

## **Engaging Local Libraries with the New Brunswick Community A Collaborative Case Study Research Initiative: Final Report**

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# **Engaging Local Libraries with the New Brunswick Community**

**A Collaborative Case Study Research Initiative**

**FINAL REPORT--REVISED**

**Learning Exchange, The Kettering Foundation**

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**January 30, 2018**

## **Introduction:**

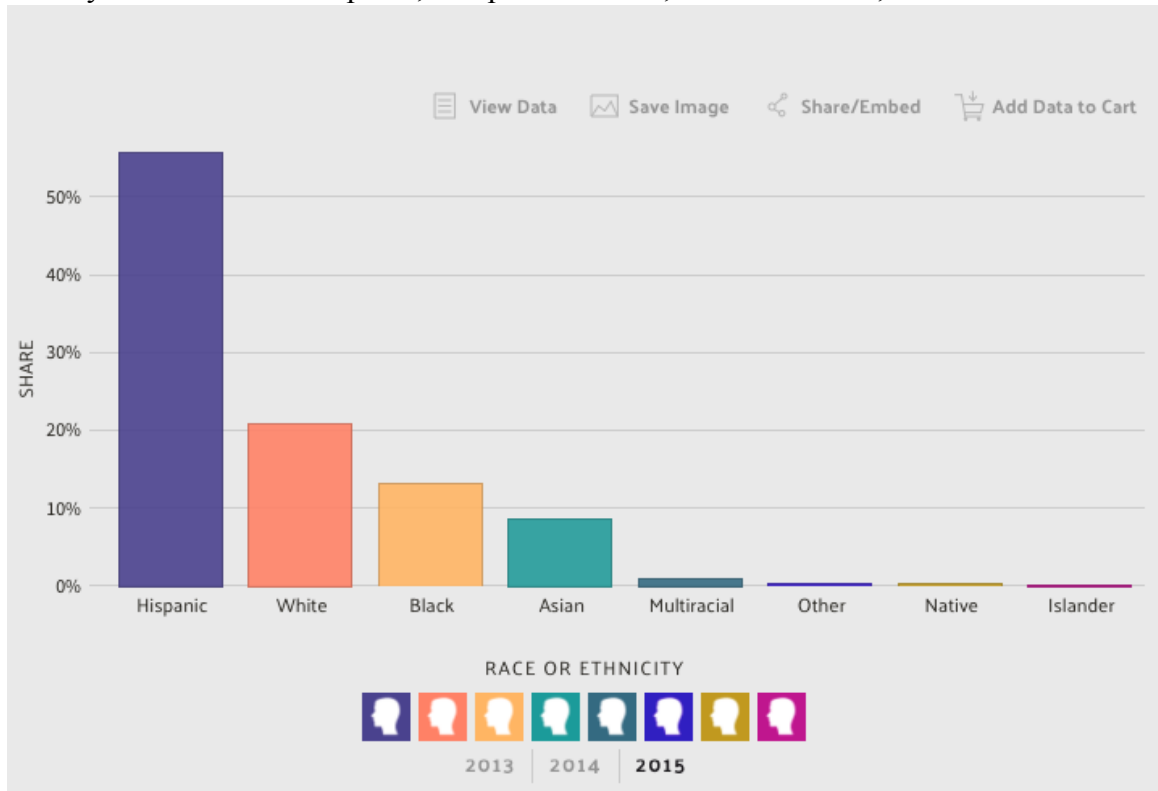
How can libraries deepen engagement with their communities by working with citizens to address challenges related to healthy living? To explore this question, we conducted a project in conjunction with the New Brunswick Free Public Library (NBFPL) in a mid-sized, highly diverse U.S. city (New Brunswick NJ), and community members from representative diverse ethnic groups. Our project aimed to apply the Kettering Foundation's 6 democratic practices to help libraries engage with citizens from marginalized populations. More specifically, we intended to enhance library-community relationships through community conversations or "forums" that uncovered issues of common concern around health and well being, with a special emphasis on engaging Latino residents of New Brunswick. Each community conversation, or "forum", offered a situation or meeting in which people could talk about a problem or matter of public interest in a safe, moderated space. Through this case study approach using community conversations focused on health and well being, we examined the process and outcomes of implementing this collaboration and considered implications of this case example for how public libraries serving diverse populations can grow and sustain meaningful connections with the public and foster civic participation.

This project was part of a learning exchange with the Kettering Foundation entitled "*Libraries and the Public: Returning to Democratic Roots*" that focused on exploring ways that libraries can work *with* ordinary citizens and communities to address issues of common concern. The exchange also included the Multnomah County (Portland OR), Houston, Cincinnati, and Topeka public libraries. The Kettering Foundation conducts research around the question: "What does it take to make democracy work as it should?"

