

Health Information Literacy

An Opportunity for Public and School Library Partnership

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INTRODUCTION: LITERACY and INFORMATION LITERACY

Literacy is the cornerstone of education in America. Reading, reading comprehension, and critical thinking are the basic skills upon which all learning rests. We have not yet achieved our national goals for proficiency in these areas¹ and we are faced with a new information paradigm² that adds technical competence to the aforementioned set of necessary skills. “Information Literacy is defined as the ability to know when there is a need for information, to be able to identify, locate, evaluate, and effectively use that information for the issue or problem at hand.”³ [SLIDE 2] Information literacy pertains to (1) a set of skills designed to increase information-seeking proficiency and (2) a process of steps that will identify both the need for information and the accurate, applicable information, itself.

Librarians foster information literacy in elementary and secondary school students across Texas by teaching them to access and effectively use resources and to evaluate the content for relevancy and accuracy. These students interact with electronic resources, with varying levels of access and various degrees of success, to identify information of academic and personal value. Some experts feel that the digitization of information has changed the very nature of access to information and therefore, the role of libraries and librarians.

HEALTH INFORMATION LITERACY

It is imperative that young people increase their health literacy skills so that they learn to make healthy lifestyle choices. For example, the increasing percentage of overweight children is a public health challenge⁴. [SLIDE 3] Excess weight and obesity can lead to a number of other health conditions including diabetes, which can be associated with other maladies⁵. Information is available from reliable online resources on nutrition, exercise, and other healthy living practices that could help Americans improve this situation, but according to the Institute of Medicine Report on health literacy, “90 million people – have difficulty understanding and acting upon health information.”⁶ School and public librarians can assist teachers in identifying materials (appropriate age and interest level) to incorporate into the health curriculum. They can teach students to increase their health literacy.

Health Literacy is defined as ““the degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make

appropriate health decisions.”⁷ [SLIDE 4] Health Information Literacy, then, can be defined as “the set of abilities needed to: recognize a health information need; identify likely information sources and use them to retrieve relevant information; assess the quality of the information and its applicability to a specific situation; and analyze, understand, and use the information to make good health decisions.”⁸ [SLIDE 5] Just as people with low literacy process information less effectively, those who have “low health literacy tend to have poorer health and higher hospitalization rates.”⁹

In 2006 the average Scholastic Aptitude Test (SAT) reading score for Texas students was nine points below the national average (491 compared to 503 out of a possible 800).¹⁰ Although this is not the only literacy indicator, this test is a measure of reading comprehension. Readability is an issue of consideration when accessing health information.¹¹ Health concepts and terminology can challenge accomplished adult readers. Readability of accessible information must be a consideration for secondary school students.

How, then, can high school students become proficient in identifying and accessing relevant, reliable health information (in language they can understand) that they can apply to their lives and the lives of their families and communities?

HEALTH INFORMATION and the TEXAS STATE CURRICULUM

The Texas Education Agency requires that secondary schools “have one semester of health instruction to meet graduation requirements and, in middle/junior high school, health education is a part of the required curriculum, although the time devoted to it is a local decision.”¹² The Texas state-mandated curriculum, Texas Essential Knowledge and Skills (TEKS), provides the content for health information proficiency.

Implementation of Texas Essential Knowledge and Skills for Health Education, High School. (Texas Education Agency §115.31.)¹³

Health 1: Grades 9-10 for one-half credit (§115.32.) [SLIDE 6]

This extensive curriculum seeks to empower students to become healthy and health-literate adults. Students are expected to acquire the necessary health information and skills that include how to:

- Access accurate information that they can use to promote health
- Examine the effects of health behaviors on body systems
- Identify personal behaviors that can increase or reduce health risks
- Utilize critical thinking and communication skills to protect their health
- Understand their responsibility for their own and their community’s health

Topics in Health 1 include: alcohol, tobacco, and other drugs; nutrition; sexual health; violence

Advanced Health: Grades 11-12 for one-half credit (§115.33.) **[SLIDE 7]**

Building upon the introductory level (Health 1 is a prerequisite), this curriculum requires students to:

- Research, analyze and discuss health issues
- Investigate community health promotion sources and design materials
- Utilize valid health information sources
- Understand influencing factors such as economics and the environment
- Participate in health education and health promotion in the community

ACCESS to RELIABLE HEALTH INFORMATION: THE SCHOOL - PUBLIC LIBRARY CONNECTION

School health education curriculums are one source for effective community partnerships¹⁴. The curriculum goals and objectives have been established for Texas high school students. Opportunities for public and school libraries outlined here are based on current resources available at the Dallas Public Library (DPL) and the Dallas Independent School District (DISD).

