REACHING OUT TO CONSUMER HEALTH INFORMATION USERS THROUGH ACADEMIC AND PUBLIC/COMMUNITY LIBRARIES PARTNERSHIP: EXPERIENCE FROM KENYA

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Abstract

Consumer health information has gained prominence worldwide due to the need for preventive as opposed to curative healthcare. Availability of diverse online consumer health information (CHI) sources necessitates that public library users become aware of quality CHI sources as they make important healthcare decisions. An academic library received a grant for a project on the promotion of consumer health literacy through public and community libraries in Central and Upper Eastern Kenya. The first phase of the project carried out a CHI resources training and provided seed money to two public libraries to acquire consumer health books. The second phase of the project forms the basis of this paper aimed to examine the impact of the first phase by evaluating the application of the information literacy skills gained during the training and by assessing the use of the consumer health collection by the public. A qualitative approach and survey design were used. Data was collected from twelve users and nine librarians who were purposely selected for a Focused Group Interview (FGI). An observation guide was also used during physical visits on selected public and community libraries. The results show that many public/community libraries established health corners/hub after attending the training. There was an increase in queries and demand for e-resources on diseases and general lifestyle information, a change of attitude by staff and users towards CHI, improved customer care services, and heightened image and value of a librarian in the provision of CHI. Challenges faced included semi-illiteracy among the public, users' insufficient time to visit libraries, inadequate training skills and knowledge among library staff, and insufficient funding. The paper concludes that partnership between academic and public/community libraries in reaching out consumer health information users was inevitable and significant in fostering community health development.

Keywords: Consumer health information; health information resources; academic-public libraries partnership

Introduction

Consumer Health Information (CHI) is described as information that is not technical and is easily understood by the public for making informed health-related decisions. Consumer health information has gained prominence all over the world due to the need for preventive as opposed to curative healthcare. The increased demand for consumer health information calls for easy to use and access to consumer information resources and services. Smith, Hundal and Keselman (2014) found that the public seek for consumer health information from public libraries and that the public library and the librarians are a trusted source for consumer health information. However, most African countries lack the needed resources, funding, systems and structures that support the delivery of health information to the public. Public libraries in Kenya lack well-structured and systematic mechanisms for supporting the public with unprecedented consumer health information (Kamau, Gichohi & Wanjohi, 2015). The available literature provides little information on localized frameworks and approaches for fostering effective provision and access to consumer health information.

To fulfill the above mandate to the community, public libraries should partner with the community and other stakeholders (Kouame, Harris & Murray, 2005). According to Kouame, Harris and Murray, this would facilitate better understanding of the community health information needs and the nature of information resources that are preferred. The study by Yun, Adiputra, and Yang (2013), and Yi and You (2014) identified the inadequacy of public libraries in meeting all the consumer health information needs of the public, hence the need for collaboration with other organisations or institutions. Urban Libraries Council (2007), and Mugwisi, Mostert and Salman (2013) noted that most public libraries were not self-sufficient and hence were partnering and collaborating with other stakeholders in undertaking activities that would have been very difficult to implement alone. Wilson and Train (2005), and White (2009) underscored cooperation, collaborations and partnerships in adding value in information and knowledge sharing.

One of the key partner and collaborator in this endeavours are the academic libraries. The case of North Colorado reported by Feldmann (2014) described how public libraries were collaborating with academic libraries in providing resources and services to the local community. In Michigan, librarians from academic libraries and public libraries have collaborated in carrying out joint research to provide information and knowledge that is beneficial to the local communities (Preddie, 2013). Preddie outlined areas of collaborations that included providing expertise in collection development, training of trainers to enable public library librarians to train the community on how to use library resources, and developing and maintaining websites that can be accessed by the

public. The cooperative capacity building between academic and public libraries can also be borrowed from the University of Alabama that runs an outreach programme in collaboration with Alabama Entrepreneurial Research Network (AERN) to support small business development in South Alabama (Pike, Chapman, Brothers & Hines 2010).

Experiential description of collaborations in the provision of consumer health information in Kenya

Consumer health information project was funded by Elsevier Foundation and implemented in seven African countries (Kenya, Mali, Mozambique, Nigeria, Zambia, Zimbabwe and Uganda) within a period of two years. The main purpose of the project was to promote consumer health information (CHI) through public and community libraries. In Kenya, the project was implemented by the Kenya Methodist University in collaborations with public and community libraries in Central and Upper Eastern Kenya. This paper shares the experience from Kenya.