## **Background: New Brunswick, NJ**

New Brunswick, New Jersey, is 300-year old city in the center of the state, with a population of 55,000. The city is a walking city, with the largest share of households having either one or no cars. 44% of the population (37% children) has an income below the poverty line. As of 2015, 69.5% of New Brunswick, NJ residents were U.S. citizens, which is lower than the national average of 93%. Close to half of the residents are native Spanish speakers. 31,000 of

the city's residents are Hispanic, compared with 11,758 white and 7,435 Black residents.



Source: New Brunswick, New Jersey (NJ) Poverty Rate Data, City-Data.com  
<http://www.city-data.com/poverty/poverty-New-Brunswick-New-Jersey.html#ixzz4wpdGrPiz>

The New Brunswick Free Public Library (NBFPL), incorporated in 1890, has served the community for over a century from its Carnegie building (completed in 1903) on Livingston Avenue. Its budget for serving 55,000 residents is just under \$1.5 million annually, far below that of neighboring communities like East Brunswick with 47,500 residents and a \$4 million budget. More than ½ of the library's circulation is to children, and 2/3 of the programming audience is children. The library offers a number of language classes, including an ESL Conversation Groups run by volunteers, and Conversation Cafes in cooperation with Rutgers Graduate School of Education and The Collaborative Center for Community-Based Research and Service. It also sponsors citizenship classes with Jewish Family Services. The library also includes some Spanish-language materials in its collections, including books for children, and hosted the Latino Americans: 500 Years of History program with Rutgers University, funded by the American Library Association and the National Endowment for the Humanities. NBFPL has established deep, trusted links to the many Latino organizations and members of the community. The children's and young adult librarians also reach out to various local organizations including pediatric residents, where they weave literacy conversations into discussions and conduct early childhood intervention with the Chandler Health Center. At childcare centers and the library, they conduct pre-school read and play events and bilingual story hours. Parents attend these events, but rarely use the library on their own; they are highly invested in their children's learning and success. The Library takes a lead role in staging two important celebrations: Day of the Dead (*Dia De Los Muertos*) with participation in the 1000s and *Cinco de Mayo* with

participation close to 5000. Although these commemorative events have created strong ties to the local Mexican community, they have not resulted in substantial library use, particularly by adult Latinos. Furthermore, librarians indicate they have not received questions about health-related issues, nor have local residents made use of the “*Healthy New Jersey*” website, which is produced by Rutgers medical librarians and linked on the NBFPL website.

### **Background: Community Health and Wellness**

Libraries throughout the United States and beyond are transitioning toward deeper public engagement, posing significant challenges that require better understanding of communities, their changing information needs, and the tools that can help them move forward with greater effectiveness. This is particularly true in the health care arena where it is estimated that 90 million people have low health literacy (Radick, 2015), especially for difficult-to-reach ethnic communities with language and other barriers to participation in the nation’s health care system. With passage of the Affordable Care Act, communities are charged with pulling together a Comprehensive Health Improvement Plan (CHIP) that addresses how they will provide services to underrepresented populations. In their quest to improve access to information resources, particularly for underrepresented groups and populations with special needs such as those living with chronic illnesses, many libraries seek to improve traditional means of providing health and wellness information to their constituents (Kaziunas, Ackerman and Veinot, 2013). Just as librarians have sought new tools to engage more deeply with their communities, so have health care professionals (Clinical and Translational, 2011).

New Brunswick, New Jersey, nicknamed "The Health Care City" to reflect the importance of that industry to its economy, is home to the world headquarters of Johnson & Johnson, along with several medical teaching and research institutions including Saint Peter's University Hospital, Robert Wood Johnson University Hospital, the Rutgers--Robert Wood Johnson Medical School, the Rutgers Cancer Institute of New Jersey, and The Bristol-Myers Squibb Children's Hospital. In addition, the city has a public high school focused on health sciences: the New Brunswick Health Sciences Technology High School. Researchers and clinicians from Rutgers and the hospitals have engaged with the community to study and intervene in health care provision. More than half of the local residents, who are recent immigrants from southern Mexico, face numerous health-related challenges from high incidence of chronic illness such as diabetes and obesity, and social marginalization (Guarnaccia, et.al., 2004; Silberberg, et.al., 2004; Burklow, 2009; Dulin, et. al., 2011; Cortis, 2012; Jacquez, et. al., 2015). According to Morales and Zhou (2015), “Ensuring equitable access to health services and health information is a complex issue that goes beyond the availability of services.” They recommend that health care providers and outreach programs such as those offered by libraries “deepen [their] overall understanding of the complexity of providing and ensuring equitable access to health information and services for at-risk or marginalized communities” (p. 9). These findings come at a pivotal moment for improving health literacy in the New Brunswick area as the Mayor and Rutgers Tomorrow have launched *Live Well-Vivir Bien New Brunswick*.

