

BRIEF COMMUNICATIONS

Development of a health sciences library at a historically black college and university (HBCU): laying the foundation for increased minority health and health disparities research*

Tessa A. Walker, MPH; Daniel L. Howard, PhD; Chanetta R. Washington, MPH; Paul A. Godley, MD, PhD, MPP

See end of article for authors' affiliations.

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INTRODUCTION

The United States is characterized by a population of multiple racial, ethnic, and income groups with varied health statuses. Public health data reveal the variation in health outcomes among different ethnic populations [1]. Blacks and Latinos, for example, lag behind the majority population in health outcomes in multiple areas [1]. Blacks also bear a disproportionate amount of the burden of health disparities [2].

In 2004, life expectancy at birth was lower for blacks (73.3 years) than for whites (78.3 years) [3]. Diabetes rates in the United States also highlight discrepancies among ethnic groups: in 2005, an estimated 8.7% of all non-Hispanic whites and 13.3% of all non-Hispanic blacks aged 20 years or older had diabetes [4]. These numbers are significant because the risk for death among diabetics is twice that of people without diabetes in the same age group [4]. Blacks also have significantly greater rates of death due to cancer than whites. Between 1992 and 1999, the mortality rate due to cancer was 205.1 per 100,000 persons for whites and 267.3 per 100,000 persons for blacks [5].

The disparity in health status of minorities is a major public health concern that calls for immediate elimination, a goal that the health care community cannot accomplish alone. In fact, according to Adderley-Kelly and Green (2005), "eliminating health disparities calls for new and non-traditional partnerships across diverse sectors of the community that include research initiatives using culturally competent methodologies" [2]. Universities are ideally suited for this purpose and can be "valuable partners in developing solutions to health care disparities" [1].

Historically black colleges and universities (HBCUs) have traditionally served minority students from nearby communities. Many HBCUs have made it their mission to reach and teach those who might not otherwise have the opportunity for higher education [1] and have educated and trained many blacks entering health care careers such as doctors, nurses, pharmacists, and veterinarians [6]. HBCUs also contribute to the important tradition of educating the public in strategies for health promotion and disease prevention [6].

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BACKGROUND

Shaw University (Shaw) is a private four-year coeducational Baptist-affiliated HBCU located in downtown Raleigh, North Carolina. Over the years, Shaw has addressed health disparities and served minority communities. Shaw once housed the Leonard School of Medicine, which graduated its first class of medical doctors in 1886 and conferred its first pharmacy degree in 1893. Since the Leonard School of Medicine closed in 1918, Shaw has developed alternative strategies for addressing health disparities. The Shaw University Divinity School, leveraging the important cultural role the church plays in the black community [7], has developed numerous partnerships with black churches in the southeastern United States and engages in participatory health research and intervention projects such as the Data Collection/Data Distribution Center [8]. Today, Shaw's interest in health services, health disparities, and public health research has spread across the campus academic community.

In 2000, Shaw began a formal collaboration with the University of North Carolina at Chapel Hill (UNC-CH) to build a mutually beneficial portfolio of educational and research endeavors [1]. The UNC-CH is a large research-intensive university that receives \$500 million in extramural research grant funding every year [1]. In 2002, the National Institutes of Health (NIH) National Center on Minority Health and Health Disparities Project EXPORT funded the UNC-Shaw Partnership for the Elimination of Health Disparities. The objectives of the UNC-Shaw partnership were to create and expand an inter-university center that explores the use of novel faith-based initiatives to address health disparities, to educate and train students in health disparities research, and to facilitate Shaw's emergence as a research university. Integral to the last objective was enhancing the research infrastructure at Shaw, including the development of a health sciences library (HSL). This paper reports on the collaboration of an academic library at an HBCU, Shaw, and the health services library at UNC-CH to develop a health sciences collection focused on health disparities and minority health in anticipation of creating the Shaw HSL.

BUILDING THE HEALTH SCIENCES COLLECTION

Partnership rationale

The growth of Shaw University as a research-oriented institution has been hampered by the lack of a self-sufficient HSL. Even though a small section of Shaw's main library, the James E. Cheek Learning Resources Center, housed a collection of a few health services journals, it was insufficient for the research demands of an increasingly growing clientele, both students and faculty (Table 1). Whereas faculty, staff, and students flocked to other institutions to seek health-related information in the past, the newly developed HSL will help eliminate this need.

Table 1

The Shaw University James E. Cheek Library collection of health-related resources before and after the establishment of the Health Sciences Library

	Before	After
Journals	<i>American Journal of Public Health, JAMA, Nature, Physical Therapy, Science, Toxicological Sciences</i>	<i>American Journal of Public Health, American Journal of Health Behavior, Cancer, Health & Place, Health Affairs, Health Care Financing Review, Health Policy, Health Services Research, JAMA, Journal of Community Health, Journal of Public Health Policy, The Milbank Quarterly, Medical Care, New England Journal of Medicine, Public Health Reports, Readings in Medical Sociology, Science, Toxicological Sciences</i>
Books or reference texts	Consumer health reference books, outdated miscellaneous texts	113 additions in the categories of consumer health, research methods, survey design, communication of public health issues, bioethics, health encyclopedias, minority health, evaluation, focus groups, national health disparity reports, nutrition, medical dictionaries, statistics, aging, public health administration, preparing poster presentations
Databases	JSTOR, NCLive	Journal Finder, JSTOR, NC AHEC Digital Library, NCLive, Science Direct: Chemistry and Health Sciences

New resources and services

The UNC-Shaw Partnership has worked to supplement Shaw's main library with health-related texts, journals, and electronic access to medical information. Prior to the joint endeavor, Shaw relied heavily on the NCLive database and its resources for all health-related literature searching. NCLive is a collection of bibliographic databases and full-text resources available to all public and academic libraries in the state of North Carolina. Similarly, Shaw's health-related journals were limited. In 2002, the 20,000-square-foot library had approximately 131,000 total volumes with only 12 computers for students to conduct database and Internet searches.