In Kenya, the project activities were implemented in two phases. The first activity in phase one was needs assessment for the targeted libraries. The needs assessment revealed that public and community libraries provide consumer health information services, with print as the most popular resource. Information on wellness, healthy living and diseases such as HIV/AIDS was also being sought by the public. The effective provision of consumer health information service was largely hindered by the lack of health information literacy skills among library staff, inadequate consumer health information resources and poor facilities (Kamau, Gichohi & Wanjohi, 2015). The assessment was very instrumental in informing the design of the second project activity, that is, a consumer health information resources training workshop. This training workshop involved fifteen librarians from public and community libraries who were drawn from seven counties representing central and upper eastern region of the country. The third activity was the provision of seed money to two selected public libraries to help purchase consumer health books.

The first activity for phase two of the project was site visits to a sample of the libraries that had been represented in the training and a visit to the two libraries that had received the seed money. The second activity was to have two focus group discussions meetings, first with a sample of the librarians that attended the training, and second with a sample of public library users who had used the consumer health information resources from the targeted libraries.

It is expedient to note that, the second phase of the project formed the basis of this paper. The main objective was to examine the impact of the first phase. The specific objectives were to evaluate the application of information literacy skills in the provision of consumer health information services at public/community libraries and to assess the use of the consumer health collection by the public.

Methodology

This paper presents results of the collaborative efforts by an academic library (Kenya Methodist University) and public/community libraries in reaching out to consumer health information users in Central and Upper Eastern Region in Kenya which took place from August 2015 to May 2017. A qualitative approach and survey design were used. Fifteen participants who were practicing librarians from thirteen public/community libraries (Mikumbune, Meru, Isiolo, Timau, Karatina, Chinga, Nyeri, Muranga, Thika, Embu, Munyu, Laikipia and Kangema) spread across seven counties (Meru, Nyeri, Embu, Kiambu, Murang'a, Isiolo and Laikipia) took part in the initial training. Out of these, ten librarians who were drawn from eight public/community libraries spread across the seven counties participated in the focus group discussions.

An observation guide was also used during the physical site visits to six selected public and community libraries (Kangema Community Library, Nyeri Public Library, Meru Public Library, Isiolo Public Library, Laikipia Public Library and Timau Community Library) from five counties (Meru, Nyeri, Embu, Kiambu, Murang'a, Isiolo and Laikipia). The criteria used for the libraries to be visited included their geographical location and type of the library. The physical visits were done by two evaluators who were involved in the planning and implementation of phase one of the project. The two evaluators sought appointment with the concerned heads of the libraries before the actual visit.

Data for Focused Group Interview (FGI) was collected from the ten librarians and twelve users who were purposely selected. A focus group interview was held first with librarians from public and community libraries, and second with users of consumer health information at public and community libraries. Participants for the focus group with public library users were identified by the librarians as those users that were keenly using the consumer health information resources. Participants were facilitated to travel to each venue for the interview and also provided with lunch. The focus group discussion for the two groups took on average one hour and was organized around different questions to which participants were expected to respond to. The principal investigators assisted by two research assistants used digital sound recorders in recording the discussion. Focus group discussion was particularly essential in assessing knowledge and experiences that staff and users had in the provision of consumer health information. The findings were analyzed thematically and consolidated as discussed below.

Results and Discussions

The results of this paper were analyzed and discussed in accordance with the two main objectives as presented below.

Application of information literacy skills in the provision of consumer health information services at public/community libraries

The project team was interested in assessing the application of information searching skills in the provision of consumer health information services at public and community libraries. This was realized by physical site visits to the selected libraries.

Establishment of consumer health corner

The visits revealed that all the libraries had established a CHI reading corner/hub/center, some with a good sizeable collection and others with a few books. The collection in the health section was well arranged using Dewey Decimal Classification (DDC) and had been solicited largely through donations and others through purchase via Kenya National Library Service (KNLS) head office.

Five out of six libraries had their CHI health collection shelved separately and adjacent to the designated reading health center. One important factor observed was that librarians had assessed their entire collection and came up with books related to consumer health. All these books were removed from their initial locations and put together in designated shelves which were referred to as consumer health collection corner. The pulling of all relevant consumer health books showed the commitment of the library staff in making the consumer health information corner functional and useful. This went a long way in boosting utilization of the consumer health collection, a fact that was positively observed by users. The practices found in most of these libraries validated what Norman (1999) had recommended in an empirical study. Norman emphasized on the need to physically separate different types of health information materials in the library to increase access, availability and utilization of the same.

