and included within Healthy People 2020. The inclusion of LGBT health as a health disparate community allowed NNLM the opportunity to conduct and support initiatives related to LGBT health. In this section, the authors describe several of the outreach and educational efforts conducted by the NNLM in support of LGBTQ+ health.

Since 2004, NNLM has exhibited at Pride events throughout the United States, primarily within the Southeastern/Atlantic region. These events have given NNLM staff an opportunity to directly meet with the LGBTQ+ population in a safe space and learn of their specific health information needs. Health sciences librarians have provided the community access to unbiased, current, and

trusted health information including NLM resources to help them make informed decisions about their health. In addition, NNLM staff have an opportunity to meet with LGBTQ+ community organizations and develop partnerships to support health information outreach.

Meeting with LGBTQ+ community organizations and local libraries supporting LGBTQ+ health information outreach during Pride events expanded NNLM's network membership, which gave NNLM an opportunity to fund their projects. One of the earliest funded projects included development of websites like the Seattle and King County Public Health website to include access to electronic health information to providers of LGBT Health (Public Health, Seattle and King County, 2010). Another example is *Woman to Woman*, a collaborative program to facilitate information access at select community-based women's health agencies in Houston, TX. This program worked with Texas Woman's University, Houston Academy of Medicine – Texas Medical Center Library, Houston Area Women's Center, The Rose, El Centro de Corazon, and the Lesbian Health Initiative at Montrose Clinic to provide one of the earliest online women's health resource inclusive of lesbian health concerns (Huber, Peek, Hughes, & Little, 2003).

The NNLM Southeastern/Atlantic region provides funding for community organizations to exhibit at events where they may be able to share health information to address specific health disparities. One organization, Life University in Marietta, GA, developed an LGBT center on their campus. The librarians at the institution worked with the center to develop a web page that included many of the resources available at the center. However, they wanted to promote the center and resources to the community. NNLM provided financial support for the librarians to participate in Atlanta Pride to inform the community of the new LGBT center and the health information resources available to them (G. Sridaran, personal communication, August 1, 2017). Another partner organization, the Military Partners and Family Coalition (MPFC), has exhibited

at a number of Pride events promoting both their resources to help non-traditional military families but also health information resources provided by NNLM and NLM. Prior to the repeal of *Don't Ask Don't Tell*, the NNLM recognized the difficulties of LGBTQ+ military families without access to healthcare. Under an award provided by NNLM, MPFC conducted a community assessment on the health and mental health needs of LGBT military service members and families. The survey began to identify the impact on LGBT military families denied everything from health insurance, to visiting a loved one in the military hospital, to receiving spousal benefits for fallen service members in combat. The report on mental and physical health of LGBT service members and their partners and families was replicated to assess sexual minority stress and changes in perceived stigma post Don't Ask Don't Tell (National Network of Libraries of Medicine, Southeast/Atlantic Region, 2012).

NNLM also provides outreach education to healthcare professionals. One organization NNLM has supported is GLMA: Healthcare Professionals Advancing LGBT Equality. NNLM has exhibited during several GLMA annual conferences, to share health information resources available to healthcare professionals conducting research and providing healthcare to the LGBT population. NNLM staff have also presented at the conference on specific sub-population information resources, such as for LGBTQ+ elder care (Nguyen, 2015).

In addition to those outreach efforts conducted and financially supported by NNLM, staff also wanted to create a continuing education course. This was developed by a group of health sciences and academic librarians working with two healthcare professionals, and headed by Jacqueline Leskovec of the NNLM Greater Midwest Region. The idea of the course was to help librarians provide quality health resources to LGBTQ+ populations, and the initial content was organized and presented as a one-hour continuing education webinar. Feedback from this initial

webinar was well received, and Leskovec worked with other NNLM staff to help expand the content and develop activities to support a four-hour in-person class. The class, *Improving the Health Safety and Well-being of LGBT Populations*, has been taught regularly since 2015, with over 500 librarians, administrators, and healthcare professionals participating (National Network of Libraries of Medicine, n.d.). Leskovec believes that course content will continue to be timely as political and societal attitudes and our understanding of LGBTQ+ populations improve over time. The expanded continuing education course is currently being developed as an asynchronous online course to be released in 2018.

