

**Samantha Burdett**  
**The University of Western Ontario, London, ON**  
**Dr. Flis Henwood**  
**University of Brighton, Brighton, Sussex, UK**  
**Dr. Roma Harris**  
**The University of Western Ontario, London, ON**  
**Audrey Marshall**  
**University of Brighton, Brighton, Sussex, UK**

## Mediating the Digital Health Divide : A Role for Public Libraries?<sup>1</sup>

**Abstract:** Preliminary findings are reported on a study of health information seeking in public libraries. The study's objectives are to identify how public libraries fit into people's information landscapes, identify challenges in supporting users in health information seeking, and contribute to the debate about the role public libraries can play in promoting healthy communities.

**Résumé :** Les résultats préliminaires d'une étude sur la recherche d'information dans le domaine de la santé dans les bibliothèques publiques sont présentés. Cette étude a pour objectifs d'identifier la manière dont les bibliothèques publiques s'ajustent à la perspective informationnelle des individus ; de mettre en relief les défis rencontrés pour soutenir les individus dans la recherche d'information sur la santé ; et de participer au débat sur le rôle que les bibliothèques publiques peuvent jouer dans la promotion des communautés en santé.

### I. INTRODUCTION

Investment in IT infrastructure by various levels of government has resulted in most libraries, schools and community centres in both Canada and the UK being connected to the worldwide web. Access to online resources, coupled with authoritative content from government health agencies, appears to be an ideal combination to facilitate citizens' access to health information, particularly in public libraries where reference staff are available to facilitate patrons' search for health information. Although there has been a considerable amount written about the ways in which public libraries might deliver health information support services, see for example, Baker and Manbeck (2002), there has been little empirical research focused on just how the internet is used, either by library staff or library users, to support health-related queries. Ross and Nilsen, in their 2000 study of library visits, found that a large number of reference encounters did *not* include use of online web resources. Surprised by the results, the authors suggest that by "treating the Internet as an alien space, reference staff are abdicating their traditional role as intermediaries between stores of information and users who need access to information" (Ross & Nilsen 2000, 154).

As governments continue to invest heavily in ehealth initiatives, there is a need for research into how citizens find and use health information (on- and off-line) and how public library reference staff function as intermediaries in the search process. The study reported here explores how public libraries fit into people's wider information landscapes and the challenges involved in supporting patrons' health information

seeking. We hope this work will contribute to the debate about the role public libraries play in promoting healthy communities.

## II. LITERATURE REVIEW

Access to reliable health information and health care services are of major concern to people living in the UK and in Canada. Governments in both countries are spending billions of dollars in new „healthy living“ initiatives and encouraging citizens to become active participants in their own healthcare. Information and communication technologies (ICTs) are seen to be key tools in promoting healthy living, and increasing access to health care services. For instance, the People’s Network in the UK and Industry Canada’s Community Access Program (CAP) are examples of significant IT initiatives that have put internet-enabled computers in community centres, schools and public libraries across both countries. Through such initiatives, citizens in the UK and in Canada are deemed to have ready access to the internet and government-sponsored online health information that will enable them to make informed choices about their own health care.

In the UK and Canada, public libraries play key roles as information sites for community members. Librarians are trained information intermediaries who are able to locate, retrieve, select and evaluate information relevant to the needs of library users. Although public libraries have long been a source of consumer health information, the presence of the internet has resulted in an enormous increase in the amount of information available and the range of access points to that information (Gillaspay 2005). In their 1991 study of legal and health information services in public libraries, Dewdney *et al.* found that five to ten percent of reference enquiries involved legal and health information topics (1991, 185). Borman & McKenzie’s more recent study of public libraries and consumer health information indicates that 6-20 per cent of reference requests in public libraries are health-related. This number rises to sixty per cent in libraries with science and technology departments (Borman & McKenzie 2005, 133). Even patrons who have internet access in their homes continue to depend on libraries for help in locating “appropriate, understandable health and medical information” (Huber & Snyder 2002, 41).

A number of recent articles (see, for example, Kouame *et al.* 2005; Ross *et al.* 2002) explore some of the barriers to providing good consumer health information services in libraries. For instance, some librarians are intimidated by health-information requests and so do not probe for information as much as they would on other less personal topics. Many libraries do not have adequate policies, procedures and staff training to assist reference staff who must tread a fine line between assisting patrons in search of health information, yet stop short of providing what might be regarded as „health advice“. Limitations in library collections and a general lack of expert knowledge in a rapidly changing subject area are also potential obstacles to good health reference services (Dewdney *et al.* 1991).