Some of the books were found to be very technical and were therefore being borrowed by health sciences students whereas others were found to be at the level of the ordinary consumer, and were hence being borrowed by the general public. Although most of the health corners had less current books, it was a positive response in that the awareness of setting aside health information materials was not there before the training as was reported by all librarians who were in charge of the libraries that were visited.

Training of library staff and users on CHI

Most of the librarians indicated that they had trained staff and users on accessing CHI on one to one basis depending on the needed information particularly by users while in other cases, groups training were conducted. Nevertheless, a

common observation was that all the libraries that were visited had not kept usage or training statistics. This posed difficulties in determining actual profiles of users and their information needs. The effort done by staff also lacked quantifiable data for assessing the effectiveness of the training. The user profiles are significant in pointing out the near accurate information needs of a public library user (Gichohi, Bosire & Dulle, 2016).

Facilities

Evaluators observed that most of the libraries had adequate facilities such as Internet and Wifi as well as computer rooms where users access electronic-based information sources. One of the libraries had kindles that were loaded with various types of books. The kindle had a facility that enables the user to access the Internet.

Collaboration and partnership in community outreach

Four out of six visited libraries were found to have gone out of their way in seeking collaborations with other stakeholders such as the medical training institutes and hospitals, some of which were making presentations on health topics such as diabetes to a library audience. One of the libraries was found to have established cordial interactions with teenagers on health topics such as HIV/AIDS. During the day of the field visit at this particular library, there was a health talk on HIV/AIDS and the evaluator took a chance to talk to the teenagers on the teen's health online information sources. The teenagers were found inquisitive with numerous questions on sexual health matters. The community library librarian was also found to be repackaging health information that was aimed at specific audiences. Another library described how it partnered with senior citizens club and other stakeholders where helpful consumer health information was being shared periodically. According to the head librarian, the senior citizens were introduced to existing youth club who were mainly tree planters and herbalists. This provided youth the opportunity to learn various medicinal plants which are essentially used to cure skin diseases. These kinds of collaborations and partnerships were critical in elevating the perception of public and community libraries as partners in solving issues affecting the societies; a proposition which is supported by Feldmann (2014) and Preddie (2013).

Assessment on the use of consumer health information by the public

The project team was interested in examining the utilization of consumer health collection and the further assessing the impacts of the information literacy skills on the public at selected libraries. Two focus group interviews were conducted, first with librarians and second with users of public and community libraries. The lead questions of the focus groups covered different areas including the gains, challenges and improvements in the provision of consumer health information.

Responses from both groups were harnessed under common themes as discussed below.

Nature and status of consumer health information provision in public and community libraries before and after the training on consumer health information

Librarians were asked to discuss the nature and status of the provision of consumer health information in their respective libraries before and after the training. Participants noted that prior the training, there was poor awareness on the availability and accessibility of consumer health information via public and community libraries. The low awareness could largely explain the minimal utilization of these resources by the public. This finding agrees with Bielavitz, Wisdom and Pollack (2011) who also linked public awareness programs to the utilization of consumer health information.

The participants further noted that there was an increase in queries and demand from the public for e-resources on diseases and general lifestyle. Also noted were the change of attitudes by staff and users towards CHI, improved customer care services at public/community libraries which culminated to heightened image and value of a librarian in the provision of CHI. Participants noted that the knowledge gained from the training workshop did not only help in increasing the awareness but also enabled objective sensitization of both staff and users on availability and value of consumer health information as exclaimed by participant (D):

Before the training, I only responded to what the client asked or requested for because I did not have any other information to offer. Furthermore, most of our clients could not access simple health information since basic information materials were not available, for example, materials on managing hypertension.

Heavily used consumer health information resources after the training

Information gathered from staff participants showed that the most sought online consumer health information source included cancer net, MedlinePlus, women's health, teen's health and nutrition related information. Communities around Isiolo library were particularly cited to have been greatly interested in women's health resources. This was largely because, culturally, women in the nearby communities don't practice family planning and hence the more concerns on their own health and that of their children.