The activities mentioned highlight some of the outreach and education activities conducted by NNLM regional offices in support of LGBT health. NNLM continues to inform healthcare professionals of the evidence-based resources available to treat LGBTQ+ populations. Additionally, the staff continues to conduct community outreach and develop partnerships to help inform the LGBTQ+ populations as they make healthcare decisions.

Professional information organizations advocating for LGBTQ+ Health

On March 23, 2016 the General Assembly of North Carolina passed House Bill 2, the *Public Facilities Privacy & Security Act* (commonly referred to as HB2), which required individuals to use bathroom accommodations consistent with their assigned gender, restricting transgender citizens from accessing the restroom facilities consistent with their gender identity (Bishop, Stam, Howard, & Steinburg, 2016). The American Library Association released a statement on March 29, 2016, urging that North Carolina Governor Pat McCrory repeal HB2 (American Library Association, 2016).

When the Medical Library Association met shortly thereafter in May 2016, members of the LGBTQ Health Sciences Librarians Special Interest Group (LGBTQ SIG) expressed their concern over the passage of HB2 and created a working group to draft a statement for the MLA Board requesting that MLA adopt a formal position opposing the discrimination codified in HB2. The LGBTQ SIG members stressed the medical evidence demonstrating the negative physical and mental health implications of discrimination against transgender individuals. The statement drafted by the LGBTQ SIG working group was sent to the MLA Board on May 18, 2016, where it was brought to a vote and passed on June 2, 2016.

The following statement was posted in the MLA Public Policy Center:

“The Medical Library Association is greatly concerned about the significant negative health impact of discrimination against transgender and gender variant individuals. MLA opposes recent efforts in North Carolina and other localities to restrict transgender individuals to the use of bathrooms inconsistent with their gender identity, and supports laws and regulations that decrease stigma and discrimination against citizens and colleagues, including individuals who may be members and staff of the Medical Library Association.” (Medical Library Association, 2016)

This public statement, supported by the largest professional organization for medical librarians in the United States, emphasizes the health implications of such laws and is an example of political advocacy undertaken by practicing health sciences librarians. As advocates for access to quality health information and health care, health sciences librarians should feel empowered to work with professional organizations to create statements and undertake political advocacy actions that work towards equal access. Librarians can also consider partnering with healthcare professionals

from other types of professional organizations (e.g., nurses, patient advocates, social workers, physician assistants, physicians) to support their advocacy work.

Towards a Broader Adoption of LGBTQ+ Health Librarian

Advocacy

LGBTQ+ health professionals and consumers have clearly indicated that they want their librarians and information professionals to actively engage with the LGBTQ+ community, demonstrate their solidarity with and understanding of the distinct nature of LGBTQ+ health, and showcase their ability to provide accurate and relevant health information (Morris & Roberto, 2016; Fikar & Keith, 2004). The pioneering projects described in this chapter are early attempts by the health sciences librarianship community to meet this need.

In his landmark book *Diffusion of Innovations*, Rogers (2003) sets out a theory to explain how, and at what speed, innovations will spread through communities and societies. Within that theory, he outlines the characteristics of different categories of adopters of an innovation, starting with “innovators” and “early adopters”, those groups who are the first to run with a new idea and attempt to implement it. Innovators and early adopters are characterized by the ability to “cope with higher levels of uncertainty... [and] not depend upon the subjective evaluations of the innovation from other members of their system” (p. 22) and are often also known as “trailblazers” or “pioneers”. LGBTQ+ outreach by health sciences librarians is therefore, in the view of the authors, a good example of an innovation in the early stages of adoption, and those librarians who have initiated such projects can reasonably be considered to be pioneers in the field.

How close are we to a transition from the “pioneer/trailblazer” period of LGBTQ+ health librarian advocacy work to more widespread and frequent adoption of such interventions? How will LGBTQ+ community health sciences librarianship outreach develop? Through the lens of diffusion of innovations theory, this would be the adoption of such innovations by the “early majority” and subsequent groups, who usually require evidence that the innovation is successful, will be a good use of the adopter’s time and resources, and will not adversely affect their reputation (Rogers, pp. 282-297).

