HEAL (Healthy Eating and Active Living) at the Library via Shared Use Programming

Noah Lenstra, PhD, Assistant Professor at UNCG, requests $248,707 for a three-year Early Career Development project to answer the question: *How do public libraries and their partners promote healthy communities through shared use programming focused on healthy eating and active living (HEAL)*? This multi-disciplinary investigation has the ancillary purpose of bringing concepts from the field of Public Health into the research and teaching of Library and Information Science. Based on in-depth case studies in six strategically chosen communities across the nation, the PI, student assistants, the already in place Advisory Board composed of public librarians from across the nation, and the in-formation Advisory Group composed of senior scholars working in fields of Public Health, LIS, and Parks and Recreation Management will produce an evidence-based model of how public libraries form and sustain community partnerships to support healthy living. The model will have three dimensions: 1) **Community.** How does the library fit within community-level HEAL initiatives? 2) **Impact.** What impacts does the library have in these initiatives? 3) **Internal Practices.** How do library staff incorporate HEAL into the administration, spaces, and practices of the library? The model will be disseminated collaboratively with the Advisory Board and Group to have broad impact throughout the nation, and beyond.

Statement of Need. Despite increasing evidence that public librarians collaborate with partners to support healthy living through public programs (e.g. Bertot et al. 2015: 62; Liu 2018; Jaeger et al. 2012: 277), our overall knowledge of this trend and its impacts remains minimal. Looking at libraries as places (Buschman & Leckie 2006; Wiegand 2016) reveals they are increasingly being used to support healthy living. In Boise, Idaho, the public library commissioned a series of studies to examine how new branches and renovations could be "designed with public health in mind" (Carmel 2019). Examples of new initiatives include library gardens, bike fix-it stations, teaching kitchens in libraries, and immersive programs on everything from FitBits to pickling.

These initiatives typically develop through community partnerships. Increasingly, federal policy focuses on supporting these partnerships. As part of its *Let's Move! Museums & Gardens* initiative, the IMLS (2014) showed "How Libraries Can Get Involved in Summer Meals." Libraries are "getting involved" not only in summer meals, but in many other local, regional, and national initiatives to increase healthy eating and physical activity among Americans. To understand this process, this study brings concepts from Public Health into the research and teaching of LIS. These concepts include *shared use*, which "occurs when government entities or other organizations agree to open their facilities for use by the broader community." Shared use of libraries *already* takes place, even if this phenomenon has not been analyzed as such. The Robert Wood Johnson Foundation reports that at the public library in Monterey Park, CA, "line dance leader Kit Cheung teaches her class in an unlikely place —the parking lot of a local library." The second new concept this study introduces to LIS is *HEAL*, or *HEPA* (as in the National After School Association's Healthy Eating and Physical Activity Guidelines). Initiatives focused on improving public health frequently address and target both food and physical activity. This type of work also *already* takes place in libraries. In Bristol, CT, librarians "introduced exercise, mindfulness and creative food preparation activities to lunchtime" served at the library during summer months.

This research systematically investigates for the first time how this work happens. The **Project Design** focuses on analyzing three dimensions of this phenomenon. The **Community** dimensions of what libraries do to support HEAL through shared use will be assessed through interviews and focus groups with partners who have worked with libraries, as well as with local leaders in the health, wellness, and recreation sectors. Second, the project will assess the **Impact** of what libraries and their partners do to support HEAL, using focus groups, interviews, and participant observation in programs to determine impacts on participants. In addition, we will identify what audiences are reached (and not reached) through these initiatives. Finally, to assess **Internal Practices**, interviews with library staff will produce insight into how supporting HEAL through shared use affects library operations, focusing on questions that arose in the PI's earlier work. In particular: how do libraries grapple with liability in the case of injury, how to provide access to everyone interested in participating, and how to address any staffing, funding, and space issues that may occur as a result of "getting involved" in HEAL initiatives?

The PI's past work analyzed the diffusion of this trend both in North Carolina (Lenstra 2018) and across North America (Lenstra 2017; Lenstra & D'Arpa 2019), finding that libraries support HEAL through community partnerships. Nevertheless, despite this work, we do not know how these partnerships function, and thus we do not know how to support librarians in their efforts through continuing and Master's-level education.

