Health in All Policies (HiAP) and Public Librarianship

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ABSTRACT

This paper introduces the Health in All Policies (HiAP) approach to developing a multi-sector community health infrastructure, that could include public libraries and public librarians. This approach could be a positive alternative to the sometimes negative experience of public librarians being asked, or ordered, to fulfill public health duties during the COVID-19 Pandemic. After introducing the concept, the paper discusses some of the ways it could be incorporated into LIS education, particularly for public librarians.

ALISE RESEARCH TAXONOMY TOPICS

public libraries; community and civic organizations; community engagement; community-led services.

AUTHOR KEYWORDS

public health; library policy; COVID-19; inter-organizational cooperation; health promotion.

INTRODUCTION

During the COVID-19 pandemic, public librarians were asked, and in some cases ordered, to support public health in unprecedented ways. In different parts of the U.S.A. and Canada, public librarians worked as emergency food bank employees (Rosales, 2021), emergency services hotline coordinators and contact tracers (Inklebarger, 2020), distributors of COVID-19 at-home testings kits (Weil, 2022), and as hosts of COVID-19 immunization clinics (Piggott, 2021). These emergency roles of public librarians build upon a historical pressure for librarians to be “all things to all people,” as Shannon Mattern (2007) puts it.
This paper considers how the Health in All Policies (HiAP) approach to developing a multi-sector community health infrastructure could be used as an alternative to this idiosyncratic, sometimes haphazard approach to integrating public librarians into the public health infrastructure. We discuss how the HiAP approach could become integrated into our pedagogies and research, in service of “re-engineering our standard procedures, practices, policies, pedagogies, communication, and general approaches to our work,” as the ALISE 2022 Call for Papers states.

Public libraries have certainly been involved in community health efforts for many years: Rubenstein (2012) shows that in the U.S.A. health promotion has been part of the discourse of public librarianship since the emergence of the modern idea of the public library. But to fully engage in HiAP work, public librarianship and public library education may need to extend beyond conventional efforts focused around supporting health literacy at the reference desk. Public libraries and librarians are increasingly seen as a partner and leader in communities, and this position could be used to help shape the health policies, systems and environments that support the communities they serve.

INTRODUCING HiAP AND HEALTH IN PUBLIC LIBRARIANSHIP

Health in All Policies (HiAP) is defined as a “collaborative approach to improving the health of all people by incorporating health, equity, and sustainability considerations into decision-making across sectors and policy areas” (Rudolph, Caplan, Mitchell, Ben-Moshe, & Dillon, 2013). National and international public health organizations, such as the American Public Health Association (APHA, 2021), Centers for Disease Control and Prevention (CDC, 2016), and World Health Organization (WHO, 2022), regard Health in All Policies as a best practice for improving population health outcomes, and it has been adopted broadly (Rudolph, et al., 2013).

This approach to health promotion builds upon a more general focus within the public health field on what are called the social determinants of health, and the social-ecological model of health promotion. In these holistic models of community health, individual habits and behaviors are densely woven into the environments in which we live, work, and play. Based on this fact, health policy makers strive to foster and sustain multi-sector, collaborative networks that enable the sharing of resources, expertise, and connections, with an ultimate aim of fostering healthier, more resilient communities.

The HiAP model has, however, up to now not been utilized within the field of Library & Information Science. We were only to find one research article that links HiAP and public librarians: Hodge et al. (2020) introduce the concept of HiAP by referring to the efforts of public librarians:

“HiAP represents a whole-of-government approach to address health challenges where multiple public sectors coordinate to accomplish shared goals. Non-health agencies, departments, and offices have re-focused their efforts to address the COVID-19
pandemic. In Rochester, Minnesota, public libraries partnered with local human services agencies to connect people to housing, food, and health, legal, and employment services.” (p. 786)

Despite being little used explicitly in relation to public librarianship, the HiAP approach strongly aligns with trends within the practice, research, and teaching of public librarianship. The idea of public librarians working collaboratively with community partners to address issues like education and digital inclusion is well established. Many public libraries activities already have intersectional elements, involving multiple partners to target youth development, digital inclusion, career assistance, and economic development, among others (e.g. ALA, 2021). Campana, Mills, Kocibubuk, & Martin (2022) investigate how public librarians collaborate with others to contribute to educational equity in underserved communities. In American Libraries Magazine, Dankowski (2022) asserts that “Digital equity coalitions offer partners new ideas and extra resources for solving problems.”