Despite the fact that health librarian advocacy is in its infancy, yet, there are two common features in the case study of the outreach projects in this chapter that provide a useful starting point for speculating on the near future of this field, and guidance for interested librarians considering their own outreach to the LGBTQ+ community.

Common Feature 1: These are projects initiated by individual librarians and not as part of a larger initiative by the librarian’s parent organization.

While the personal motivations and reasons to reach out differ between the librarians, all the projects originated either with the librarians themselves or with groups or colleagues they work with; none were “top down” initiatives from their organizations’ leadership. This is entirely compatible with our view that the librarians could be thought of as “early adopters” or “trailblazers”, starting projects without following anyone’s specific example. Because of this, many of the librarians’ projects are more motivated by a passion for effecting change, without necessarily being concerned about measuring the resulting outcomes; these activities tend to lack formal assessment and not to include consideration of how to make the project sustainable. This may be because they are a pilot project for the implementing librarian, or because of the

difficulties of understanding the full demand on library resources of these projects at such an early stage.

Many of the projects subsequently had minimal assessment, generally limited to metrics such as numbers of visitors to a table at Pride events or numbers of hits on a web portal. Likewise, most of the projects did not appear to include serious plans to ensure long term sustainability. As the importance of demonstrating the impact of outreach projects increases, it will become increasingly necessary to include appropriate assessment and sustainability planning (Farrell & Mastel, 2016).

Common Feature 2: Nearly all of the projects received institutional support and experienced no barriers to implementation.

Most of these librarians discussed above work either for universities or for health care organizations, and nearly all the librarians located by the authors for this study were in North America. With limited exceptions (such as some religiously affiliated universities or health care systems), employers are increasingly focused on creating diverse, inclusive workplaces; in these situations outreach to the LGBTQ+ community would fit within their organizational diversity initiatives. The librarians featured in this chapter did not mention any organizational barriers to their outreach and some specifically mentioned that their employers were supportive of these efforts. There is firm evidence that grassroots outreach initiatives to the LGBTQ+ community can be embraced by employers and in some cases even become part of the organization's greater diversity efforts; Kaiser's LGBTQ Summit is an excellent example of this, and Parker's collaborative subject guide is another. Academic and hospital health sciences librarians not currently engaged in LGBTQ+ outreach but interested in trying it may find institutional support

and few barriers from their diversity-minded employers. However, cultural and legal challenges in some institutions and in many countries may prove to be barriers for some librarians wishing to attempt similar projects (Altman et al., 2012).

When viewed in the context of grassroots activism through outreach by individual librarians, a similar parallel may be seen in the activism of professional organizations. The Medical Library Association's statement against HB2 is an example of grassroots activism at leadership levels in the profession. The proposal came from members in the LGBTQ SIG, not from the higher organizational leadership, although the statement certainly fit within the greater organizational goals as well. Members of other professional organizations who are interested in creating change and advocating for LGBTQ+ issues should not be afraid to initiate their own proposals to their organizations' leadership, as their proposals will most likely will fit within larger diversity statements and goals.

How can the case study analysis in this chapter inform, influence and improve the practice of health science librarians? Considering these two common threads which attract early majority adopters, including likelihood of success, efficient use of resources, and limited risk to reputation, the authors believe that it is highly likely and desirable in the next few years that the evidence base will be expanded and more intersectional approaches will be adopted when tailoring services to specific groups within the LGBTQ+ community. The following are specific actions that librarians may wish to consider taking and which, in the authors' opinions, may bring librarianship closer to these broader aims.

Formalizing assessment of interventions and expanding the evidence base

For health librarian LGBTQ+ outreach projects to become more widely adopted, the authors believe that more work is first required by the profession to prepare the ground. In their 2017 article on the future of LGBTQ+ health librarianship, several of the authors of the current chapter make the case for a “toolkit”, or evidence base of appropriate interventions. The development of this toolkit would call on librarians to “implement and evaluate these and other possible strategies in their institutions and make the results publicly accessible, for example, through publication as journal articles” (Hawkins, Morris, Nguyen, Siegel, & Vardell; 2017).