The Greater New Brunswick Health Care Collaborative, recently established with funds from the Robert Wood Johnson Foundation, is another local health initiative that strives to improve the culture of health in the region and increase the relevance and impact of services offered through

a partnership led by Rutgers University. One of the Collaborative's key initiatives is to improve health literacy by working with local public and academic medical libraries. Moreover, the city's two hospitals in collaboration with 65 partners have developed a Community Health Improvement Plan (CHIP) that has identified "access to health care and health information" as its top priority for the region. Over the past two years, representatives from the CHIP have worked with the regional United Way to convene implementation teams that include public, academic and medical librarians, as well as researchers from the Rutgers Institute for Health, doctors from the Rutgers Robert Wood Johnson Medical School, and health informatics scholars from the Rutgers School of Communication and Information. Together, they want to build upon the experience of the East Brunswick Public Library's nationally recognized "Just for the Health of It" project, <http://www.wellinks.org/>. In the last year, the CHIP health literacy team has offered other Middlesex County libraries consumer health training through the National Network of Libraries of Medicine (NNLM). The National Library of Medicine (NLM) has also developed useful health literacy tools to assist these community outreach initiatives.

In September 2017, the Robert Wood Johnson Foundation sponsored a statewide conference, showcasing the movement to expand the role of local public libraries in promoting a culture of health and well-being in New Jersey, including dissemination of health information and special programs focused on the social, economic and environmental determinants of health and health equity. The convening recognized that staff time is limited for training and certification, particularly for smaller, less well-resourced libraries that need creative approaches for using or drawing on existing free resources including Medline Plus, health information tip sheets, magazines, brochures, and other items, many of which are translated into Spanish and other languages. In October 2017, the Public Library Association (PLA—a division of the American Library Association) and the NNLM launched "Promoting Healthy Communities" <http://www.ala.org/pla/initiatives/healthliteracy> to increase public library workers' knowledge and skills related to consumer health services, with online and conference programming planned over the next few years. In December 2017, a conference that brought together New Jersey librarians, NNLM representatives, and health care professionals was convened on the topic: *Improving Health & Mental Health Literacy in Diverse Communities*, with the overall goal of building partnerships to improve access to culturally and linguistically appropriate health information, resources and programs. Participation in all of these initiatives by project investigators and local librarians has helped them move forward together.

The convergence of these various initiatives offers an ideal opportunity to apply community-based democratic practices as a new way to connect libraries and their communities to promote health and wellness. Hence, the timing of this Kettering learning exchange has helped inform parallel initiatives to improve access to health and wellness information. Undoubtedly, all of these efforts to help libraries improve health literacy accentuate the need for new community engagement models to connect harder-to-reach populations in the region, especially the Mexican community residing in New Brunswick.

### **1. Project Design:**

The project was designed to work closely with local health care professionals involved with promoting health and wellness in the New Brunswick Mexican community, and to partner with librarians from local public and medical/health science libraries.

**Phase 1:** In the initial phase, we addressed the following question: how do libraries work with citizens and communities to develop, implement, and assess health programs? We identified current practices of the NBFPL including events and programs offered—content, participation levels, community outreach and engagement, partnerships, and impact. We also spoke with academic health science librarians involved with community medicine and *Healthy NJ*, researchers and scholars working with New Brunswick citizens, and members of local health planning initiatives. In addition, we interviewed a variety of people involved with health and wellness projects, such as community health workers (CHWs) and *promotoras*--individuals trained to provide health information and education to individuals in their own communities.

**Phase 2:** In the second phase, we addressed the question: what are the current concerns of citizens and are they aligned with current programs? We engaged community members in community conversations/forums exploring their health and wellness concerns and the resources and services that could address them. These sessions took place at the public library, a community center, and a church. Our interest was learning about their perceptions of health and wellness and how we might make their concerns more central to ongoing efforts to offer health information through local libraries.

**Phase 3:** In the third phase, we invited librarians, researchers, and community representatives to consider our findings and deliberate to choose health resources and services that align with the community's needs, then outline specific action steps to implement a plan for relevant and meaningful collaborative health information services. Our intent was to build enduring relationships across the local public library, the health science libraries of Rutgers University, community provider organizations, and community members. We wanted to encourage local institutions to work *with* other local institutions to meet the needs for health information and health literacy resources for marginalized populations.

### **Relationship to Six Democratic Practices:**

The Kettering Foundation's six democratic practices provided the guiding framework for this research initiative. Through a variety of targeted strategies, we directly engaged community members in a collaborative effort with the local public library and consulted with Rutgers health sciences and "Just for the Health of It" librarians to identify unique health information needs and common concerns of different ethnic populations. In the "naming and framing" phase of the project, we began a "listening tour" consisting of observing local community members that helped inform us about the concerns and aspirations of the local Mexican community. After observing the community at various local forums, we convened two community conversations on health and well-being to identify/collect community members' aspirations and concerns. This report to the Kettering Foundation outlines our findings, identifies lessons learned, and considers next steps for the participating organizations in New Brunswick, NJ.

### **Significance:**

This project, which began with a modest scope of effort—engagement with New Brunswick adults from diverse under-served populations, was intended to create a sense of shared purpose and deeper connections between library staff and citizens in the community. This experiment

might also serve as a springboard for additional engagement activities around health and other topics of common concern. Lessons learned from this research will help libraries promote health literacy and gain insights into deeper engagement with citizens in community-building efforts that incorporate democratic practices.

