# Interrogating how Information (Re)produces Systemic Barriers within LGBTQ+ Communities to Inform Global LIS Education

Vanessa L. Kitzie, Travis L. Wagner, A. Nick Vera, and Valerie Lookingbill<sup>a</sup>

<sup>a</sup>University of South Carolina, School of Library and Information Science, USA

kitzie@mailbox.sc.edu, wagnertl@email.sc.edu, veeraan@email.sc.edu, lookingv@email.sc.edu

## ABSTRACT

This preliminary research examines the health information practices of South Carolina LGBTQ+ communities. Findings have the following implications for LIS education at a global level: building cultural competency regarding the role of information in marginalizing certain populations, and training students to engage in user outreach and advocacy. These implications address a global need for LIS education to encompass social responsibility and inclusion into program curricula.

### TOPICS

community-led services; critical librarianship; information needs; information seeking; information use; social justice; specific populations

### **INTRODUCTION**

Recognizing social responsibility and diversity as critical components of library and information science (LIS) education (ALA, 2004) at a global level facilitates meaningful cultural change through needs-based library service development (Vincent, 2015). This abstract contributes to this change by reporting on preliminary research examining the health information practices of South Carolina (SC) lesbian, gay, bisexual, transgender, and queer (LGBTQ+) communities. Findings build cultural competency (Cooke, 2016; Overall, 2009) among LIS professionals by exploring the role of information in marginalizing certain populations. Despite findings bound to a U.S. locale, professionals can draw broader implications about how the profession constructs relationships, services, systems, values, etc., that further oppress marginalized groups. Findings also yield implications informing global LIS education, including training students to engage in user outreach and advocacy.

This abstract addresses the following research questions:

- 1. How does sociocultural context shape the health information practices of SC LGBTQ+ communities?
- 2. What are the implications of research findings for LIS education?

#### LITERATURE REVIEW

Literature informing this project addresses health disparities of LGBTQ+ communities, information practices, and inclusion in LIS education.

LGBTQ+ communities face significant health disparities when compared to their heterosexual, cisgender peers (APA Public Interest Government Relations Office, 2013; Institute of Medicine, 2011; National LGBT Health Education Center, 2016). Systemic barriers produce these outcomes by reducing access to relevant health resources. Information constitutes one type of systemic barrier as LGBTQ+ people face challenges learning about their healthcare needs and navigating the healthcare system (Romanelli & Hudson, 2017). A lack of research exists examining LGBTQ+ health from an information perspective (Meadowbrooke, Veinot, Loveluck, Hickok, & Bauermeister, 2014).

An information practices approach is uniquely positioned to address this gap. This approach examines the relationship between individuals and sociocultural context. While nascent in its application to health, information practices have been used by researchers to examine youth parenting (Greyson, 2017) and ordering and reading health records (Huvila, Daniels, Cajander, & Åhlfeldt, 2016). Findings when applying an information practices perspective to LGBTQ+ populations demonstrate significant implications for fostering inclusive LIS practice (Kitzie, 2017).

LIS education has long struggled with inclusion (Vincent, 2015). Focusing on inclusion yields several benefits for the profession, including improved recruitment and retention from underrepresented populations, and increased relevance of libraries for surrounding communities. LIS research, curricula, and practice need to expand diversity rhetoric beyond demographics to examine specific populations marginalized in terms of information (Jaeger, Bertot, & Subramaniam, 2013). This understanding must extend to education-based advocacy – not only offering students the tools to understand how power operates within their communities but also to act in socially responsible ways that ingrain social justice into their workplaces (Cooke et al., 2015; Roberts & Noble, 2016).

This review suggests a necessary interrelationship between research and practice to foster core values of social responsibility and diversity within LIS education. Exposing students to research examining relationships between information and marginalization can foster cultural competencies necessary to provide relevant, community-centric services. Further, methodological techniques applied within such research can inform students' outreach to these

communities. This relationship is particularly salient within health librarianship, where LIS curricula remain underdeveloped (Ma, Stahl, & Knotts, 2018).