This chapter aims to contribute to fulfilling part of that requirement by describing the implementation of a variety of successful interventions. In discussing these interventions, the authors have frequently described them as “pioneering”. In the view of the authors, the three necessary next steps in ensuring that such projects are more widely implemented are (1) more formal assessment of such interventions, including qualitative research such as surveys and focus group with targeted populations, (2) consideration of how to make such projects sustainable and repeatable, and (3) publication of such assessments and considerations in the literature of health librarianship. The authors recommend that, as more librarians attempt their own outreach projects, they share their experiences in publications and other venues to create a larger body of work on this topic, allowing others to execute and sustain their own outreach projects with greater confidence and success.

More precisely targeting LGBTQ+ subgroups

The LGBTQ+ community is not homogenous, and LGBTQ+ identity is not the sole identifying demographic of any member of the community. Rather, each person is the sum of many diverse aspects which together are the basis of their social identity. Members of the LGBTQ+ community can be described by other facets as well: language, race, gender, religion, disability, and more. This intersectional nature of members of the community therefore means that there is no one type of information need for everyone. Therefore, it is desirable to tailor outreach to certain smaller groups to provide appropriate information and resources. The Florida International University project, focused on the sexual health of transgender Latinas, is one example. Another potential example is to produce visually accessible health information in sign languages for LGBTQ+ D/deaf persons (Morris, Saunders, & Iantaffi, 2017). Even for those librarians who themselves identify as part of the LGBTQ+ community, it may be necessary to build cultural competency for demographics outside of their experience, such as for collaborations with indigenous peoples or people of different faiths.

In the United States changes in the law over the past ten years have enabled LGBTQ+ individuals to enjoy equal access to spousal health insurance coverage and protection from discrimination due to pre-existing conditions (examples which previously fell under this umbrella include being transgender and having HIV/AIDS). As of the publication of this book, legislation is on the table across the United States that aims to strip away many of the protections included in the Patient Protection and Affordable Care Act (ACA). Health sciences librarians can continue to partner with library science and health care provider professional organizations to create position statements, such as that published by MLA in response to HB2, and undertake political advocacy work to speak out against restricting access to healthcare.

A Strategic Action Plan for LGBTQ+ health library outreach

The analysis conducted by the authors suggests a number of broad strategic aims for the future development of LGBTQ+ health librarian advocacy. In the view of the authors LGBTQ+ health library advocacy has come of age, and enough work has now been done to allow a more formalized and strategic approach. In order to create a better documented, evidence-based approach, the authors recommend the following strategies.

Going from “pioneering” to “everyday practice”

- **Promote greater institutional buy-in**
- **Encourage institution-initiated projects by demonstrating impact/success and reducing risk**

A health sciences librarian interested in conducting LGBTQ+ health outreach is conducting pioneering work and currently has no place to go to for advice on what works and what does not work. The authors advocate that those librarians who have conducted successful projects write about these projects for the professional literature in order to increase the evidence base, and to reduce perceptions that such outreach projects carry risk of failure or damage to the institution’s reputation.

Librarians also need other resources in order to effect their outreach projects, such as finances, materials, labor, and community connections. Publishing advice on how successful outreach projects were conducted, and formally pointing out their successes and the benefits to their parent organizations, are likely to make it easier for librarians to obtain these resources, by encouraging buy-in from more senior members of the institution’s administration. As the number of successful outreach interventions in LGBTQ+ health increase, they will be seen less as

“pioneering” and more as a standard part of the everyday work of an institution, thus normalizing this work.

Greater targeting for higher impact of projects.

The LGBTQ+ status of a person may not be the only thing to consider when designing successful health information outreach programmes. Other factors may also come into play, such as a person’s race, age, or disabilities. It may therefore be important for health librarians to think about the intersectional needs of their target audiences, and not just to focus on their sexual orientations and gender identities. Examples described by the authors above include work with transgender people, with LGBTQ+ D/deaf people, and Latinx people.