In their 2000 examination of library visits, Ross and Nilsen found that few librarians turned to free online web resources during the course of a reference encounter and that “the Internet was treated like a separate institution, with which the library had little affiliation” (2000, 153). Although reference staff frequently instruct library users

in the use of online public access catalogues (OPACs), they seldom provided library patrons with similar instruction in how to use the internet to find and evaluate sources of information. Similarly, in a study of public libraries' responses to the 2002 SARS crisis in Toronto, Harris *et al.* (2005), argued that while the situation was not only a health crisis but an information crisis, the library staff they contacted were largely unable to provide current, accurate information about the situation or appropriate referrals.

As Baker and Pettigrew (1999) have rightly argued, LIS research in the field of consumer health information seeking has tended to be under-theorised, limiting the value of research findings. They have suggested that there are two theoretical frameworks that may be of value in understanding the dynamics of the health information search process. From psychology, Miller's theory of „monitoring and „blunting is considered promising. This theory posits „behavioral style as an explanation for why, when faced with similar health circumstances, some people actively seek, and others actively avoid, information (Miller 1987 cited in Baker & Pettigrew 1999). From sociology, Baker and Pettigrew suggest that Granovetter's notion of the „strength of weak ties (from a larger body of sociological theory on social network theory) might be used to better understand the sources health information seekers consult or rely on to make sense of their situations (Granovetter 1973, Granovetter 1982 cited in Baker & Pettigrew 1999). To these two frameworks, one might add Dervin's theory of „sense-making which suggests that the situation and the way in which the individual perceives his or her situation is important in understanding their approach to information seeking (Dervin 1983 and Dervin *et al.* 1976 cited in Pettigrew *et al.* 2002). The present study has been designed with these different theoretical approaches in mind and our analysis will attempt to identify both psychological and sociological factors shaping health information seeking and use practices in specific contexts. Within this more „situated approach to theory development two issues are of particular interest. Firstly, we will seek to identify whether the specific health circumstances faced by individuals determine whether they actively seek or actively avoid information, and secondly, we will explore how far and in what ways, library staff and the intermediation they provide, actively contributes to the development of monitoring and blunting behaviours amongst library users.

In the present study, the expectations of public library users and library staff members are explored regarding the public library's role in providing support for health information. The work, based in a public library setting in the UK, builds on a preliminary study conducted in Canada.

### **III. DESIGN & METHODOLOGY**

This project is part of a large program of research called Action for Health (Act4Health), funded by the Social Sciences and Humanities Research Council of Canada, which is concerned with the ways in which use of information and communication technologies (ICTs) are used in the organisation and delivery of health information and health care. Within this program a major theme is concerned with lay users of health information specifically, and each project within this theme

examines the interaction between users, technology and information. Some of the questions that this theme addresses are:

- How do different levels of literacy affect public consumption of health information?
- How do human and computer information helpers affect the consumption of online health information?
- What roles do information intermediaries fill when people seek information via computers? (ACTION for Health November 17, 2005)

In 2004, a pilot project was undertaken at the main branch of a large metropolitan library in Western Canada to explore the role of the public library patrons health information seeking. Of particular interest was whether library patrons consulted the internet prior to seeking help from the library, or planned to consult the internet after obtaining assistance from the library. Findings, based on surveys completed by 50 respondents, suggested that:

- Before talking with the reference librarian, other information sources consulted included the internet (general browsing, search engines, chat rooms/bulletin boards), medical professionals, and independently searching the library.
- After leaving the library, respondents indicated (in order of frequency) that they would look for more information on the internet, that they had the information they needed, that they would talk with a medical professional, or that they would visit another library or use other library resources.
- 33% of respondents were planning to visit a doctor regarding the health condition/issue they were seeking information about
- 33% were seeking information on behalf of someone else
- The most trusted sources for health information were books & magazines (62%), the internet (24%), librarians (16%), family / friends (14%), nurses (12%), and pharmacists (12%)

The study described here extends this work, focusing on visitors to a public library in the UK who are seeking information related to health. The project explores both staff and user experiences and expectations about the provision of health reference services. The site of the study is a central branch of a large public library in Southeast England. Visitors to the library are approached by the investigators and invited to complete a questionnaire about how they search for health information. A subset of respondents are also invited to participate in an in-depth semi-structured interview which explores how they use and assess the value of various health information sources, including the public library, the role of library staff in mediating their information-seeking, and how they use the health information they are able to locate in (or through) the library. In addition, staff members who work on the enquiry desk in the library have been invited to participate in a semi-structured interview which explores how they support library users to find health information and their views of the role of the public library vis-à-vis health information.

