Title:
Resituating public library values to leverage the health information practices of South Carolina LGBTQ+ communities

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Biography: Dr. Vanessa Kitzie studies the information practices of marginalized groups, with a focus on individuals identifying as LGBTQ+. Her research findings inform how information centers, such as libraries, and systems can better serve these individuals. You can find more about her current IMLS-funded project supporting this research by visiting: http://bit.ly/hiplgbtq

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Biography: Travis is a PhD candidate in USC's School of Library and Information Science and an adjunct instructor in USC's Women's and Gender Studies Department. Their research focuses on relationships between information organization and queer visibility. They are also the cofounder of the Queer Cola Oral History and Digital Archive Project.

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Biography: Nick is a PhD student in USC's School of Library and Information Science. Nick's work and research efforts are focused on the health needs of rural and underserved communities in South Carolina, allowing his research to inform future initiatives and health promotion programs that advocate for these groups.

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Biography: Valerie Lookingbill is a master's student in USC's School of Library and Information Science. Her research interests focus on information needs and behaviors of individuals living with mental illness in efforts to inform future resources and services to this population.

Abstract (500 words):

Social Responsibility and *Diversity* are core values within the Library and Information Science (LIS) field (American Library Association, 2004). Yet instantiating them proves challenging as LIS education, research, and practice have historically mirrored dominant institutions and structures (Gibson et al., 2017; Roberts & Noble, 2016). This paper bridges these values with LIS practice by reporting on a community-centric research project examining the health information practices of South Carolina (SC) lesbian, gay, bisexual, transgender, and queer (LGBTQ+)[1] communities. Informed by semi-structured interviews with ~30 SC LGBTQ+ community leaders and ~6-8 focus groups with community members,[2] the paper addresses the following research questions:

>RQ1. How do SC LGBTQ+ communities create, seek, share, and use health information?
>>RQ1.1 What are the social and structural factors affecting these health-related information practices?
>RQ2. How can public libraries leverage the expertise of LGBTQ+ communities to facilitate information practices promoting community health?

Answering these questions contributes to theoretical and practical knowledge about how communities that feel unwelcome in public libraries interact with information and offers opportunities for institutional change to address a critical community need.

Data collection and analysis are ongoing and iterative. Currently, we are interviewing ~30 community leaders (ages 13+) to obtain a macro-level view of their community's health information practices (present – June 2019). We will then complete ~6-8 focus groups with community members to internally validate interview findings (June – September 2019). We use two elicitation methods to improve the accuracy of data recall: open-ended questions and information worlds mapping (Greyson, O'Brien, & Shoveller, 2017). Our sampling methods are purposive, snowball, and theoretical to reach "hidden" sub-groups and engender theoretical saturation during iterative data analysis. Data sources are verbatim interview transcripts, analytic memos of information world maps, field notes, and reflexive researcher journals. Data analysis (present – September 2019) entails qualitative coding, following first-cycle process and descriptive coding to generate initial codes and second-cycle focused, axial, and theoretical coding to establish central themes and categories (Saldaña, 2013).

Our preliminary findings from 14 community leader interviews contribute to LIS research challenging cultural deficit models that focus on how marginalized communities lack institutionally sanctioned information (Gibson & Martin, 2019). Initial findings suggest that SC LGBTQ+ communities knowingly engage in "unsafe" health information practices due to barriers that make "safe" decisions incredibly risky. Further, communities offer informational support in response to these challenges, which is purposefully insular due to mistrusting experts, including medical and library practitioners. Findings have

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[1] Umbrella labels like LGBTQ+ cannot fully capture the variety and multiplicity of ways that people identify themselves, and also can have racial and class-based connotations among other identity intersections. We use this umbrella label not as a way to exclude identities not named (e.g., asexual, pansexual, genderqueer, etc.) or that intersect with sex, gender, and sexuality (e.g., race, class, ability, etc.) but for its cultural intelligibility.

[2] Since this research is currently in progress, sample sizes are approximate.

implications for practice by shifting library interventions from focusing on what LGBTQ+ communities *lack* concerning health information to leveraging community-oriented health information practices.

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