#### METHODOLOGY

This study reports on findings from ~30 ongoing interviews with SC LGBTQ+ community leaders using a semi-structured protocol. Sampling strategies align with those suggested for marginalized or "hidden" populations – purposive, snowball, and theoretical (Gahagan & Colpitts, 2017). The research incorporates an intersectional lens (Crenshaw, 1989), sampling for maximal variation among salient identity categories like race/ethnicity, age, and education. Data include transcripts from audio-recorded interviews and mapping exercises to triangulate data collection (Greyson, O'Brien, & Shoveller, 2017). Analysis is iterative and inductive, using the constant comparative method (Charmaz, 2014) to generate open codes followed by organizing codes into larger themes via axial and selective coding (Corbin & Strauss, 2015). The research employs internal and external auditing to establish trustworthiness (Cresswell, 2014).

#### FINDINGS (RQ1)

Preliminary findings uncovered dialectical relationships between the information practices of SC LGBTQ+ communities and sociocultural context. Communities experience a host of systemic barriers that (re)produce what information is available to them and how they interact with this information. Consider how participant Pat (pseudonym) describes their community's limited available health information focusing on sexually transmitted infections (STIs) and HIV/AIDS:

Our community is ... considered this profit mechanism for a lot of companies, and a lot of health researchers ... perpetuate this ideology that black, queer, and trans people are ... inherently predisposed to being the carriers of these different infections ... That ... makes this cyclical ... relationship where it's like, "Well, most of the newly-diagnosed people are African-American or black." And I'm like, "But most of the people that you're testing are African-American or black."

Pat's account illustrates several systemic barriers that operate at the intersection of multiple community identities, including race, class, sexuality, gender, and political ideology. These barriers produce a myopic information world for Pat's community wherein the critical information created, sought, shared, and used relates to STIs and HIV/AIDS. Pat's narrative uncovers another key research finding, which is that a lack of health information and knowledge is not inherent to underserved communities, but instead produced by a gap between what information and knowledge cultural insiders versus the community deem relevant.

#### **IMPLICATIONS (RQ2)**

Understanding the sociocultural factors shaping health information practices of LGBTQ+ communities has significant implications for LIS education globally. Findings suggest that deficit-based models of information behaviors and practice often found in LIS curricula should be revised to incorporate new approaches that highlight the role of systems in (re)producing information practices. These approaches will deepen students' understanding of how information operates in the lives of marginalized communities beyond demography, producing future practitioners who provide community-centric services.

Findings also have action-oriented implications for LIS education. Addressing Pat's narrative cannot be accomplished by solely giving their community information. Challenging students to act in light of these findings is critical as they will practice within institutions that mirror the systemic issues Pat and their community experience outside of the library. Knowing how to act in light of these issues will help prepare students to leverage their institutional power to begin to dismantle these structures.

#### REFERENCES

- ALA. (2004). Core values of librarianship. Retrieved June 30, 2019, from http://www.ala.org/advocacy/intfreedom/statementspols/corevalues
- APA Public Interest Government Relations Office. (2013). LGBT health disparities.
- Charmaz, K. (2014). *Constructing grounded theory: A practical guide through qualitative analysis* (7th ed.). Thousand Oaks, CA: Sage.
- Cooke, N. A. (2016). *Information services to diverse populations: Developing culturally competent library professionals*. Santa Barbara, CA: Libraries Unlimited.
- Cooke, N. A., Jardine, F., Jaeger, P. T., Shilton, K., Feltis, C., & Hamiel, M. (2015). The virtuous circle revisited: Injecting diversity, inclusion, rights, justice, and equity into LIS from education to advocacy. *The Library Quarterly*, 85(2), 150–171. http://doi.org/10.1086/680154
- Corbin, J., & Strauss, A. L. (2015). *Basics of qualitative research: Techniques and procedures* for developing grounded theory (4th ed.). Thousand Oaks, CA: Sage.
- Crenshaw, K. (1989). Demarginalizing the intersection of race and sex: A black feminist critique of antidiscrimination doctrine, feminist theory and antiracist policies. *The University of Chicago Legal Forum*, *1989*(1), 139–167. http://doi.org/10.1525/sp.2007.54.1.23.