#### **IV. RESULTS**

The study is still underway. In this paper, we report our preliminary findings.

Our research area was well sign-posted and the researcher sat in a central area of the library with additional signs advertising the project. The vast majority of health-related materials are housed on the second floor of the library. Reference and circulating materials are shelved together; the library uses the Dewey system. There is one reference desk as you enter the floor with two work stations. The library is a busy central branch and the traffic on the second floor was rarely slow, the enquiry desk often had long line-ups of patrons waiting to speak to a reference librarian<sup>2</sup>.

## WHO IS LOOKING FOR HEALTH INFORMATION IN THE LIBRARY?

Library users participating in this study are people who were actively looking for health information on the day that they were asked to take part. Of these, nearly 70% are female; 60% are between 20-44 years of age with 5% over 75 years of age; 15% of participants live in households with dependent children; 44% are employed; 15% are retired; 7% identified as non-white; and 20% self-identified as lesbian, gay or bisexual.

Table 1 provides a comparison between our sample and the demographics for the library and the city as a whole. Not surprisingly, a larger proportion of our sample is female which corresponds to other findings that women make up the largest proportion of health information seekers. Our study includes a larger proportion of retired people than the larger population, again, not surprising as it could be expected that older people would have more health issues and so would use the health collection more than younger library users. The participants within our study are more diverse than the larger library or city populations in terms of both ethnicity and sexual orientation.

TABLE 1: Participant Demographics<sup>3</sup>

Community Profile	Participants	Library	City
Male	31	49.5	48.4
Female	69	50.5	51.6
20-44 years old	60	49.5	41.5
45-74 years old	35	25.2	28.5
75+ years old	5	7.3	8.6
Households with dependent children	15	19	22.6
White	88	93.8	94.3
Black	4	0.9	0.8
Asian	1	1.8	2.6
Mixed	2	2.2	1.9
Other	3	1.3	1.1
Employed	43	50.5	49.7
Self-employed	12	10.6	10.4
Students	13	8.3	7.1
Retired	15	8.8	11.4
LGBT	20	-	15
Heterosexual	80	-	85

## THE LIBRARY IN THE WIDER INFORMATION LANDSCAPE

Nearly one quarter of the people that we have surveyed so far indicated that the public library would be a most likely source for seeking health information. Nearly half

(47%) indicated that the Internet would be one of their most likely sources for health information. Doctors, books, magazines and friends and family also figured prominently. Table two provides the full breakdown of most likely sources from the data collected so far.

TABLE 2: Most Likely Sources for Health Information

Source	Percentage
Look on the Internet	47
Ask your GP/Doctor	41
Check health books or magazines	38
Ask friends or family	33
Visit or contact the public library	24
Ask another health care professional	15
Ask a pharmacist	12
Visit a health food store	11
Visit a walk-in health centre	5
Phone NHS Direct	2
Other	1

Sources which people indicated they would never turn to for health information included visiting a walk-in health centre<sup>4</sup> (61%), asking NHS Direct<sup>5</sup> (55%), asking in a health food store (31%), looking on the Internet (20%), and asking a pharmacist (19%).

The low number of participants identifying NHS Direct phone line as a likely source for health information was surprising but in an early interview a library user mentioned that she wouldn't think to call them "just for information" as she regarded NHS Direct as an *emergency* service<sup>6</sup>. This is something that we will follow-up with in subsequent library user interviews.

Very few library users indicated that there was any one source of health information that they trusted absolutely. Doctors, libraries and other health care professionals, however, all ranked very highly. Table three provides the ranking of trust in health information sources by participants in this study.

