



Evidence Summary

Recommendations for Academic Health Libraries Outreach and Engagement Programs with Indigenous Peoples at Collaboration and Empowerment Levels: Striving for Empowerment

A Review of:

Cruise, A., Ellsworth-Kopkowski, A., Villezcas, A. N., Eldredge, J., & Rethlefsen, M. L. (2023). Academic health sciences libraries' outreach and engagement with North American Indigenous communities: A scoping review. *Journal of the Medical Library Association*, 111(3), 630–656. <https://doi.org/10.5195/jmla.2023.1616>

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Abstract

Objective – To identify trends and themes in literature sources on interventions for engagement and outreach by academic health sciences libraries with Native Americans, Alaska Natives, First Nations, and Indigenous peoples in the United States, Canada, and Mexico, in order to identify and share effective practices.

Design – Scoping review.

Setting – Academic health sciences libraries in the United States, Canada, and Mexico.

Subjects – Sixty-five reports of 45 engagement and outreach programs spanning 1982–2022.

Methods – Researchers conducted a scoping review guided by Arksey and O'Malley's framework (2005) and the JBI Manual for Evidence Synthesis. They first established inclusion and exclusion criteria then developed a search strategy and ran it across seven bibliographic databases and a library and information science repository. The research team also searched specific journals, conference proceedings, and websites, to find unpublished materials and grey literature; they used mailing lists and personal contacts to find further sources. The researchers used Covidence to screen sources from the bibliographic databases, with English language sources screened by two reviewers and non-English language sources screened by at least one reviewer who could read that language. Sources found via other search methods were screened using Google Sheets, which was also used for data extraction. The researchers analyzed the data using the International Association for Public Participation (IAP2) Spectrum of Public Participation, summarizing programs within the two highest levels to synthesize effective practice.

Main Results – The authors identified 45 programs with 27 types of interventions. Training was the most common intervention at 25.5%. They identified 130 different partners; government organizations, both federal and tribal, were the most common at 23.1%. Using the IAP2 Spectrum of Public Participation, a tool designed to assess the level of participation and role of the public in public participation processes, the research team found that five programmes (11.1%) engaged with the community at the two highest and also most effective and meaningful levels of collaborate and empower. From these five programs the researchers identified the following areas of effective practice: 1) partnership building and building trust with tribal communities including respecting the knowledge and expertise of the community partners, 2) prioritising and understanding the needs of the tribal communities including developing awareness of cultural differences, 3) partnering with multiple organisations to increase infrastructure, resources, and funding, and, where possible, 4) building on preexisting partnerships and relationships.

Conclusion – The authors concluded that libraries are likely to struggle to reach the two highest levels of the IAP2 Spectrum of Public Participation, due to issues with infrastructure, resources, long-term funding, and previous troubled relationships between governments, organizations, and researchers with Native and Indigenous populations, leading to challenges with building and sustaining partnerships. They recommend that libraries initiate any engagement and outreach programs with a needs assessment, with the goal of involving the community partners as collaborators or empowering them as owners and decision makers. The researchers also recommend engaging programs with data sovereignty to increase IAP2 levels and give communities control over their own data.

Commentary

The review acknowledged the systemic racism embedded in healthcare institutions which has led to health disparities of Native and Indigenous peoples. Gone et al. (2019) explored the impacts of historical trauma on health outcomes of Indigenous peoples of the United States and Canada through a systematic review, finding statistically significant associations between historical trauma and adverse health outcomes, but highlighting the current difficulties in translating these findings into policy or practice. This aligns with Stanley et al. (2020) who have called for further research to address health disparities for Indigenous populations within the United States with these populations as participants, but again note the importance of ensuring that the research can be translated into policy and practice. Health librarians have an important role to play in relation to health literacy and can do this through outreach and engagement programs with specific communities to address health information needs. Aligning with government strategies and priorities such as Healthy People 2030 (Office of Disease Prevention and Health Promotion, n.d.) can give opportunities for funding and partnership to ensure programs are delivered effectively.

This review was critically appraised using the JBI Critical Appraisal Checklist for Systematic Reviews and Research Syntheses (2020). The review has a clear research question with multiple clear sub-research questions suitable for the methodology and aims of a scoping review, as well as inclusion criteria that appropriately addresses the concepts of the research questions as well as publication information such as source types and source languages. However, although the researchers have cited Aromataris et al. (2024) for conducting their review, they have not followed the methods of using the PCC (Population, Concept, and Context) question formulation framework to identify the topic concepts more clearly, and neither have they aligned the inclusion criteria to the PCC question formulation framework.

Both the search strategy and resources used to search for sources were strong, with the researchers demonstrating a breadth of search locations and methods to ensure good recall of literature sources. This was a comprehensive search attempting to find unpublished and grey literature sources as well, with the researchers acknowledging that sources on this topic could be wide ranging in terms of source type and search location. The researchers did not undertake a critical appraisal of the included sources; although critical appraisal is not always a component of scoping reviews, the researchers could have strengthened the reporting of their methods by acknowledging and explaining their decision.

This review highlights a number of practical recommendations for health libraries that support outreach and engagement with Indigenous communities. Using the IAP2 levels, the review found that the existing programs could be improved to demonstrate deeper collaboration and empowerment with their relevant community partners. The review highlights a number of strategies and government priorities that libraries could use to access funding and partnership opportunities, to either enhance existing programs, or to develop new ones.

References

- Arksey, H., & O'Malley, L. (2005). Scoping studies: Towards a methodological framework. *Int J Soc Res Methodol.*, 8(1), 19-32. <http://dx.doi.org/10.1080/1364557032000119616>.
- Aromataris, E., Lockwood, C., Porritt, K., Pilla, B., & Jordan, Z. (2024). *JBI Manual for Evidence Synthesis*. JBI. <https://synthesismanual.jbi.global>. <https://doi.org/10.46658/JBIMES-24-01>
- Cruise, A., Ellsworth-Kopkowski, A., Villezcas, N., Eldredge, J., & Rethlefsen, M. L. (2023). Academic health sciences libraries' outreach and engagement with North American Indigenous communities: A scoping review. *Journal of the Medical Library Association*, 111(3), 630–656. <https://doi.org/10.5195/jmla.2023.1616>
- Gone, J. P., Hartmann, W. E., Pomerville, A., Wendt, D. C., Klem, S. H., & Burrage, R. L. (2019). The impact of historical trauma on health outcomes for Indigenous populations in the USA and Canada: A systematic review. *The American Psychologist*, 74(1), 20–35. <https://doi.org/10.1037/amp0000338>
- JBI. (2020). *Critical appraisal tools. Checklist for systematic reviews and research syntheses*. <https://jbi.global/critical-appraisal-tools>
- Office of Disease Prevention and Health Promotion. (n.d.). *Health literacy in Healthy People 2030*. U.S. Department of Health and Human Services. <https://health.gov/healthypeople/priority-areas/health-literacy-healthy-people-2030>

Stanley, L. R., Swaim, R. C., Kaholokula, J. K., Kelly, K. J., Belcourt, A., & Allen, J. (2020). The imperative for research to promote health equity in Indigenous communities. *Prevention Science*, 21(Suppl 1), 13–21. <https://doi.org/10.1007/s11121-017-0850-9>