On their part, most public library users' participants indicated that they were mainly accessing the printed health information in the library which included information materials on human nutrition, healthy living, breast cancer, and general lifestyle, information on drugs and substances abuse, and general information on women's health. This underscores the purposes for the provision

of CHI as noted by Deering and Harris (1996). Although most users were biased to print sources, they said that the presence of internet access at public and community libraries was critical in facilitating availability and accessibility of consumer health information. Yi and You (2014) have described the diverse formats of CHI with biasness to online resources. This point out the need to equip public and community libraries with quality, updated and relevant consumer health information sources (Kamau, Gichohi & Wanjohi, 2015) in order to adequately satisfy the needs of the public.

When users were asked to discuss how often they sought for CHI, their responses indicated that the majority accessed the health information when the need arose, especially if they required knowing something. One participant indicated they accessed the information when they had free time. Another one indicated his frequency of use as monthly while another one indicated about twice a month. All others had no defined period but mainly, their access was driven by need which largely agrees with the findings of Bielavitz et al, (2011) who emphasized the need as the public's driving factor for seeking and using CHI.

Of the accessed CHI sources, public library users pointed out several benefits accrued from the use of CHI which were also shared with family members and friends. Examples of the benefits included: acquisition of additional knowledge on topics such as stress management, healthy foods, dimensions of exercise, ageing challenges, application of natural remedies to counter some ailments, and behavior change in different areas, such as the eating habits. The public/community library users' participants could not at the time of the interview come up with any consumer health information needs which had not been met by their library. From the discussion, it was clear that the provision and accessibility of CHI at public and community libraries was taking shape.

Impact of the training on the provision and access of CHI at public and community libraries

Public and Community library participants were asked to describe how each had put to use the skills which they gained earlier during the consumer health information resources training. One thing that stood out across all participants was that, the staffs who had earlier been trained on CHI utilized their knowledge by training their fellow staffs first, and second, they trained public and community library users. One librarian explained how their library incorporated the training on consumer health in the normal library orientation and user education programme. Notably, the training equipped the staff with knowledge of the different websites they could access information on consumer health. Participants noted that the trained staff got essentially empowered and were able to guide users to specific online databases. One staff participant (B) indicated that:

The training has been very useful to us unlike before when we used to do interlibrary loaning. We can now guide our users on where to get specific information online.

The adoption of staff and user training at public and community libraries was noble and a valuable engagement in literacy development. Kanyengo, Ajuwon, Kamau, Horta and Anne (2011) termed the lack of basic information retrieval skills as a serious drawback for staff in Africa. According to Yi and You (2014), such training strengthens staff knowledge and role as healthcare information providers. A sentiments that was also echoed by Linnan, Wildemuth, Gollop, Hull, Silbajoris and Monnig (2004).

Participants were further asked to share their experiences on how the training had impacted on consumer health information provision in their libraries. From the discussion, it was clear that staff of public and community libraries became increasingly aware of consumer health information sources and exhibited confidence when serving users who approached them with diverse queries. Some users took practical steps in improving their lives and that of the society. For example, participant (F) noted, "one staff member read a book and subsequently planted a medicinal plant; the cactus plant whose milk-like liquid is used to treat wounds". Participant (F) further reported that the surrounding communities were sensitized on health living and eating habits which led to observable general cleanliness among members of the public who frequented the community library for information services. Participant (G) reported, "We now see a notable number of users who visit the public library seeking information on illnesses before seeing a doctor for treatment." This sentiment largely agrees with the finding of Fox and Duggan (2013) who reported the emerging trends in the use of the internet by public as a diagnostic tool. The public library users who had been trained were therefore grateful of the training and acknowledged its relevance in changing their lives.

The overall benefit of the training to staff and the patrons of public and community libraries

Participants were asked to describe the overall benefits of the training on fellow staff and the general public to which they said that there has been increased general awareness and usage of consumer health information materials at public and community libraries. Users said that the training was significant noting its relevance in saving time in information searching and retrieval. Staffs from public and community libraries were reported to have mastered the skills and gained the confidence in delivering consumer health information services to the public. Staff participant (B) indicated that the training offered an opportunity for enhanced information literacy noting that they can now locate specific and relevant information with ease. Participant (C) indicated,

"For me, the training created a renewed interest towards consumer health information and its provision to users.