TABLE 3: Most Trusted Sources of Health Information<sup>7</sup>

Source	Percentage
Your GP / Doctor	82
Public libraries	69
Other health care professional	67
Friends / family	58
Pharmacist	56
Health books or magazines	50
Walk-in health centre	41
Online health information services	38
Other	34
Health food store	30
NHS Direct telephone service	28

Participants were asked if they had looked for health information elsewhere before coming to the library that day, thirty-eight percent said yes but sixty-three percent had

not looked for information anywhere else. The most common sources of information prior to their library visit were, not surprisingly, doctors (23%), online health sources (23%) and other health books and magazines (19%). Only eleven percent of participants cite family or friends as a source of information prior to coming to the library. Other studies have consistently reported friends and family as one of the main sources for all types of information so this number does seem low but could be explained by people not considering friends or family as a real source of information – this is something that will be explored in much more detail in the interviews. Other public libraries were cited as a source of prior information by five percent of participants.

About half of the library users that we surveyed had come specifically to the library to look for health related information. Half were in the library for another purpose and decided to look for health information while there. In our interviews with library users it will be interesting to see if there are any differences in information seeking between the two groups. Nearly seventy percent of our participants were looking for information for themselves, fourteen percent were looking for information for family members, seven percent for friends; three percent identified the information that they were looking for was for someone in their care; and another three percent indicated that the information was for work, school or college. Previous studies have indicated higher incidents of health information seeking for others; further questionnaires and our interviews may provide more information in this area.

Perhaps corresponding with the fact that half of the participants came into the library specifically that day to look for health information, forty-eight percent of participants indicated that they were looking for something related to a specific health problem, condition or treatment. Another forty-five percent were looking for information on general self-help, diets, food or exercise – this may be an exaggerated number as our data collection took place early in the year when New Year's resolutions are still top of mind and fitness and healthy living issues are prominent in the media. Table four provides a breakdown of the range of topics of interest to our participants.

TABLE 4: Health Topics Looking For

Response	Percentage
Specific health problem or condition	31
Specific treatment	17
General self-help material	17
Diets / food	15
Exercise	13
Other:	7
Learning Material	
Autism / Mental Health	
Alternative Therapies	
Specific mental syndromes and ailments	
General health issues	
Breast care	
Herbal medicine	
Nutrition	
Information about drugs	
Local health services (e.g. doctors / dentists)	2

Participants were asked which parts of the library service they *intended* to make use of when they came into the library and which they *actually* made use of. There was very little variation between expectations and actual use, with a slight increase in relation to using books within the library. Few library users came to the library expecting to ask a member of staff for help or to go online. Table five provides a comparison of users' expectations and their actual use of the library service.

TABLE 5: Expectations and Use of the Library Service

Response	Percentage who expected to use this element of the library service	Percentage who actually used this element of the library service
Books to borrow	46	45
Books to use in the library	37	40
Internet access (on your own)	8	6
Newspapers / magazines	4	4
Staff help in finding relevant information	3	3
Staff help in using the internet	1	0
Staff help in understanding and interpreting health information	0	0
Other:	2	2

Following on from users' expectations of the library service, participants were asked to match their search that day with a range of statements from "I found what I was looking for" to "I gave up". Table six provides the full list of statements. Fully two thirds of users found what they were looking for on their own; this is not a particularly surprising statistic as this particular library service has a very strong element of self-service for users. Staff work stations are generally out of sight and there is only one enquiry desk on the second floor and one general enquiry and circulation desk on the ground floor. The vast majority of library users check-out and check-in their own library materials.

TABLE 6: Results of Search

Response	Percentage
I found what I was looking for on my own	66
I could not find what I was looking for on my own and gave up	13
I was doing fine on my own but ran out of time	8
I could not find what I was looking for and asked for help	3
I had help from library staff and they found what I needed	3
I had help from library staff but they could not find what I needed	3
I had help from library staff and found them very caring/supportive	2

Preliminary interviews that we have done with library staff indicate that staff do feel that the library service is meeting the needs of users, however, a number of staff have identified the self-service philosophy of the library service as an impediment to good reference service. Long line-ups at the enquiry desk are frustrating for users; our researchers witnessed a number of people giving up after waiting in line for help. Lack of time did come up in response to this question a number of times, for example,

one comment read “Was going to use library computer to find book, couldn't use it, gave up, can't be bothered to ask. If I had more time then maybe I would”.