There already exists a partnership between these two systems. DISD conducts a district-wide registration for Dallas Public Library cards to provide all students with easy access to the twenty-six locations. Over the years, school library media specialists have collaborated with public librarians regarding school assignments. When teachers communicate their information needs to school librarians who then communicate those needs to public librarians, an entire library system becomes available to a single class.

As a Youth Librarian for Dallas Public Library in the mid-nineties, I worked with twenty-two public school librarians. I would collect books from the entire DPL system and make them available for school librarians to borrow for class projects. Only one librarian took advantage of this consistently, one or two others did so occasionally. The new technology paradigm offers more, not fewer, opportunities to gather materials. Links to electronic resources can be gathered in less time and with greater speed. School and public librarians can share responsibility for updating the lists.

Dallas' estimated population of over 1,210,000¹⁵ is served by 26 public library facilities with a total of 7,629,483 volumes.¹⁵ There are close to 40,000 students attending thirty-seven high schools. Next, we will take a quick glance of the resources available to these students.

Online and Print Resources at DISD

Library budgets are shrinking across this nation. I would like to say that Texas is different but, with the rising cost of resources, many of us have been forced to make hard decisions about purchasing print and electronic resources. Through TexShare, the district has access to electronic resources that might not have fit into the budget. [SLIDE 8] Literally thousands of results were retrieved in a simple search on diabetes which, impacted by uninformed health choices, is on the rise. Of course, the overwhelming number of these hits will not be relevant for each inquiry, but even a basic search will retrieve some pertinent information. Proper training will increase retrieval relevancy. Remote access is also available.

Using the same term – diabetes – to search the district’s online catalog retrieves close to 200 items. Again, not all retrieved items will be relevant or comprehensible to a teen audience. Three different search modes are available to identify fiction and nonfiction print as well as audiovisual materials.

Online and Print Resources at DPL

Six health sites are available at Dallas Public Library through TexShare. [SLIDE 9] EBSCO’s *Health Source – Consumer Edition* (with basic and advanced searching modes) offers search prompts such as “DIABETES in adolescence” to limit retrieval from over 4,000 results down to forty results. *Consumer Health Complete*, another EBSCO database, has medical images and news as well as information on traditional and herbal medications and health treatments. Some information is available in English and Spanish. Full text and remote access are also available to these and other databases. In fact, the DPL Teen Center home page links to remote access to the EBSCO databases.

The Dallas Public Library online catalog also offers remote access. School librarians should become familiar with the catalog, make it readily available in the library media center, and suggest that teachers allow the same access in the classroom. Books and audiovisual materials for and about teen health are available to all Dallas teens with an active library account. Again, books can be requested from any DPL location to any other. Interlibrary loan is also available. One possible barrier to service, however, might be the fines levied on overdue materials.

Research shows that accessibility to reliable health information is not enough. As teens learn to identify and locate information, they must then learn to evaluate for content, applicability, and learn how to effectively use the information to resolve the problem. There are several websites available (most notably MLA and MedlinePlus) that provide insight into these tasks. Even with all of this, there is another necessary ingredient – motivation. A class assignment with an impending due date has not always proven to be sufficient motivation. Dry, colorless websites will not engage this DVD, iPod, web

surfing generation.¹⁶ School and Public librarians must connect students to sites that will engage them, maintain their interest, and provide information they can understand¹⁶ and use.

A Partnership Model

Health is a searchable topic on the Teen Center ‘Teen Reads’ page. All links, however, link to .com pages. A task force comprised of both public and school librarians could create links to reliable (HealthFinder.gov, TeensHealth.gov, etc. [SLIDE 10]) health web sites with teen-friendly information. Many government agencies offer free publications, several will ship in bulk (for the cost of shipping.) The National Network of Libraries of Medicine (NN/LM) sponsors educational opportunities for public librarians interested in learning about access to reliable health information for diverse populations. Public librarians who participate in such training can collaborate with school librarians¹³ by: (1) inviting them to NN/LM classes that they host, (2) sharing the information (formally or informally) with them after they have acquired proficiency, and/or (3) visiting high school libraries/classrooms to teach the students directly.

Dallas Public Library has Teen Centers in four of its twenty-six libraries – Hampton-Illinois, Martin Luther King, Jr., North Oak Cliff, and Skyline. All four centers are located in the city’s southern sector. High school (and middle school) librarians can collaborate with the young adult librarians on programs such as teen (and community) health fairs, anti-smoking campaigns, publishing a health newsletter, and teen health web site development.

Okay, so what if you are in a city with one public library and a small school district? How does any of this apply to you? Cities with smaller public library and school systems have an even greater need to form health information partnerships. You probably already collaborate on other library materials and programs; just add the health component to what you are doing. You might be able to enlist the participation (and consequently, the resources) of private schools as well. And, as I have mentioned, there are many free print and online resources to which you have access, several written at tenth grade reading level and lower. The bottom line does not always have to be the dollar sign. The bottom line should be a better informed population and a healthier community.

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