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Comparison of Health Literacy among Academic Librarians. Case Study: Tehran of Medical Sciences and Azad Universities Librarians

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Abstract:

Objective: Promoting health and determining the level of health literacy is one of the most important indicators in each society. This study was conducted with the aim of evaluating the health literacy status among librarians of Azad universities and medical sciences regarding the impact of librarians on their individual health and their role in disseminating health information that promotes health. This research is a descriptive survey. The statistical population consists of 90 librarians working in the libraries of the Islamic Azad universities and medical sciences in Tehran. The data were collected using TOFHLA's functional health literacy questionnaire in December 2018. Descriptive statistics, one-way T-test and Friedman test were used to analyze the data. The mean age of the subjects was 39, of which 74.7% were women and the rest were male, and 69% had a library education. The mean health literacy score was 83.7%. 82.3% of librarians had adequate health literacy, 3.8% had border health literacy and 13.9% had inadequate health literacy. The health literacy of librarians in two universities was sufficient and not significant. **Conclusion:** Since there was no significant difference between the health literacy of librarians of the two universities, the activity in medical science libraries was not very effective in achieving health literacy.

Key words: Health Literacy; Librarians; Tehran University, Medical Sciences

1. Introduction:

The literacy and enjoyment of its capabilities can be examined in various aspects. In this context, attention to different dimensions of literacy will be more important. One of the important dimensions of literacy is the same health literacy that has been presented for several occasions. Meanwhile, although they define health as "having complete physical and mental health, and not just a lack of disease and organ failure," in practice this definition is very ideal. In the real world, health and disease do not have a definite border and it is better. For spectral health, one side has complete health and death on the other side. (Hatami , Razavi , Nozadi, 2003).

Individual, social, economic and environmental factors affect the health status of individuals and communities, and nutrition, tobacco and physical activity are among the important determinants of health and lifestyle, which play an important role in people's health (Aeenparast , Farzadi , Mafton, 2013).

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Promoting health determines the management of health determinants. Studies show that knowledge of people affects the quality of information seeking by them, their processing and decision making for the use of specific goods or health services, and the weakness of health performance is associated with inadequate health knowledge both in healthy individuals and in patients. Baradaran et al, (2007). Health literacy also defines the capacity to obtain, process, and understand basic information and services needed for health-related decision-making. (Ghanbari et al., 2012).

In this regard, the staff of academic libraries, like those of every profession, is active forces in production and productivity. Librarians working in the library, based on the type of library and administrative system of universities, from various disciplines and specializations in the library, and henceforth called "librarians", have the role of information brokers and should be able to provide appropriate services to clients. Present. The physical and psychological health of librarians will surely be effective in performing their better work, and paying attention to the comfort and health of this group will increase the efficiency and customer satisfaction.

Therefore, librarians, like other businesses, are exposed to various public and occupational illnesses and any disturbance in their health is detrimental to the task and the blow to the library's productivity. This determines the key role of librarians' health in providing their professional and social services better. Therefore, the present study intends to consider the level of health literacy among the librarians of the universities and universities of medical sciences in Tehran from Iran country, in order to determine the extent to which their health literacy status has been achieved and, consequently, authorities can program Design related designs.

2. Literature review and Research:

Health literacy is a concept that relates to health and its fields and affects one's ability to act on health information and better control of individual, family and community health and thus not only a personality, but also a key determinant of health and well-being at the community level. Health literacy has nothing to do with reading and writing texts and searching for information.