## **2. What We Did**

**Phase 1: Current Practices** (Interviews with librarians from New Brunswick, East Brunswick “Just for the Health of It”, Rutgers Health Sciences, CHIP Coordinator, Rutgers Researchers)

1. Peter Guarnaccia – Latino Immigrant Health expert, Professor, Rutgers School of Environmental and Biological Sciences (October 27, 2015)
2. Miraida Morales, Latino Health and Libraries, Doctoral Student, Rutgers School of Communication and Information (October 28, 2015; September 8, 2016)
3. Karen D’Alonzo, Obesity and Diabetes in Mexican Immigrant Families – Causes and Solutions Research Director, Associate Dean, Rutgers School of Nursing (July 27, 2015; September 30, 2015, April 11, 2017, April 17, 2017)
4. Maria Vivar, “Citizen Scientist” and Lead Community Promotora (April 11, 2017)
5. Teresa Vivar, Executive Director Lazos Unidas America (November 2, 2016)
6. Mimi Lee, NJ State Library Outreach Coordinator (January 26, 2016)
7. Judith Cohn, Ying Tin Zhang, Rutgers Health Science Libraries Director and Community Librarian (February 2, 2016)
8. Scott Allen, Health Partnerships, Public Library Association, Deputy Director (February 2, 2016)
9. Yingting Zhang, Medical Librarian, Rutgers Robert Johnson Medical School, New Brunswick, Community Medicine liaison (November 8, 2016)
10. Peggy Dreker, Rutgers University Newark - NJ College of Medicine, Medical Librarian, Coordinator of *Healthy NJ* (November 7, 2016)
11. Bob Like, MD, Department of Family Medicine, and Director, Center for Cultural Competency, Rutgers Robert Wood Johnson Medical School (March 16, 2016)
12. Robert Belvin, Executive Director, NBFPL (October 28, 2015; November 29, 2016)
13. Mary Curran, Director of the Conversation Tree, Rutgers School of Education (December 12, 2016)
14. Rutgers IRB Certification (February 10, 2017)
15. Karen Parry, East Brunswick Public Library, Director of Information Services and Head, *Just for the Health of It* Health Literacy Initiative (August 22, 2017)
16. Zach Taylor, Coordinator, Community Health Consortium of Central Jersey (July 25, 2017)
17. New Brunswick Public Library, Librarians (July 28, 2017)
18. Robert Wood Johnson Foundation Symposium, *Achieving Healthy Communities Through Collaboration with Libraries: Why, What, and How* (September 7, 2017)
19. NJ Statewide Network for Cultural Competence (NJSNCC), “*Building Relationships to Create Health Literacy Partnerships and Healthy Communities*,” December 5, 2017.
20. Project participant De-Brief Meeting, Rutgers University Food Institute, December 13, 2017.
21. New Brunswick Free Public Library, De-Brief Meeting, January 18, 2018.

## **Phase II: Citizen Engagement**

1. Dialogue with the Mexican Consulate/Associates, NBFPL, 45 people (November 1, 2016)

2. Charla held by Rutgers research team investigating obesity and diabetes in Mexican immigrant families, 12 participants (April 4, 2017).
3. Debriefing of Charla with 2 promotoras and 3 researchers (April 11, 2017).
4. Conversation Café session on health held at the NBFPL, 26 participants (April 12, 2017)
5. Charla held at Sacred Heart Church by Rutgers research team investigating obesity and diabetes in Mexican immigrant families, 20 participants (April 17, 2017)
6. New Brunswick Community Conversations, 28 participants (October 17, 2017 and October 26, 2017)

### **Phase III: Consultations with Librarians about Next Steps** (November 2017 – January 2018)

1. Compile findings from community conversations and share them with librarians who participated in the project.
2. Meet with representatives from participating libraries on December 13, 2017 to introduce them to each other and our research team, provide an overview of the project, discuss our findings from the community conversations, and determine next steps.
3. The New Brunswick Free Public Library Adult Services Librarian invited the team to share findings with their staff, which resulted in a fruitful conversation with most of their staff on January 18, 2018.

### **3. Why did you design your project in this way?**

We began Phase 1 by talking with people already involved with delivering health services and health information to the New Brunswick Mexican community. It was critical to have a sense of the many health and wellness programs under way in the community and learn how these programs garner participation by local residents. We recognized that we needed to build upon existing relationships with a difficult-to-reach population. At the same time, we needed to strengthen our relationships with the librarians at NBFPL, researchers involved with local health concerns, and community organizations. They all became crucial actors in helping us bring community members together.