What is less well established is how this work occurs in the domain of public health, although that is beginning to change. De Guzman, Jain & Loureiro (2021) consider the community partnerships necessary to support access to telehealth and telemedicine in rural libraries. Wahler et al. (2022) consider the partnerships necessary to increase access to social work services in public libraries. Draper (2021) explores the feasibility of partnerships between public libraries and the SNAP-Ed program. Bossaller and Adkins (2022) developed an innovative MLIS curriculum that weaved together public health and public librarianship.

TOWARDS THE INTEGRATION OF HiAP INTO PUBLIC LIBRARIANSHIP

What is missing in this emerging literature on public librarians as public health partners is a theoretical framework to understand, support, and build up this topic. We assert that HiAP is a framework that could be productively used to forward our teaching and research on this topic. One of us (Walsh et al., 2018) conducted a similar project with the US Department of Agriculture’s Cooperative Extension system, inquiring as to the preparedness of Extension agents to utilize a HiAP approach to inform how agents work collaboratively with others to support public health. The study gathered insights concerning the ways in which Cooperative Extension administration and agents saw their efforts in relation to the HiAP and perceived challenges in order to be more active in the HiAP process.

It is important to recognize that implementing HiAP requires more than just a desire to improve upon health. Indeed, some of the stress public librarians may have experienced as they were called upon to support emergency public health services during the COVID-19 Pandemic may derive in part from what Ettarh (2018) calls “vocational awe,” which creates a system wherein “professional norms around self-sacrifice and underpay self-selects those who can become librarians.” Instead, a HiAP starts from the idea of equity in community systems: It will require mutual resolve and planned actions that will extend beyond physical health and fortify social, economic, and environmental determinants of health.
The figure below represents one view of the social-ecological approach to health promotion that is baked into the HiAP approach. In this model, central importance is given to relationships and alignment. Whereas public librarians sometimes feel that they are asked to do more to support health without being adequately resourced, this model starts instead from the idea that public librarians can connect and align their efforts with others, finding support through those networks.

**Figure 1**

*A Social-Ecological model of health promotion*

A HiAP approach shifts the focus from the individual to the individual-in-the-community. Brownell and colleagues (2010) explain that although people are responsible for their individual choices, defined as the habitual decisions that affect their health, these choices are made and these habits are influenced by the social, cultural, and environmental contexts in which choices are enacted. These contexts are strongly influenced by national and state government policies, as well as policies formed by local leaders – city planners, employers, school districts, public service agencies, community organizations, and, yes, public libraries. These policy choices shape the social determinants of health and resource systems that either contribute to or detract from health equity (Brownell et al., 2010).
**PUTTING HiAP INTO PRACTICE IN LIS**

The question then becomes, how can public librarians more effectively and strategically become part of community health systems? What will a HiAP approach look like for public libraries and public library workers? In the library setting, it may mean working in new ways and contexts. It may mean seeking out opportunities to participate in or host community coalitions like food councils, community health action plans, or other groups that feature opportunities for public librarians to shape the contexts in which people grow, learn, work, and play.

Health in All Policies work is structured through the collaboration of both traditional and less traditional health partners. The usual partners are the health sector entities, such as healthcare systems, public health, human service, and healthy people organizations and agencies. The less traditional are the public and private, organizational and governmental agencies that have not traditionally considered health impacts, such as land use, planning, transportation, housing, industry, business, economic, and environmental sectors (APHA, 2021; WHO, 2022).

One challenge we need to confront is that even within this broad framework of public health partners, public librarians have been up to now mostly overlooked as partners. We see this in data from the National Association of County and City Health Officials. Their once-every-three-years survey of America’s over 2,800 health departments found in both 2016 and in 2019 that libraries were the least common community-based partner of health departments. While 71% of health departments reported working closely with K-12 Schools, only 25% reported such working relationships with libraries (NACCHO, 2020). One consequence of this fact is that public librarians need to be trained and supported such that they can become articulate communicators about the actual and potential roles of public libraries and public librarians within community health systems.