Health literacy areas include three levels:

- Functional health literacy to read and understand the exact formulas, labels, and oral and written health information.
- Conceptual health literacy for the search, understanding, evaluation and use of health information and informed choices that reduce the health risks and increase the quality of life.
- Health literacy as empowerment to empower and educate committed and active citizens to promote health and prevent and understand their rights as a patient and increase their ability to move through the health system and to know about health hazards (Kanj & Mitic, 2009)

Health literacy is different from the individual characteristics and community health system, depending on health problems, health care providers and community health systems. The World Health Organization considers health literacy as one of the greatest determinants of health and recommends the creation of a community worldwide to monitor and coordinate health promotion activities. In Iran, the prospect of a health plan map in the 2025 horizon shows Iran as a healthy and capable society in achieving a 20-year perspective, in which people have health literacy (ability to access information, analysis and decision-making power in health matters).) And have a favorable level of social capital. Considering the above items, various internal and external researches have been carried out using various tools and in various groups of the population about health literacy, but none of them have studied the health literacy of librarians. Some external studies point to the role of

librarians in the transfer of health literacy, and many studies indicate a moderate or low level of health literacy among subjects.

In the research (Mola Khalili et al., 2014) "Health Literacy of Patients Admitted to the Educational Hospitals of Isfahan University of Medical Sciences" showed that the health literacy of patients was more inadequate and marginal. In a similar study (Reisi et al., 2014). In health literacy research and health promotion behaviors in elderly people in Isfahan, found that elderly health literacy was 79.6% inadequate and 8.8% adequate.

A study by (Kooshyar et al., 2014), Entitled "The Study of the Relationship between Health Literacy and Adherence to Health Therapy and Quality of Life in the Elderly People with Diabetes Mellitus", showed that most elderly people with diabetes have inadequate literacy, and also in the study of health literacy and interest The application of health services in the urban community of Kerman "was determined by the level of education less than (60%).

In introducing health literacy areas in Asia and Asia (Kanj & Mitic, 2009) showed that health literacy is low in most countries and Iran is in the 14th out of 21 countries and in all cases the level of women's health literacy is lower. In another review, McCray (2005) categorized health literacy into five levels, and examined the low level of health literacy in society and its determinants and the role of health and technology custodians.

3. Research Methodology

The present study is a descriptive survey method. There are various tools for assessing health literacy in the world. One of the most important and validated Translator and Validated Questionnaire (TOFHLA) is widely used by researchers. In Iran, in the design and psychometric study of the health literacy tool in the Iranian urban population of 15 to 65 years old, the questionnaire was introduced as one of the standard tools (Montazeri & Tavousi, 2014). Validity of the questionnaire was approved by professors and library and health professionals and its reliability was 0.89 with Cronbach's alpha and was used without changes in librarians' society.

The TOFHLA questionnaire has two parts: Reading comprehension (Numerical ability) and computing (Reading comprehension). Computational section: In this section, information is provided to the prescribing prescription of a physician or treatment process in a cadre, and then questions are asked about each one. This section has 17 questions and 50 marks. Reading comprehension section: Texts that include ready-to-take photographs, patient's rights and responsibilities, the standard form of insurance and standard patient consent are provided in the form of texts with deleted words that should be selected by the appropriate words for vacancies. This section has 50 vacancies and 50 marks.

The two sections have a total of 100 points, with a score of 0 to 59 inadequate or lower health literacy, 60 to 74 border or border health literacy, and 75 to 100 adequate or higher health literacy.

In a distributed questionnaire among librarians, demographic characteristics including gender, age, education, and work experience were first asked. Then, the status of the use of health care with the answers of yes and no to four quarters on the referral of outpatient to the treatment centers in the last three months, the reason for referring to medical centers, referring to the emergency department, the history of hospitalization in one year and the number of chronic diseases were evaluated.

All librarians of the universities of free universities and medical sciences in Tehran (a total of 15 libraries) were studied in January, 1395, and due to the extensive centers and affiliated faculties of the two universities, a wider study was postponed to another opportunity.