The Mexican community in New Brunswick recently immigrated to the United States from the rural southern states of Oaxaca and Puebla. This local population is quite bonded with strong ties and limited bridges to the wider local community, making it insular and difficult to reach, particularly due to language challenges and undocumented status. Recent raids by the US Immigration and Customs Enforcement Agency (ICE) have discouraged these residents from participation in public events. Nevertheless, the New Brunswick Free Public Library (NBFPL) continues to develop and maintain strong bonds with this community, particularly through its sponsorship of important Mexican festivals. Library staff co-plan special events with grass roots Latino organizations, most notably Lazos America Unida, and hold them at the library. A good example of this was an evening with the health team of the Mexican Consulate, which is based in New York city but came to New Brunswick at the joint request of the library and Lazos. Community outreach activities are coordinated by a reference librarian who oversees community programs. When asked about the community's interest in health resources, the NBFPL librarians report that it is indeed challenging to attract significant numbers of residents of the Mexican community to events at the library beyond festivals. When they have offered health-related



programs, few if anyone attends. What's more, they contend they have not recorded a health-related reference question and do not believe that the *Healthy NJ* web site gets any use, even though some resources are translated into Spanish. Library staff however do offer resources that contribute to community members' well-being through partnering with other organizations that serve the Latino community, such as the Family Success Center of the Puerto Rican Action Board (PRAB). Building upon the library's existing relationships was essential to our approach. It proved valuable in attracting community members to a trusted venue for conversations.

Rutgers University researchers have also built strong relationships with the local Latino community, focusing on health and wellness concerns, particularly related to the high incidence of obesity and diabetes among this population. Through their networks, we deepened our relationships with local community members concerned with health and wellness.

We chose health and wellness because it is one of the top focal areas for the regional health plan. The CHIP has promoted training regional librarians through the National Network of Libraries of Medicine's Middle Atlantic Region and then offering consumer health information to their constituents. Our aim was to "flip the model" by starting with citizens and then encouraging the library to align its services and programs. In the case of New Brunswick, this model promises more success given the reluctance of the local immigrant population to turn to the library for health and wellness information.

#### **4. What happened when you did it?**

- **How did deliberative democratic concepts and skills impact your institution's relationship with citizens and communities?**

Our project was unique in that it was not library- but community-based. The flipped model was the basis of our approach, but posed challenges identifying participants to attend forums. We needed to build trust among local residents given their fear and isolation during a period of raids on the undocumented community. We also had to cope with delays in events planned by partners for reasons beyond our control. We enlisted interpreters for sessions that helped us understand the nuances of the conversations and elicit trust among participants. The naming and framing sessions held with community members ensured a safe space for people to share their thoughts and work together on common concerns. Participants were open and candid about their beliefs and experiences. Our discussions with community members in New Brunswick built strong bonds with participants as well as librarians.

A number of conversations with the library director encouraged the investigators to pursue the project. But it was not until we got to meet with NBFPL librarians in the summer of 2017 that we gained sufficient traction to complete our investigation. Staff interest and support for our effort was instrumental in recruiting local participants for conversations. They also shared many insights including the degree to which the community trusts the library. But they acknowledged that working with the Mexican population takes time. Just the basics of publicity depend upon word of mouth since few residents have home technology. When community organizations like PRAB, Unity Square, Esperanza do programs like healthy eating at the library, they need to feel they have a stake; ownership and brand identity are important to them.

The librarians indicated that the local Mexican population is very concerned about their children's education—a key reason they emigrated to the US. For them education equals success; accordingly, they focus intensely on school and homework. This belief in the power of education is essential to the library's highly successful summer reading programs and outreach to schools and PTO meetings. Because many do not speak English, mothers tend to talk only with each other. Children learn English and translate, which can be humiliating for their parents. The shift in the country's political leadership in November 2016 came at a pivotal time for this project. Right after the election, people began leaving the country, not just hiding. The NBFPL staff told us that an anonymous reference box in the children's room received a half-dozen questions from young people about deportation.

Probably because the undocumented Mexican community in New Brunswick remains insular, participants in our forums indicated that solutions to their problems needed to come from the community, not from doctors or politicians. But they also indicated a desire to participate more in discussions like those we held, even though they feel limited in free time beyond their jobs, taking care of children, and ensuring that school work is completed. In fact, several children were using the library to complete their homework while their mothers were participating in the community conversations.

#### **How did it affect you and your colleagues with respect to your routines?**

The powerful conversations we held with librarians and community members reinforced the value of building these relationships prior to determining new services. The librarians indicated that they remember NO reference questions about health over the last several years. This was a revelation, given that health-related information seeking is among the top subject searches in public libraries and on the Internet. The librarians also told us that the focus of Latinos in New Brunswick was on their children's education. When we met with community members, we discovered that their aspirations and concerns followed what the librarians predicted, reflecting the deep involvement with and understanding they have of their community. Two librarians observed the conversations and expressed interest in continuing them. In addition, the Adult Services librarian attended the Robert Wood Johnson Foundation statewide conference in September 2017 that focused on the role of local public libraries in promoting a culture of health and well-being in New Jersey. It is likely that the approach we took will be incorporated into the routines of NBFPL librarians. It is hoped they will begin to incorporate democratic practices into their work in the future.