The successful conduct of such intersectional projects will involve building proficiency in working with members of the affected communities, and developing a deeper knowledge of and sensitivity to those specific needs; these may be both health information needs and communication needs. As LGBTQ+ health information outreach becomes more standard, the authors believe that the community of professional health sciences librarians will gain greater skill in intersectional outreach projects. To pave the way for this development, the authors advocate that more emphasis be placed on intersectionality in training given to librarians, and that steps be taken to develop links between institutions and these communities.

Greater targeting and higher impact of projects. While the standardization of outreach activities is useful to provide samples of how to proceed, the communities themselves will have specific health needs beyond LGBTQ+ identities. It is important for librarians to think about the intersectional needs of their target audiences and not just focus on their sexual orientations and gender identities.

Encouragement of projects between organizations. Outreach is more successful when it is not a solo venture. Joining with local LGBTQ+ organizations and other sources of knowledge and expertise can help to identify and address unmet community's health information needs.

Additionally, there may be other institutions and organizations interested in partnering with your institution, such as public health departments, public libraries, colleges and universities, and hospitals.

Broader acceptance in the profession of the need for LGBTQ+ outreach work. In the view of the authors, if a national professional body does not have a special interest group working in the area of LGBTQ+ health (such as those within MLA and ALA) such a group should be established. However, advancing LGBTQ+ health issues within librarianship involves more than just the existence of such subgroups; it requires advocacy by the members of these groups to address societal issues that affect both the health of individuals and of the broader community. Librarians have a central role to play in bringing up issues that affect the health of the LGBTQ+ community and recommend actions by their parent organizations.

Take in Table 1

Conclusion

Health sciences librarians serve as information advocates, creating resources in a time when access to accurate and balanced information can be challenging. Librarians have found Pride festivals, workshops, and professional conferences to be fruitful ground for building relationships with community partners and providing critical information to improve patients'

lives. The authors encourage all librarians — health sciences and others — to consider engaging with their local LGBTQ+ community. You will likely be going where few others have, but the trailblazing journey will produce ripple effects, creating positive change for countless people.

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Appendix

Appendix A: Case Study Interview Questions

1. What prompted your (or your library's) involvement in your project?
2. Details of project: Target populations, Type of intervention, Partner organizations (e.g. local health department, public library, LGBT community groups)--Did they approach you first?
Or did you approach them? Was there a previous relationship?
3. Any barriers to implementation? (e.g. funding, time, prejudice of non-LGBT individuals)
4. How did you assess your success/impact? Any lessons learned?
5. Future plans. Plans for continuing or expanding? How much feedback have you had from other libraries/librarians and the wider community?

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Table 1: Suggested strategic aims and associated recommended actions

Strategic Aim	Recommended Actions
<p>Going from “pioneering” to “everyday practice”: Promote greater institutional buy-in; Encourage institution-initiated projects by demonstrating impact/success and reducing risk</p>	<p>Create a body of evidence through proper documentation of initiatives such as publication of case studies, including formalized assessment - and ideally involving an assessment librarian. This would foster greater institutional confidence in initiatives and greater repeatability and sustainability of initiatives.</p> <p>Offer greater availability of training for librarians in LGBTQ+ health information, and promote greater prominence given to such training by those developing continuing education programs.</p>
<p>Greater targeting and higher impact of projects</p>	<p>Develop links between health librarians and community organizations working with LGBTQ+ people.</p> <p>Place a greater emphasis on intersectionality in the training given to librarians, to develop</p>

	<p>an increased understanding of the needs of those in minorities, and particularly those in multiple minorities (e.g. Latinx LGBTQ+ people, transgender people of color).</p>
<p>Encouragement of projects between organizations</p>	<p>Join with local organizations to identify unmet information needs and potential outreach partners</p>
<p>Broader acceptance in the profession of the need for LGBTQ+ outreach work.</p>	<p>Develop (and create, if necessary) regional and national LGBTQ+ health librarian bodies, such as the MLA's LGBTQ SIG.</p> <p>Encourage national professional bodies to publish supportive statements</p>