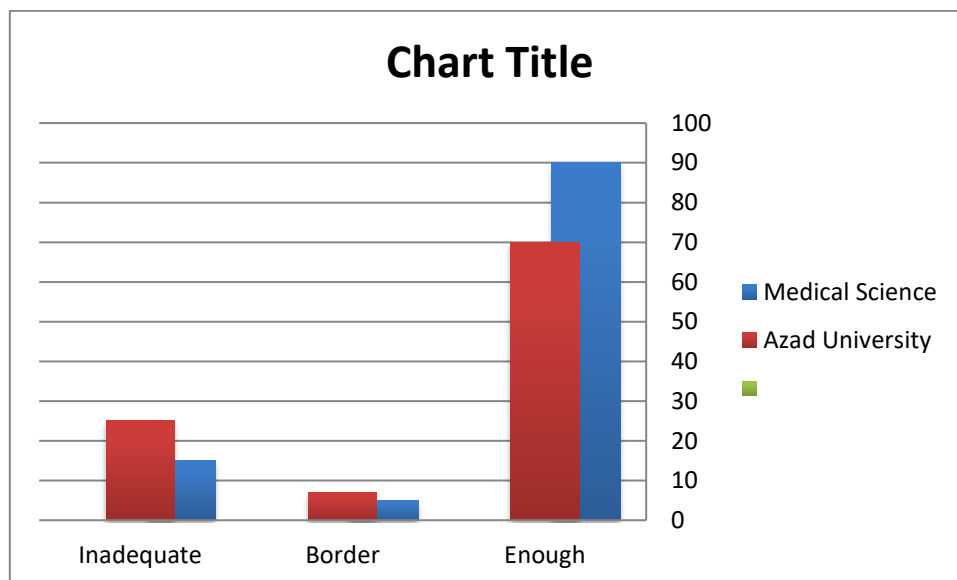
By referring to libraries, questionnaires were distributed among librarians and detailed descriptions of different departments and how they were filled out. They were asked to answer questions by relying on their personal information and not consulting with others and obtaining information from the Internet or other resources, and 30 minutes of response time was set.

A total of 90 questionnaires were distributed. 5 unanswered questionnaires and 6 incomplete questionnaires (not answering questions in one of two sections) were removed. Finally, 79 questionnaires were completed, which included 54 respondents, university librarians and 24 Azad university students. Data were analyzed using SPSS 19 software. Descriptive statistics, T-test and Chi-square and correlation coefficient were used.

4. Results

The librarians of Tehran University were 69.2% and women with 74.7% had the highest number of respondents. The mean age of the subjects was 39.21 years. 2.34% were in the age range of fewer than 35 and 15.8% in the age range of 40 to 45 years.

Diagram 1: Health Literacy Level of Two Librarians



The chart above shows that 50.6% of librarians had undergraduate degrees and 3.9% had diplomas, and of 13 academic degrees, 73.3% had graduated from librarianship. Married people had the highest percentage of respondents (71.4%) and 36.5% of the households were estimated. Based on the findings, the mean score of health literacy was 83.7%, which was 79 in men and 85.29 in women. The average score for the computing part was 39.76 and the reading comprehension part was 94.44.

According to the classification, 82.3% of librarians had adequate health literacy, 3.8% had marginal or border health literacy and 13.9% had inadequate health literacy.