From a research perspective, we need to better understand how public librarians may already be participating in HiAP approaches, whether or not this vocabulary is used or not. Using the Community Readiness model is a promising way forward (Oetting et al., 2014). This approach has already been used in other sectors, and could be used in the public library sector. This model could be easily utilized within the public library sector through open ended questions regarding knowledge, skills and attitudes about health policy, what is believed to be needed to create or sustain networks around health and health policy, what is needed for recognizing and connecting efforts across the library sector, and how do we know we have accomplished success and how does one sustain the work.

From a teaching perspective, we need to prepare our students to reframe how health happens in public libraries, extending beyond conventional discussions of reference interviews focused around consumer health to encompass broader participation in community systems. Based on previous work with Extension agents, as well as our own research with public librarians (Walsh, et al., 2018), we believe public librarians will most likely need the following to be successful in bringing a HiAP approach to their practices.

**Establish common language.**

- Unpacking the definition of health as its many facets (i.e., physical, mental, social, behavioral, cultural, etc.)
• Explaining what is considered policy work (i.e “Little p” policies created and implemented at an organization or department level vs. “Big P” – state or federal laws, city / county ordinances or plans
• Delineation between advocacy and lobbying

Professional development.
• Developing skills of current personnel in collaboration and planning
• Increasing the level of health and policy literacy within libraries
• Prioritizing time for planning and training that is needed for current and prospective administrators and staff

Leadership support.
• Leaders and administrators at all levels are aware of and acknowledge the value of HiAP work
• Allocating resources and expertise to strengthen the work already done and support new hires
• Provide guidance to make HiAP efforts integrated rather than reactive

Partners/collaborators and partnerships at all levels.
• Understanding that Health in All Policies framework is a collaborative process at its core
• Knowledge to identify partners with shared values and priorities at all levels: local, state, regional, and multi-state opportunities

Teaching resources.
• A journal article titled: “A Practice-Grounded Approach for Evaluating Health in All Policies Initiatives in the United States” which includes a logic model and a set of potential indicators, which could be used to describe and assess Health in All Policies activities, outputs, and outcomes. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5334460/
• American Public Health Association: This document was created as there was an increasing number of people and organizations that were looking to use collaborative approaches to improve health of the populations they serve. The document shares many experiences of the California Health in All Policies Task Force and incorporates information from the published and gray literature and interviews with people across the country. https://www.apha.org/topics-and-issues/health-in-all-policies
• Rural Health Information Hub: This site sets HiAP with built environment and the many ways to be engaged within the community. There are also examples and considerations that are important for rural communities. https://www.ruralhealthinfo.org/toolkits/sdoh/2/built-environment/health-in-all-policies
• National Association of County Health Officials: This site offers guidance and examples of HiAP in ordinances, resolutions and laws with a mapped view and search feature. Further, there are spotlights of communities at work within HiAP.  
https://www.naccho.org/programs/community-health/healthy-community-design/health-in-all-policies

• Centers for Disease Controls: This site offers insights on the interconnectedness of the National Prevention Strategy and the Healthy People documents with HiAP. This site also connects you to a database to find examples and support for the different ways that communities are engaged in HiAP.  

CONCLUSIONS

What is at stake here? One consequence of the absence of public librarians within community health systems is that when the COVID-19 Pandemic arrived in North America, public librarians did not, for the most part, have the trusting relationships with colleagues in the public health sector that could have enabled a more rational, robust, and impactful conversation about how public librarians could play a role in local, state, and national public health policy. Instead public librarians were, in a haphazard and sometimes jarring way, called upon to provide emergency public health services, but without being able to participate in shaping the policies that shaped their work.

We suggest that as we come out of the pandemic, we think about doing things differently. Just as we educate public librarians to get involved in digital equity coalitions, educational partnerships, and workforce development taskforces, so too do we advocate for involvement and leadership in public health policy. As public librarians get involved in this way, vocational awe must be guarded against by providing our students with tools they can use to set boundaries and to advocate for themselves and their institutions, even as they become more densely woven into the community.

The question then becomes, how can public librarians more effectively and strategically become part of community health systems? What will a HiAP approach look like for public libraries and public library workers? In the library setting, it may mean working in new ways and contexts. It may mean seeking out opportunities to participate in or host community coalitions like food councils, community health action plans, or other groups that feature opportunities for public librarians to shape the contexts in which people grow, learn, work, and play.

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