Personally, involvement with this type of interaction with the community informed how we think about its members and their experiences living in New Brunswick. By listening to them, we can perceive new ways to provide services. Students involved on our project are likely to incorporate this approach into their practice, transforming the way they visualize their role as future librarians and community leaders.

#### **How has this project impacted or influenced your colleagues?**

Convincing librarians/colleagues to build relationships with community members in new ways is challenging. Librarians in underserved communities like New Brunswick are stretched thin; they struggle to offer basic services and are committed to other priorities of their respective organizations. Nevertheless, they saw this effort as an exciting and important opportunity to

strengthen existing relationships with their community. They were instrumental in recruiting participants to our conversations and they attended the sessions.

Although our New Brunswick and East Brunswick colleagues recognize the value of identifying community concerns, none were familiar with newly available methods of engagement promoted through ALA's Libraries Transform Communities initiative. What's more, they remain hesitant to devote limited time to undertake the work necessary to build the kind of beneficial relationships necessary. Neither the public nor the Rutgers University health science libraries have Spanish-speaking librarians, making engagement with local residents difficult. Learning about consumer health information resources and services is only meaningful if librarians have an audience to take advantage of these offerings. Starting with the population and acting upon their aspirations and concerns is a more viable approach, particularly for a community like New Brunswick that has had little success promoting health and wellness programs and services in the past.

Two follow up meetings, one with representatives from the New Brunswick Free Public Library and other regional librarians, and the second with most of the NBFPL staff indicated that the library is beginning to recognize that it needs to assume a more active role in providing health and wellness information to their community. After confirming the validity of the profile of the community extracted from the conversations held in the fall, the New Brunswick librarians talked about the differences of their residents relative to neighboring communities. Latinos in New Brunswick are far more socially isolated, and only go to trusted places. Although they appreciate the library, particularly for advancing their children's education and celebrating key holidays, they do not perceive the library as a place to go for health information. Further discussions explored how to view health and well-being from a broader lens—mental, physical and spiritual. The conversations uncovered the broader social context of disparities in the quality of schools, the environment (air and water), and the quality of health care, and thus emerged as “the problem behind the problem.” To some extent, the library staff consider that through partnerships with familiar community-based organizations, they are addressing health and well-being concerns. However, through these conversations, we came to realize, as they did, that their partnerships with other organizations were more transactional in nature and could be strengthened with a more “relational” approach—an arena for expanding possibilities. At the subsequent staff meeting requested by the New Brunswick librarians, they began to view collaboration as an important step in advancing health and wellness but challenging given that other organizations are more the gateways for community services than the library. Nevertheless, they expressed an aspiration for local community members to “see the library as one of the first places to go to get information/answers about health and wellness” and that they need to put the library “in the flow” of their lives. They also want be more central to the organizations who work with the community, becoming an “actual partner, more of a two-way street.” Their challenge, now, if they are to assert more of a role in this arena, is to start “setting the agenda” and “step up to the plate.” They recognize that they are most successful when they are out and visible in the community. But they are also concerned that success means more demands—demands they feel incapable of fulfilling. Finally, they have become more open to working on health and wellness programming and recognize they will need to find new ways to make such services appealing to community residents.

## **5. How has what you are learning influencing how you think about or do your work?**

This project has demonstrated the value of engaging with local residents directly before we determine what is best for them, their families, and their communities. Sensitivity to cultural context is also essential for setting program priorities. To work with this particular population, we must recognize that multi-generational settings are the norm requiring consideration of child-care options and scheduling to reflect family schedules. We also learned that libraries serving this particular population need to position themselves as community information hubs rather than individual health and wellness information services—the approach taken by more affluent communities in the region.

Institutional Review Board (IRB) certification, required by Rutgers University for undertaking this project, helped build trust through the assurances we were required to collect from conversation participants. Sensitivity to ethical issues when conducting research with this particular community is essential to this undertaking. Our concern with privacy protection and use of first names only, as well as our promise that notes would not include anyone's name or be made public helped build confidence among participants. Consequently, they were remarkably candid and forthcoming when queried about their personal concerns and aspirations for

Two library staff members sat in on the conversations and were totally engaged by the discussions. They found this approach very interesting and indicated they can benefit from this work. At the conclusion of our planning meeting, one of the library administrators stated, “We didn't realize we were doing so much. We need more time to talk with each other about these things. I guess we're not as behind as I thought.” Staff members have become much more interested in learning new ways to engage their community, thanks to this project.

Training to deliver consumer health information resources and services is only meaningful if librarians have an audience to take advantage of these offerings. Starting with the population and acting upon their aspirations and concerns is a more viable approach in a community like New Brunswick. But the library must become more proactive and build partnerships with others in the community and librarians from the region if they are to succeed in promoting health and wellness among the local population.