The library is in a new building that has been open for less than a year. Plans for the new central library were in the works for a number of years and expectations within the community for what it would deliver once opened continue to be high. Both within the local media and anecdotally from staff, the main complaint from patrons is a loud „more books”. This sentiment is reflected in the questionnaire responses to the question which asked if there was anything the library could have done to have made the search easier. Some of the comments are grouped below:

#### General comments on lack of resources

- “Wider selection of books. No mixing health books with quackery and woo books”
- “Larger variety of books”
- “There are not enough books selection. The library needs more books”
- “The library doesn't have many books dedicated to health”

#### Comments on lack of specific resources

- “I would like that the library improved the psychological branch and that there were more books about childhood's problems. Thanks.”
- “A few more books on the subject I was looking for (nutrition) would be nice – more choice”
- “There could be a wider range of books on Homoeopathy”

#### Comments on the organization of the collection

- “Sections clearly dealing with specific illnesses – divided into “conventional” and „alternative” categories”
- “A lot of books seem to be waiting to be shelved – been like that for over a week!”
- “Alphabetise the books – organize each section – clearly mark subheadings – i.e. all health issues are mixed together. If they are in categories, they are not clearly marked”
- “Other than just having more books, possibly marking sections off on the shelves rather than on end of rows”
- “Clear sub headings”

From our own questionnaire results and from staff interviews we know that most library users do not approach staff for help within the library and yet without talking to staff or „knowing the system”, most library users will not be aware that there is a large collection of books in backroom storage that staff can retrieve for them or that they can reserve material that is out on loan.

Participants were asked if they would be going anywhere else for information or advice on the topic that they had been looking for that day. Just over half indicated that they would. Of those who indicated that they would be looking for more information and / or advice, nearly one third indicated that they would look online, nineteen percent planned to return to the library and only ten percent indicated that they would refer to their doctor. Table seven provides a breakdown of where library users planned to take their information enquiry.

TABLE 7: Sources for Follow-up Information

Response	Percentage
Look on the Internet	31
Return to this library at a later date	19
Refer to health books or magazines	12
Visit your GP / Doctor	10
Ask friends/ family	10
Visit another health care professional	5
Visit a health food store	4
Visit or contact the public library	3
Other	7

A number of people indicated „other“ as a response to this question, some of their answers are as follows:

- “Go to another library that is more organized”
- “Discuss with colleagues. Health Promotion Library”
- “Borders Book Store”
- “Go to Waterstones or Borders”<sup>8</sup>
- “Visit another (London) library sometime”
- “Go to university library”
- “Specific shops with relevant books”
- “No. The books I want are all reference to be read in the library, now off to find one in second hand bookshop”

These comments are interesting in that some people are still interested in finding *the* book that will meet their health information needs.

## USING THE INTERNET

Nearly half of the participants in the study use the internet daily, although twenty percent reported that they do not use the internet at all. Nearly three quarters of those surveyed indicate that they use the internet at least once a week. Not surprisingly, email is the most popular activity with three quarters of our library users emailing at least once a week if not daily.

Nearly 90% of participants who use the internet reported that they use the internet to search for health information (more than half indicate that they look up health information online every month), see Table 8.

TABLE 8: Using the Internet to Look for Health Information

Response	Percentage
Daily	5
At least once a week	15
At least once a month	34
Less than once a month	37
Never	9

Although online communities can provide support to people with health issues, few participants in our study seem to be using online support groups to any great extent (see Table 9).

TABLE 9: Using the Internet for Online Support Groups

Response	Percentage
Daily	5
At least once a week	3
At least once a month	3
Less than once a month	10
Never	78

The library was used as a site to access the internet by nearly twenty percent of our participants. One third accessed the internet from home with another seventeen percent accessing the web from work; others accessed the internet from an Internet Café (12%), a friend's house (10%), or their college / university (7%).

In our interviews with library staff we have been exploring how enquiry desk staff look for online health information for library users. Some go directly to NHS Direct but most use Google as a first resort. Staff felt that they had little knowledge of online health resources and so felt that a keyword search would provide them with a good starting point to find additional resources for users. A few also mentioned using Google before going to their own OPAC or to a health encyclopedia because it is a good spellchecker and allows a definition to be confirmed before continuing with a search of the library's resources.