Chart 2: Librarians' health literacy levels according to their field of study

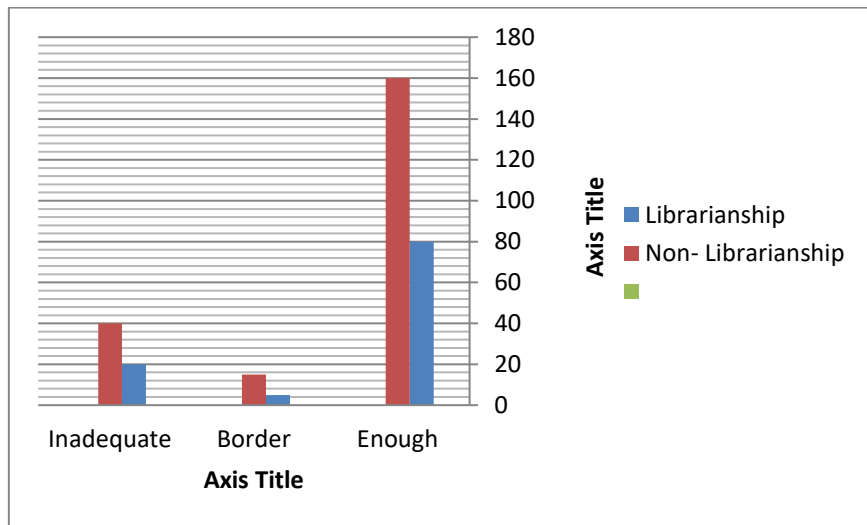


Chart 2 shows that librarians with non-librarianship education (with a diversity of twelve courses) (average higher literacy scores (86.22) compared with librarians graduating in librarianship (82.3).

Table 1: Personal characteristics and level of health literacy in librarians of Tehran and Azad universities

p	Inadequate health literacy		Border health literacy		Adequate health literacy		Health literacy score				
	Percent	Number	Percent	Number	Percent	Number	SD	mean	Percent	Number	
	13.9	11	3.8	3	82.3	65	16.6	83.7	100	79	Health literacy
0.170	10.2	6	5.1	3	84.7	50	15	85.29	74.7	59	Female
	25	5	0	0	75	15	20.2	79	25.3	20	Male
0.832	11.6	3	3.8	1	84.6	22	17.45	84.73	34.2	26	<35
	14.2	1	4.8	1	81	17	19.08	83.09	27.6	21	40-35
	8.4	1	8.3	1	83.3	10	10.98	84.83	15.8	12	40-45
	23.5	4	0	0	76.5	13	17.37	81	22.4	17	>45
0.177	9.3	5	3.7	2	87	47	13.9	85.72	69.2	54	M.S.T.
	25	6	4.2	1	70.8	17	21.27	79	30.8	24	Azad
	33.3	1	0	0	66.7	2	16.65	72.67	3.9	3	Diploma

0.337	16.6	1	16.7	1	66.7	4	22.19	75.88	7.8	6	Associate Degree	education
	15.4	6	0	0	84.6	33	15	84.82	50.6	39	Bachelor	
	10.3	3	6.9	2	82.8	24	17.92	84.65	37.7	29	Masters	
0.356	17.4	9	3.8	2	78.8	41	18.47	82.31	69.3	52	Librarianship	Field of Study
	8.7	2	4.3	1	87	20	12.87	86.22	30.7	23	Non-librarianship	
0.263	20	10	2	1	78	39	18.57	80.88	71.4	50	Married	marital status
	5	1	10	2	85	17	12.83	87.45	28.6	20	Single-divorced	
0.584	17.4	4	0	0	82.6	19	17.7	82.22	36.5	23	Yes	Households
	10	4	5	2	85	34	15.46	85.15	63.5	40	NO.	

As shown in the table, the highest percentage of health literacy was allocated to the bachelor's degree and the highest percentage of inadequate health literacy was assigned to the diploma. Married and non-households had the highest average health literacy.

Table 2: Use of health services and health literacy levels of librarians from Tehran and Azad universities

P	Inadequate health literacy		Border health literacy		Adequate health literacy		Health literacy score					
	Percent	Number	Percent	Number	Percent	Number	SD	mean	Percent	Number		
0.473	2.9	1	5.9	2	91.2	31	12.8	86.38	65.4	34	Yes	Visit to health centers in the last three months
	11.1	2	0	0	88.9	16	13.97	88.61	34.6	18	NO	
0.565	17.9	5	7.1	2	75	21	17.61	82.04	46.7	28	Check-up and screening	The reason for referring to the treatment center
	7.7	1	7.7	1	84.6	11	11.65	86.23	21.6	13	illness	
	15.8	3	0	0	84.2	16	20.02	80.05	31.7	19	Disease and check-ups	
0.148	22.2	4	5.6	1	72.2	13	16.69	81.28	23.1	18	Yes	Emergency in the past year
	10	6	3.3	2	86.7	52	16.25	84.92	76.9	60	NO	
0.515	0	0	0	0	100	2	0.71	96.5	2.6	2	Yes	Admitted to the last year
	14.7	11	4	3	81.3	61	16.72	83	97.4	75	NO	
0.625	12.2	6	2	1	85.7	42	17.51	83.65	66.2	49	nothing	Number of chronic