## **6. What did you learn?**

Our community conversations and listening sessions revealed many of the aspirations and concerns of the Latino population in New Brunswick. After categorizing and theming the notes from the conversations, we concluded:

Community members want access to affordable nutritional food, local recreational facilities, and quality medical care in order to keep themselves and their families safe and healthy. But they are concerned that good food is too expensive and unavailable nearby, exercise opportunities are limited for them and their families, and doctors care little about their needs and rarely speak to them in their language. As people talked more about these concerns, they focused on the need for parents and elders to play a bigger role ensuring their children's well being and the need for the community to help itself more. They believe that the various institutions in their “Health Care City” can do more to help local citizens and that the University and hospitals can educate the community better. If community-based institutions like the library were to collaborate with

health-related organizations to teach about healthier living, they would be more likely to trust those efforts and participate in making them succeed.

In order to participate in community activities, local Mexican residents told us they need childcare, comfortable and trusted settings like churches and the public library, and involvement by younger people with good ideas and more proficient English language skills. Recent immigrants face many challenges including arrests that contribute to overall stress, depression, fear, child anxiety, low self-esteem, poverty, lack of exercise, and isolation especially for older adults. But they also value opportunities for shared experiences, including talking with others. They expressed an interest in receiving more reliable health and nutrition-related information. Yet, they had few concrete ideas how to make their lives better. Although they consider the public library a trusted and respectful asset in the community, they regard it more as a destination to celebrate festivals and a resource for their children than a place to seek information about health and wellness. Nevertheless, they recognized that they could benefit from navigational help in locating health care services (including mental and dental assistance). Overall, they want fairer and more equitable approaches to their needs and are eager to have their individual and collective voices heard by those with power to make changes that benefit all.

We also learned about the strengths of the NBFPL and were able to extend their vision of what is possible to advance the well-being of their community. Partnership is a central strategy and a significant strength for a small, under-resourced local public library. We came to understand that “one size does not fit all” in the growing efforts to promote health literacy through local public libraries. As such, the approaches of NBFPL should be lifted up to inform other small libraries with diverse populations.

### **What surprised you?**

Community members focused more on general issues related to their desire for a healthy living environment than on specific issues around sickness and treatment options. Of particular interest was access to healthy foods, nutrition, and recreation opportunities. Their desire to ensure a better life for their children shaped the way they responded to most questions. They only spoke about illness when they were in a conversation café about visiting the doctor. They emphasized the importance of solving their own problems, not relying on health care professionals. Talk about the cost of health care came up often, but without a discussion of insurance. Several were perplexed by the high cost of and limited access to medical assistance. Overall, their real concern was more about feeling invisible, without a voice. Although they live in the “Health Care City,” they do not feel they receive sufficient attention from the major health care institutions blocks away from their homes. This sense of powerlessness underscored much of the discussion. It also informs how the library might work with the community in the future.

### **How did these experiences impact you as a library professional and as a citizen?**

Moderating and recording these conversations with community members offered a rare opportunity to hear authentic dialogue from a population that is virtually invisible. Their candid expression of their struggles and concerns was moving. It leaves us far better informed about the nature of their lives and ways we might act in concert with them. Their willingness to take the time to talk with us and share such intimate stories will shape our practice going forward. We

found their recognition of the need to participate in public discourse refreshing, indicating that those least empowered still struggle to have a voice and make a difference.

A student assistant who observed one of the conversations summed up the experience poignantly:

I found the community conversation fascinating and was surprised how the participants so clearly articulated (for the most part) the intersection between the issues they are dealing with directly and national policy/politics. I was struck by the extent to which "the big picture" ideas were viewed as the root of their problems, and I'm guessing this may be a feature of our current contextual moment. For example, they expressed frustration with the decline of their local schools and connected their experience of this issue to the issue of education inequity being linked to economic inequity. The reality of this has always been true, but it seems as if there is a greater awareness of it--understanding the micro and macro simultaneously. This was true in the conversation about healthcare as well. In addition, I was saddened by their clear sense of disenfranchisement--powerless to change the conditions of their lives, which is exactly how those with power would want them to feel, powerless to disrupt the status quo.

**How did you (or will you) share what you learned with your colleagues? With your community?**

We met with librarians in New Brunswick, East Brunswick, Franklin Township, and the Rutgers Health Sciences to discuss what we learned and the implications, who else might get involved, and actions going forward. Community members were eager to have more opportunities to participate in these types of discussions and demonstrated an interest in hearing what might happen because of them. We made a summary of our findings available to librarians participating in the project. Already, librarians from New Brunswick asked us to address the entire staff and look forward to continuing the conversation. Beyond meeting with them, we also had them submit a survey of their aspirations and concerns about moving forward with health and wellness programs and services. The fact that they have demonstrated far more interest in these issues than expressed when we first started the project is testimony to the power of the community conversations held in their building and ways we have worked together to identify new possibilities for moving ahead. We are presenting our findings at the ALISE national conference in Denver in February, and then will share them at other professional meetings and prepare articles for publication.