More than sixty-five percent of the study participants used a keyword search in Google or another search engine as their primary method for searching for health information online. Nearly one third, however, indicated that they went directly to health websites that had been recommended to them. Only a handful of respondents listed a favourite health-related website (NHS Direct was specifically mentioned four times). Most appear to be confident searchers for online health information. Table 10 provides an overview of how users perceive their own searching capabilities.

TABLE 10: Online Searching Capability

Response	Percentage in Agreement
I am very confident when I search for health information on the internet	70
I can always find relevant and useful information on the internet	69
I know when I find quality information on the internet	69
I always check who has published the material I find on websites	62
I always save the website address of sites I find useful so I can go back another time	63

The lack of scrutiny in the authority of a site raises questions as to how users judge the quality of information they locate. It is interesting to note that the reference staff do not feel that library users are able to judge good online health information from bad and most feel that this evaluative role is a role that library staff should be playing. Our preliminary results indicate that users seem to think they're doing ok, suggesting an interesting disconnect between patrons and staff. This will be further explored in interviews.

## V. DISCUSSION

The preliminary data from this study present an interesting picture of the role of libraries in health information seeking, the role of the internet in people's lives and how people navigate online and print resources to meet their health information needs. We are midway through our data collection so some of the patterns we are seeing could change. And, as with many survey-based studies, we are finding that our questionnaire results are raising as many questions as they answer. We look forward to delving into the interviews with users to probe some of the detail that is missing from the larger sketch that the questionnaire data provides, for example, when and under what circumstances do library users ask reference staff for help? This will be of particular interest to the library as they strive to improve their own service to library users.

As noted earlier, Miller's concept of psychological „blunting“, Granovetter's strength of weak ties, and Derwin's theory of sense-making may provide useful frameworks to explore the information seeking behaviours of the participants in the study. Early interviews are already providing interesting examples of blunting. For instance, the first interviewee announced very emphatically that “I don't like an excess of information, it makes me feel incapable.” Qualitative data analysis will allow us to better understand the reasons for active avoidance and active searching for health information and will enable us to explore how library staff interact with both monitoring and blunting behaviours.

A very preliminary analysis of the library staff interviews show quite divergent opinions on some key themes found within the literature. In some cases, there are quite stark differences in how staff members perceive the emotional needs of library users. A number of recent articles (Borman & McKenzie 2005; Kouame *et al.* 2005; Wyatt *et al.* 2005) have pointed to the need for the „warm expert /emotional support where health information enquiries are concerned. While some staff members agree strongly that this is the case, several reported no experience of this happening. Similarly, the challenge and risk of being asked to interpret health information for a library user is a constant theme within articles discussing health information enquiries in public libraries. Our interviews to date, however, show some reference staff experiencing this and others not. These two issues alone will provide interesting lines of data analysis and will allow us to better understand the factors shaping library staff's interaction with health information seeking patrons.

Many of the challenges to providing a good health reference service that have been identified in the literature are being discussed in the library staff interviews. Lack of sufficient time to spend with library users and limited knowledge of online resources are perhaps the two most predominant at this early stage. The working conditions for librarians within the library have changed quite dramatically in the past few years and the changes have not been welcomed by professional librarians. Indeed, several have expressed the idea that their jobs have been „dumbed down“. The library is facing more organizational change this year and the uncertainty around what that could mean for their jobs as information professionals was also a recurring theme in some interviews.

Results from the Harris *et al.* (2005) SARS study question whether public libraries are prepared to play a role as “health information delivery sites and whether they should be developed as important players in the public health infrastructure.” At this point, we were unable to answer this question but it is certainly one that we will explore in depth in future papers.

## REFERENCES

ACTION for Health. November 17, 2005. Act4Health - About Projects - Theme 1: Lay User Issues , [http://www.sfu.ca/act4hlth/about\\_project/theme1.html](http://www.sfu.ca/act4hlth/about_project/theme1.html) (accessed April 19, 2006).

Baker, Lynda M. and Karen E. Pettigrew . 1999. “Theories for practitioners: two frameworks for studying consumer health information-seeking behavior.” *Bulletin of the Medical Library Association* 87, no.4: 444-450.

Baker, Lynda M. and Virginia Manbeck. 2002. *Consumer Health Information for Public Librarians*. Lanham, MD; London: Scarecrow Press.