	20	3	6.7	1	73.3	11	16.39	82.87	20.3	15	One	diseases
	10	1	10	1	80	8	13.96	86.9	13.5	10	More than one	

The results obtained in Table 2 indicate that 48.7% of librarians spend 4 hours or more, with more (84.2%) having adequate health literacy and mostly librarians at the University of Tehran.

Table 3: Health literacy of two university librarians and health behaviors

P	Inadequate health literacy		Border health literacy		Adequate health literacy		Health literacy score					
	Percent	Number	Percent	Number	Percent	Number	SD	mean	Percent	Number		
0.746	10.7	3	3.6	1	85.7	24	14.2	86.71	36.4	28	Less than 2 units	Fruit intake per day
	18.2	8	2.3	1	79.5	35	18.5	81.04	57.1	44	2 to 4 units	
	0	3	0	0	100	5	8.2	91.4	6.5	5	More than 4 units	
0.895	13.1	8	3.3	2	83.6	51	17.1	84	80.3	61	Less than 3 units	Consumption of vegetables per day
	7.1	1	0	0	92.9	13	13.7	86	10.6	7	3 to 5 units	
0.587	0	0	0	0	100	1	0	96	1.3	1	More than 5 units	Physical activity per week
	0	0	0	0	100	6	5.3	91.5	7.6	6	At all	
	9.1	1	0	0	90.9	10	16	85.3	13.9	11	one hour	
	20.8	5	8.3	2	70.8	17	16	81.2	30.4	24	2 to 3 hours	
	13.2	5	2.6	1	84.2	32	18.3	83.6	48.1	38	4 hours or more	

The results obtained in Table 3 indicate that 48.7% of librarians spend 4 hours or more, with more (84.2%) having adequate health literacy, and most of them are librarians at the University of Tehran. 57.9% of them consume up to four units per day, with a healthy literacy of 79.5%, and most are medical science librarians. 80.3% of librarians consume less than 3 units of vegetable (at least) per day and 83.6% of them have adequate health literacy.

According to the above tables, the findings of this study indicate that most of the librarians of Tehran University of Medical Sciences are free of adequate health, which is consistent with the results of (Mola Khalili et al., 2014), which is based on the higher health literacy of employees.

5. Discussion

If health literacy is the ability of people to function properly in the health system, it should be related to the characteristics of individuals and the health system. Students work in the information environment, they also have access to written and online information resources, have the ability to search scientifically and communicate skills, listening He has learned or acquired a speech and acquired background and cultural knowledge. On the one hand, they associate with their colleagues and clients and have the opportunity to exchange experiences and information (Javadzade et al., 2012).

Given the availability of the University of Tehran Health Center, its role in raising the level of health literacy, especially the staff of the university should not be ignored. Provide health and wellness workshops, provide brochures and leaflets for maintaining health, preventing or introducing various diseases, and How to deal with them, publishing magazine and newsletter in print and digital, sending employees email, inviting to check up each year, providing health IDs, organizing Internet health events on the active site of the center, proper descriptions, guidance from physicians, physiotherapy staff , Radiology, ultrasound and other sections and installation of information Health is important and necessary as posters in every part of the activities of the center.\

There was no significant difference between the two levels of librarians' health literacy. So activity in libraries the faculties of the University of Medical Sciences did not have much effect on the health literacy of librarians.