**7. If you were to do this project again, what would you do differently next time?**

The most challenging part of conducting this project was connecting with the local undocumented immigrant community. This population residing in New Brunswick is quite insular and difficult to reach through institutions. The public library has established deep, trusted links to many organizations and members of the community through its involvement with two important celebrations: Day of the Dead (*Dia De Los Muertos*) and *Cinco de Mayo*. Although these commemorative events have created strong ties to the local Mexican community, it has not resulted in substantial library use. This is likely related to several factors, including limited English knowledge among Latino adults in the community, lack of familiarity with libraries, and insufficient spare time, even though their children do make use of the library. Engagement

required tapping into existing networks of scholars, librarians, and others who have already built trust and connections to this population.

As a University faculty member, Nancy Kranich was required to become certified through the Institutional Research Board (IRB). This effort took extensive time and energy, slowing down the pace of intervention with community members. Although this training was useful, it could have taken place earlier in the process so as not to slow progress. It also limited what we could accomplish with this project.

Because we worked with other researchers and librarians, we were dependent upon their schedules, slowing our forward momentum. Since we are not part of the public library staff, our challenges included coordination of meetings and working with various library-connected stakeholders. On the other hand, the library was very cooperative and appreciative of our involvement and the librarians demonstrated excitement about the experience and its potential going forward. It helped the librarians recognize that “they are more deeply involved with and familiar with the community than they had assumed” (interview with deputy director, July 29, 2017). We were able to tap into a strong connection between them and local residents, and raise their own sense of value. Their expanded involvement demonstrates that they recognize that starting with citizens and engaging with them and community organizations in new ways is a viable path toward delivering more meaningful programs and services to a hard-to-teach community.

### **8. How will you apply what you have learned to your future work?**

The need to turn outward and begin new initiatives starting with citizen conversations will inform all of our work going forward. Deepening engagement of libraries with their communities around health concerns/requirements/opportunities requires better understanding of community aspirations and concerns. Favorable views of the library as a trusted setting are common, but residents don't associate the library with health and wellness, at least not in New Brunswick. If the library is to contribute to building a healthy community, it can start by hosting more conversations and work more closely with community organizations for collective impact. In addition, planning and engagement must take place in trusted settings that the population frequents such as churches and libraries, and in native languages. Social connections are essential to engagement with these populations who tend to turn inward toward familiar contacts and remain hard to reach by outsiders. Focusing on children in collaboration with schools is another potential path toward more meaningful engagement. The built environment influences health and wellness of communities. Marginalized populations tend to live far from green space and healthy food stores, and they lack family-oriented opportunities for exercise and healthy eating. This common concern is found in New Brunswick as well as other Latino communities across the country. Finally, stress, fear, and social isolation are common themes in Mexican immigrant communities. When we met with the librarians to debrief about our findings, they asked us for advice. Rather than provide them a set of recommendations, we asked them some of the same questions we had asked residents:

- What are your aspirations for New Brunswick Free Public Library to achieve greater health and wellness for the New Brunswick community?
- What are the challenges you face in achieving these aspirations?

- What needs to change in the community and the library to reach these aspirations?

In sum, if libraries are to make a difference, they need to take a holistic view of the conditions of a particular population, then work in tandem with citizens and other organizations to determine best choices for moving forward.

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## APPENDIX

### **Project Partners and Community Organizations**

**The Rutgers University Libraries Health Sciences Libraries** have served as the leader of HealthyNJ ([www.healthynj.org](http://www.healthynj.org)) and cooperate with the “Just for the Health of It” regional training initiative based at the East Brunswick Public Library. The Rutgers health sciences libraries have experience in creating and deploying health literacy initiatives, creating consumer-friendly health materials, and identifying and promoting use of authoritative health information online resources.

**Rutgers Greater New Brunswick Community Health Collaborative**, a network of scholars and community-based organizations, aims to engage diverse stakeholder communities in New Brunswick as partners in research and collective action to improve community health, builds capacity for community-campus health research partnerships.

**The New Brunswick Free Public Library** serves the residents of New Brunswick, half of which are Latinos. It offers an impressive array of public programs to serve the local community in partnership with many community organizations, the public schools, and the flagship campus of Rutgers University in New Brunswick.

**The East Brunswick Public Library “Just for the Health of It” program.**

**New Jersey State Library’s Diversity & Community Engagement** trains and supports local libraries to strengthen resources for diverse communities through engagement.

#### **Community Organizations:**

**LIVE WELL-VIVIR BIEN NEW BRUNSWICK™ campaign**, the communication platform for Healthier New Brunswick--a collaboration of community groups and entities with the common interest of improving the overall health and wellbeing of New Brunswick residents  
**New Brunswick Tomorrow** identifies critical community needs and creates solutions through public/private revitalization that assure that health and welfare concerns are addressed to complement the city’s revival.

**Esperanza Neighborhood Project** creates safer, cleaner, stronger community services in New Brunswick Latino neighborhoods.

**Puerto Rican Action Board (PRAB)** advocates for and provides services for low-income central New Jersey Latinos in a bilingual and bicultural setting.