To establish a study participant pool, the PI will work with the Advisory Board to recruit six libraries from across the U.S. to participate in this project, to be confirmed by the time the final proposal is submitted to the IMLS in March 2020. For each case study, we anticipate engaging in interviews and focus groups at least 10 community partners and leaders, 30 members of the public, and 10 library team members. We will also collect administrative documents related to this trend, such as grant applications and memoranda of understanding.

The process of conducting the research will be shaped by guidance from the multi-disciplinary Advisory Group, which will include senior scholars in the fields of Public Health, Parks and Recreation Management, and LIS, with whom the P.I. has worked as part of his involvement in the CDC-funded Physical Activity Policy Research Network (PAPRN) and the RWJF's Sharing Knowledge to Build a Culture of Health community. Group members will be confirmed by the time the full proposal is submitted to the IMLS in March 2020. This group will include representatives from the Healthy Library initiative at the University of Pennsylvania, Parks & Recreation Management at North Carolina State University, and LIS at the University of North Carolina at Chapel Hill. It is envisioned that each case study (Yin 2017) will involve at least one week (7 days) of intensive on-the-ground fieldwork conducted by the PI. Before and after each trip, the PI and student assistant will arrange interviews and field visits, and collect online information about HEAL initiatives involving the library, using techniques the PI used in a past study of physical activity in North Carolina libraries (Lenstra 2018). After fieldwork, time will be spent organizing field data, and conducting follow-up phone calls and emails as needed. Then, using an iterative research design process (Lewis 1998), each case study will be analyzed using grounded theory techniques (Charmaz 2014) to develop and refine an evidence-based model. The software Atlas.TI will be used to analyze the multi-modal data collected during fieldwork. The PI has used this software for past research (Lenstra 2018). The codebook developed for that project will serve as a starting point in the analysis. Throughout, early findings will be shared with participating libraries and advisors for member-checking.

In addition to sharing the findings in peer-reviewed LIS academic journals and conferences, the PI will work with the Advisory Board and Group to ensure the model is accessible within communication channels utilized by public librarians, and by those active within the multi-disciplinary HEAL space. This project mirrors the IMLS's (2010-2016) Let's Move! Museums & Gardens, which the PI's Let's Move in Libraries (2016-) extends into the library sector. Findings will be shared through the P.I.'s network, which (as of 9/25/2019), has 1839 followers on Instagram, 1562 on Facebook, 1295 on Twitter, and 2339 subscribers to a monthly e-newsletter, as well as through the PI's monthly blog on programming partnerships published by the American Library Association. Finally, the project will culminate in a free, one-day, to be recorded online summit entitled *HEAL (Healthy Eating and Active Living) at the Library* that public librarians, LIS educators, and representatives from Public Health and Parks from around the world can join, using the PI's past work with OCLC/Webjunction and the National Network of Libraries of Medicine to inform the development and delivery of this national event.

Timetable. *Year 1* – Conduct four case studies and develop preliminary model; begin member-checking preliminary findings with advisory board and group; set up project website; *Year 2* – Finish last two case studies to finalize model. Disseminate model in peer reviewed publication (*Library Quarterly)*, and at Public Library Association conference; *Year 3* – Finish model. Disseminate in national summit, open-access online on project website, at American Public Health Association conference, and in peer reviewed health publication.

Diversity Plan. In recruiting case study communities, the PI will work with the Advisory Board to ensure diverse representation across rural/urban and other demographic criteria (e.g. race/ethnicity). During fieldwork the PI will secure a diverse representation of viewpoints, including not only formal healthcare institutions, but also community coalitions focused on increasing health, including community-based non-profits.

Broad Impact. This project will *scale* innovative practices that emerge in particular places such that they have national impact. By studying how public libraries and their partners support healthy communities, this project will produce an evidence-based model that will enable impactful policies and pedagogies that will help public librarians become integrated into the field of public health, a trend already underway (e.g. Philbin et al. 2018).

Budget summary. The estimated total budget for the project is $248,707 (d+i). Personnel: $110,643 to include PI effort, student and project support; $25,490 associated fringe; $15,000 travel costs to sites and conference; $19,800 other (advisory board, gift cards, library stipends); $77,774 indirect costs.