- Cresswell, J. W. (2014). *Qualitative, quantitative, and mixed methods approaches*. Thousand Oaks, CA: SAGE Publications.
- Gahagan, J., & Colpitts, E. (2017). Understanding and measuring LGBTQ pathways to health: A scoping review of strengths-based health promotion approaches in LGBTQ health research. *Journal of Homosexuality*, *64*(1), 95–121. http://doi.org/10.1080/00918369.2016.1172893
- Greyson, D. (2017). Health information practices of young parents. *Journal of Documentation*, 73(5), 778–802. http://doi.org/10.1108/JD-07-2016-0089
- Greyson, D., O'Brien, H., & Shoveller, J. (2017). Information world mapping: A participatory arts-based elicitation method for information behavior interviews. *Library and Information Science Research*, *39*(2), 149–157. http://doi.org/10.1016/j.lisr.2017.03.003
- Huvila, I., Daniels, M., Cajander, Å., & Åhlfeldt, R.-M. (2016). Patients reading their medical records: differences in experiences and attitudes between regular and inexperienced readers. *Information Research*, 21(1). Retrieved from http://www.informationr.net/ir/21-1/paper706.html#.XRIOVZNKjHc
- Institute of Medicine. (2011). *The health of lesbian, gay, bisexual, and transgender people: Building a foundation for better understanding*. Washington D.C. Retrieved from www.iom.edu/lgbthealth
- Jaeger, P. T., Bertot, J. C., & Subramaniam, M. (2013). Preparing Future Librarians to Effectively Serve Their Communities. *The Library Quarterly*, 83(3), 243–248. http://doi.org/10.1086/670699
- Kitzie, V. L. (2017). Beyond behaviors, needs, and seeking: A qualitative investigation of information practices among individuals with LGBTQ+ identities. Rutgers. Retrieved from https://rucore.libraries.rutgers.edu/rutgers-lib/53647/PDF/1/
- Ma, J., Stahl, L., & Knotts, E. (2018). Emerging roles of health information professionals for library and information science curriculum development: a scoping review. *Journal of the Medical Library Association*, 106(4), 432–444. http://doi.org/10.5195/jmla.2018.354
- Meadowbrooke, C. C., Veinot, T. C., Loveluck, J., Hickok, A., & Bauermeister, J. A. (2014). Information behavior and HIV testing intentions among young men at risk for HIV/AIDS. *Journal of the Association for Information Science and Technology*, 65(3), 609–620. http://doi.org/10.1002/asi.23001
- National LGBT Health Education Center. (2016). Understanding the health needs of LGBT people.
- Overall, P. M. (2009). Cultural competence: A conceptual framework for library and information science professionals. *The Library Quarterly*, 79(2), 175–204.
- Roberts, S. T., & Noble, S. U. (2016). Empowered to name, Inspired to act: Social responsibility and diversity as calls to action in the LIS context. *Library Trends*, *64*(3), 512–532. http://doi.org/10.1353/lib.2016.0008

- Romanelli, M., & Hudson, K. D. (2017). Individual and systemic barriers to health care: Perspectives of lesbian, gay, bisexual, and transgender adults. *American Journal of Orthopsychiatry*, 87(6), 714–728. http://doi.org/10.1037/ort0000306
- Vincent, J. (2015). Why do we need to bother?: Public library services for LGBTQI people. *Library Trends*, 64(2), 285–298. http://doi.org/10.1353/lib.2015.0050