Shaw consulted health services librarians at UNC-CH's Cecil G. Sheps Center for Health Services Research to select health services research databases, journals, reference book sources, and other book and online resources. The Sheps Center librarians also developed and shared a bibliographic list of racial health disparities-related literature with Shaw.

In addition to the health services resources mentioned, the HSL at UNC-CH shared a tailored set of appropriate electronic resources from the North Carolina Area Health Education Center (AHEC) Digital Library, a proprietary collection of databases, journals, textbooks, and other useful online resources supported by state and private funding. The North Carolina AHEC Digital Library is designed to be the first-choice portal to the Internet for all North Carolina health care professionals. It includes databases such as MEDLINE and CINAHL, comprehensive health information sites such as MDConsult, and other health resources. In the initial year of the UNC-Shaw Partnership, UNC-CH purchased a license for Shaw to access the North Carolina AHEC Digital Library. In subsequent years, Shaw purchased two subscriptions to provide users access to the resource.

To lead the development of the library and the health disparities collection, Shaw hired a health services research librarian (HSRL) in 2003. The HSRL,

under the mentoring and consultation of a UNC-CH Sheps Center librarian, has acquired more than 100 selected books and journals from multiple vendors (Table 1). Every year, the HSRL works to maintain and update this collection of books and journals using tools such as the Brandon/Hill lists [9, 10]. In addition, the library now benefits from the 2005 purchase of the Chemistry and Health Sciences databases from ScienceDirect. These databases provide access to hundreds of full-text articles, bibliographic information, books, and reference materials for Shaw investigators. Finally, Shaw purchased 10 new computers for patrons to use for database access. These physical resources will permanently exist in the James E. Cheek Library and provide a method for researchers at Shaw to obtain access to information that they previously had to leave campus to obtain.

The HSRL is a resource that was unavailable in the past to the Shaw research and education community and has acquired access to collections and resources, including full-text journal access via UNC-CH and AHEC, interlibrary loan via UNC-CH, and document delivery via UNC-CH. The HSRL also performs database and Internet searches for investigators. The availability of a librarian to provide assistance with research-related tasks including literature searches and retrievals is an asset to Shaw professors who want to participate in research but, given their often extensive teaching responsibilities, do not have the employees or the time to do the background searches required for research. The HSRL has also negotiated UNC-CH library privileges, including desktop document delivery, for Shaw investigators and research staff studying health disparities.

A final resource available to Shaw investigators is the Internet Resources for Health Research Information Web page on the main library's Website. The internally published Web page includes numerous links to resources grouped in categories that range from funding opportunities to health statistics.

Progress to date

Since beginning the collaboration with UNC-CH, Shaw has come a long way in its quest to establish itself as a research-intensive institution. In 2000, health-related research funding at Shaw University was limited to only 2 faculty members. Shaw hired its first HSRL in 2003, and by 2004, more than 100 new books and reference texts had been added to the HSL. By 2006, the partnership had also enabled the emergence of the Institute for Health, Social and Community Research (IHSCR) at Shaw. The IHSCR has initiated research on a variety of health topics affecting minority populations and has offered unique research opportunities to Shaw students. Today, Shaw's faculty includes 12 investigators engaged in health research.

CHALLENGES

The resources purchased through the UNC-Shaw partnership have served as the starting point for the development of the Shaw HSL. The most significant challenge is to produce a continued influx of financial resources to fund annual database and journal renewal fees as well as further develop the minority health and health disparities collection. When the partnership ends in August 2007, along with access to UNC-CH resources, Shaw will have to be creative in its long-term planning for the advancement of the HSL, as funding for research resources is not always readily available. Challenges for the partnership include establishing budget parameters for the new HSL, ensuring that university research investigators include the library as an essential infrastructure component in subsequent grant applications, and engaging librarians to continue to write grant proposals to purchase research resources. Though challenges abound, access to health information is vital to Shaw's continued development toward the goal of being a research-intensive university.

CONCLUSION

In the near future, a new building will house both the IHSCR and the HSL on Shaw's campus. With continued funding, the HSRL will continue to develop the health sciences and minority health collection to provide the Shaw community, health care providers, and others in the community with access to electronic resources that will support both personal and academic health disparities research. Additionally, the HSRL will incorporate an evaluation of the use of the new resources to determine their value to the university.

Other HBCUs may use the Shaw and UNC-CH partnership as a model for building their own institutional resources to support increased research on health disparities. The institutional partnership between Shaw and UNC-CH has enabled Shaw to lay the foundation for increased research on minority health and health disparities. The work ahead involves becoming a leader in the effort to eliminate disparities in health status among ethnic groups in the United States.

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AUTHORS' AFFILIATIONS

Tessa A. Walker, MPH (corresponding author), twalker@shawu.edu, Associate Director/Program Manager; **Daniel L. Howard, PhD**, howardd@shawu.edu, Director; **Chanetta R. Washington, MPH**, cwashington@shawu.edu, Associate Director/Program Manager, The Institute for Health, Social, and Community Research, Shaw University, 900 South Wilmington Street, Raleigh, NC 27601; **Paul A. Godley, MD, PhD, MPP**, pgodley@med.unc.edu, Associate Professor, School of Medicine, Division of Hematology/Oncology, University of North Carolina at Chapel Hill, CB#7305, 3009 Old Clinic Building, Chapel Hill, NC 27599-7305

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