Borman, C. Brandi and Pamela J. McKenzie. 2005. “Trying to help without getting in their faces: Public reference staff descriptions of providing consumer health information.” *Reference & User Services Quarterly* 45 no.2: 133-6, 140-6.

Dervin, Brenda. 1983. Information as a user construct: The relevance of perceived information needs to synthesis and interpretation. In *Knowledge structure and use: Implications for synthesis and interpretation* edited by S.A. Ward & L.J. Reed, 155-183. Philadelphia: Temple University Press.

Dewdney, Patricia, Joanne G. Marshall, and Muta Tihamiyu. 1991. "A comparison of legal and health information services in public libraries." *RQ* 31, no.2: 185-196.

Gillaspy, Mary L. 2005. "Factors affecting the provision of consumer health information in public libraries: the last five years." *Library Trends* 53 no.3: 480-496.

Harris, Roma, Nadine Wathen, and Donna Chan. 2005. “Public Library Responses to a Consumer Health Inquiry in a Public Health Crisis: The SARS experience in Ontario.” *Reference & User Services Quarterly* 45 no.2: 147-54.

Huber, Jeffrey T., and Mary G. Snyder 2002. “Facilitating access to consumer health information: a collaborative approach employing applied research.” *Medical Reference Services Quarterly* 21 no.2: 39-46.

Kouame, G., Margo Harris, and Susan Murray. 2005. "Consumer Health Information from Both Sides of the Reference Desk." *Library Trends* 53 no.3: 464-479.

Pettigrew, Karen E., Joan C. Durrance, and Kenton T. Unruh. 2002. “Facilitating Community Information Seeking Using the Internet: Finding from Three Public Library-Community Network Systems.” *Journal of the American Society for Information Science and Technology* 53 no.11: 894-903.

Ross, Catherine Sheldrick and Kirsti Nilssen. 2000. "Has the Internet Changed Anything in Reference? The Library Visit Study, Phase 2." *Reference and User Services Quarterly* 40 no.2: 147-155.

Wyatt, Sally, Flis Henwood, Angie Hart, and Julie Smith. 2005. "The Digital Divide, Health Information and Everyday Life." *New Media & Society* 17 no.2: 199-218.

---

## ENDNOTES

<sup>1</sup> Partial support for this study was provided through the Action for Health project funded by the Social Sciences and Humanities Research Council of Canada under the Initiative on the New Economy Collaborative Research Initiatives program.

<sup>2</sup> The majority of staff working on the reference desk are professional librarians. A new (and unpopular) change was for librarians to work only one hour shifts on the desk daily or at least several times a week. Most preferred longer shifts. Librarians are paired with Library Officers who work three to four hour shifts on the desk. There were five library officers working on the reference desk and approximately fifteen librarians during our data collection period. The current staffing policy was under review at the time and it was anticipated that this set-up would change in the next few months.

<sup>3</sup> The statistics for both the library and for the city were taken from the Brighton & Hove Community Profile produced by the Museums, Libraries, and Archives and based on UK Census 2001 statistics and the library service statistics from 2004/2005. Statistics on the proportion of the city identifying as LGBT were difficult to find, the 15% figure provided was from advocacy group Spectrum which has been very active within the community in relation to mapping the LGBT community, its needs and how those map on to existing city services.

<sup>4</sup> Walk-in health centres are not as common in the UK as in Canada.

<sup>5</sup> NHS Direct is a health advisory service provided by the National Health Service in the United Kingdom. The NHS Direct telephone service is staffed by nurses for health emergencies and information staff for health information enquiries. NHS Direct Online is a website providing information on a wide variety of health topics and services including directories of local doctors, a self-help guide and a health encyclopedia. NHS Direct Online also provides an online enquiry service for users unable to find what they are looking for on the main website.

<sup>6</sup> It seems to be a common misperception that NHS Direct is an emergency service. In our interviews with enquiry desk staff, we asked one librarian if she had ever used NHS Direct in a reference enquiry and she replied "No, not appropriate for us I don't feel. You can tell people about it but that is more like, I think somebody comes in and wants some sort of diagnosis, that's where you draw the line – a big, black line". She did not seem aware of the information provision aspect of the service.

<sup>7</sup> These percentages are combined responses to "Trust Completely" and "Trust Somewhat" as the majority of people did not identify a source that they trusted completely.

<sup>8</sup> Both Waterstones and Borders are popular chain bookstores in the UK.