All participants noted that the initiative had made their libraries to be perceived as contributors to the development of a healthy nation. The findings concurs with Smith and Duman (2009) who reported the significance of holistic provision of CHI in public libraries noting the heightened identity of health information librarians and their contributions in community development. Flaherty (2013) also noted that the provision of CHI in public and community libraries further solidifies the trust and expectations that users have on a public library. Other notable impacts of CHI on publics were reported by Pifalo, Hollander, Henderson, DeSalvo and Gill (1997) with far reaching implications on lifestyle changes, communication and the nature of health care decisions made by doctors and other healthcare professionals.

Challenges faced in the implementation of the skills gained during the training

The evaluators sought to understand the challenges encountered in the implementation of the skills gained during the training as well as other difficulties experienced in the provision of consumer health information. The public and community librarians' discussion noted that the communities who use public and community libraries are usually challenged by distance and their occupation resulting to less or no time to visit libraries. All participants highlighted the insufficient print consumer health information resources which according to librarians were attributed to the shortages of finance. Also noted were language barriers and semi-illiteracy among the public library users and inadequate training skills and knowledge among library staff. Other challenges noted were:

- High demand for access of online resources which was outstretching the few computers available in the library for public use.
- High poverty levels among local communities hence some users from some regions were reported to have had expectations for monetary appreciation after attending library training on CHI.
- Poor internet connectivity due to limited ICT infrastructural development in some regions.
- Inadequate staffing. This was noted across all public and community libraries, for example, participant (A) noted "For us currently, we have no system librarian who can manage our e-resources section and assist clients."
- Few computers a common problem that was noted across all public and community libraries. This had implications on the utilization of online health information resources.
- The attitude and perception of the general public that public and community libraries are not places to seek for health information while others perceive librarian as incompetent in providing health related

information – a scenario that hinders the level of assistance the librarian can offer.

The findings point out a low level of preparedness of public and community libraries in providing CHI. Other challenges were attributed to users' shortcomings. Previous studies such as Yun, Adiputra, and Yang (2013); Kouame et al. (2005), and Yi and You (2014) had also noted the unpreparedness of public libraries which largely effected the provision of CHI. These studies recommended sufficient budget for collection development, infrastructure, facilities and staff in order to scale down the challenges. In addition to resources, the effective provision of CHI also requires deliberate commitment by leadership in championing change that would revolutionize the provision of CHI to the public at public and community libraries.

Suggestions on the provision of consumer health information at public and community libraries

When asked to point out additional information which would be significant in the effective provision of consumer health information at public and community libraries, librarians and users participants noted a number of initiatives that cut across general practices, policies and value addition activities. The major ones are summarized below.

- Need to increase budget for acquisition of consumer health information materials at public and community libraries.
- Need to strengthen networks for sharing key databases and other healthy related information with other libraries.
- Need for continuous training of librarians on CHI. Participants also recommended need for regular meetings and forums for sharing experiences and challenges amongst librarians from public and community libraries on the provision of CHI.
- Need for frequent users' training: this would enable users to easily access and retrieve relevant information resources especially the online health resources.
- Participants underscored the need to promote health information materials in public and community libraries through different media, for example, posters, flyers, electronic banners, and on library noticeboards among others.
- Need for public and community libraries to provide referral services to users on where else to get particular services and health related information.
- Need for public and community libraries to repackage consumer health information with reference to local users' needs or particular users.
- Need for public and community libraries to provide links to helpful online sources via KNLS website or pin the list of such databases and online sites at a conspicuous point in the digital library section.

Conclusions and Recommendations

The paper concludes that the collaboration and partnership of academic and public/community libraries in reaching out the public was inevitable and significant in enhancing the awareness, utilization and value of the consumer health information. The training on CHI enabled the acquisition of new literacy skills and knowledge in the provision and access of consumer health information. Impacts of the training were enormous and trickled down to the public. Librarians managed to set up a separate section for consumer health collection in their libraries. This initiative played a significant role in arousing the interests of users on these materials and hence should be enlarged to meet the varied needs of all the library users. This can be done by increasing the library budget for collection development and by liaising with some of the organizations that deal with health matters and are able to offer donations to the public and libraries. The study also recommends aggressive awareness and promotional activities of such sources.

Implication on Policies and Practices

The study has significant implications on the nature of collection and mechanisms of providing information services on consumer health at public and community libraries. The KNLS Board should endeavor to improve the consumer health information resources in the libraries. It should also enact mechanisms for training for other public and community librarians from other regions in the country that were not covered in the scope of this project. The public and community libraries should come up with strategies and policies on reaching out to the surrounding community both users and partners in making access and use of consumer health information successful.

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