Although women had a higher level of health literacy, gender and health literacy were not significant. Also, there was no significant relationship between health literacy with any level of education, field of study, marital status, household care, library of service place, age and history. Only age and history have a greater effect on health literacy and both have inverse relationship. That means people with a lower age and background have higher health literacy. Younger librarians with less history are mostly single, have higher education and lower family responsibilities, and because of the up-to-date knowledge and care that their age is supposed to be, they can learn and analyze issues more calmly and more leisurely.

Graduates of the undergraduate degree had the highest percentage of health literacy (52.4%) and the lowest (3.2%) of them were graduates. Academic education helps people to better understand and analyze content. Research results (Mola Khalili et al., 2014; Reisi et al., 2014 and Nekoei-Moghadam & Parva, 2011) It also showed this.

Single individuals had a higher level of literacy than married people, although this result was also found in some previous studies, perhaps because of family responsibilities and engagement in the workplace, the issues of children, and the mental engagement of married workers. Most women and young people are not the heads of households, and they are healthier for the reasons mentioned above.

Because of the type of academic education, their experiences and their professional activity, librarians have the ability to seek scientific knowledge and acquire cultural background knowledge. Their relationship is high and they can easily exchange knowledge and experience with their colleagues and clients. The reason for their self-care is more than others, which is one of the necessary successes in educating people and negotiating with the health system; therefore, they will gain higher health literacy and receive better and more efficient services.

Librarians with inadequate health literacy went to the treatment centers more than others for treating the disease, they were admitted to the hospital and even came to the emergency department,

and more educated students came to the health centers for check-ups and screening tests. Therefore, it can be said that higher health literacy helps the health of most people and the use of treatment services to prevent diseases. As librarians with higher health literacy have less chronic illness and hospitalization.

At the University of Tehran, every year, sporting competitions are conducted for employees. There are concerns and opportunities for people who attend sports or at the university sports clubs. Employees are allowed to exercise at least one hour per day if the chairman agrees, and gymnasium, pool and lawn facilities can also be provided.

The consumption of vegetables in most librarians was at least minimal. Perhaps spending time in the workplace and restrictions on the use of different food in the office can be considered one of the reasons. Proposing and justifying authorities for distribution of milk, yogurt, fruit and useful snacks can be one of the most prominent activities of the Health Center of the University of Tehran and the Faculty of Health and its affiliated departments.

Installing more sports equipment on campus. Also, campus morning exercise on campus can also be a way to encourage staff to take on physical activity, which will lead to better job performance. Definitely justifying the recall and inviting staff to carry out these screenings from the University Of Health Center is very effective.

6. Conclusion

Although the librarians' health literacy was sufficient at the two universities, librarians should better understand their role in personal and social health and work on raising their health and physical, mental and social health. Learn how to understand, use and practice health instructions, identify general and occupational diseases, and prevent and use health services, and find the information they need. In the course of treatment facilities, insurance, medical, medical and health advances, they will know how to participate in decision making and disease management and act on their knowledge.

In one phrase, they increase their health literacy and expand their information in the family and society. To plan for both personal and social life and healthy and active professional activity, as well as in interaction with clients and other community members, the model, the transmitter and distributor of health, thus enhancing their level of health literacy and well-being and Family and community play a vital role.

Librarians are a small group of college's great collections. The cooperation and planning of the two universities of Tehran and Azad with the participation of the Health Center of Tehran University and the Faculty of Health and Tehran University of Medical Sciences affiliated to the Tehran University of Medical Sciences can help the humanities of these two universities, and in the next stages of their families, and finally the community to a healthy and joyful life. Guide and accompany.

Officials and health officials can predict and provide the necessary planning and training, given the key role of librarians in raising the level of community health literacy.

The following will also be effective in improving the health literacy of university staff:

- Comparison of health literacy of staff, professors, service personnel and students
- Evaluation of health literacy level in small cities and compare it with the results of this research

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