

Health Information literacy among children at Reading Communities in Sumedang Regency

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Abstract

Children are susceptible to disease due to unhealthy lifestyle habits. Hence, children need correct health information for healthy living behavior. The Reading Community (RC), as a repository and manager of knowledge, has health information services for children. Three Reading Communities (RCs) in Sumedang Regency provide health-themed books and provide health-themed literacy activities. This study aimed to determine health information literacy in children at Reading Communities in Sumedang Regency. This study used a qualitative descriptive method and was conducted at three (3) Reading Communities in Sumedang Regency, including *Lingkaran Cahaya* RC, *Bina Kreasi Muda* RC, and *Pabukon Ngadongeng* RC. Study results showed that children from RCs already knew the need for health information; however, they did not know the correct process for implementing it. The three RCs had various health readings, such as books, comics, and magazines. In addition, they had different strategies for planning health information for children, and they held activities according to the competencies or interests of the users. Three RCs collected health information from reading and activity-based collaboration had reading comprehension activities as an evaluation process in health information literacy and conducted reviews of activities or discussions from reading results in the form of read-aloud and think-aloud. Two RCs stored information in master books and catalogs and promoted health information activities using social media. Despite limitations in providing access to health information, the three Reading Communities have innovations in health information practices in the form of literacy activities.

Keywords: Health information literacy; Health information; Reading Community; Children reading community

Literasi informasi kesehatan pada anak-anak di Taman Bacaan Masyarakat di Kabupaten Sumedang

Abstrak

Anak-anak rentan terkena penyakit karena kebiasaan hidup yang tidak sehat sehingga anak-anak memerlukan informasi kesehatan yang benar untuk berperilaku hidup sehat. Taman Bacaan Masyarakat (TBM) sebagai penyimpan dan pengelola pengetahuan memiliki pelayanan informasi kesehatan bagi anak-anak. Tiga TBM di Kabupaten Sumedang menyediakan buku bertema kesehatan dan menyediakan kegiatan literasi bertema kesehatan. Penelitian ini bertujuan untuk mengetahui literasi informasi kesehatan pada anak-anak di TBM Kabupaten Sumedang. Metode penelitian menggunakan deskriptif kualitatif pada anak-anak dari tiga (3) TBM Kabupaten Sumedang, yaitu TBM *Lingkaran Cahaya*, TBM *Bina Kreasi Muda*, dan TBM *Pabukon Ngadongeng*. Hasil penelitian menunjukkan bahwa anak-anak dari TBM sudah mengetahui kebutuhan informasi kesehatan namun anak-anak belum mengetahui proses yang benar dalam pelaksanaannya. Tiga TBM memiliki bacaan kesehatan yang beragam seperti buku, komik, dan majalah, mereka memiliki strategi yang berbeda dalam perencanaan informasi kesehatan kepada anak-anak, dan mereka mengadakan kegiatan sesuai kompetensi atau minat yang dimiliki pengguna. Tiga TBM mengumpulkan informasi kesehatan dari bacaan dan kolaborasi yang berbasis kegiatan, memiliki kegiatan pemahaman bacaan sebagai proses evaluasi dalam literasi informasi kesehatan, dan mengadakan ulasan dari aktivitas atau diskusi dari hasil bacaan berupa read aloud dan think aloud. Dua TBM menyimpan informasi ke dalam buku induk dan katalog dan mempromosikan kegiatan informasi kesehatan menggunakan media sosial. Tiga TBM masih terbatas menyediakan akses informasi kesehatan, namun tiga TBM ini sudah memiliki inovasi dalam mempraktikkan informasi kesehatan berupa kegiatan literasi.

Kata kunci: Literasi informasi kesehatan; Informasi kesehatan; Taman bacaan masyarakat; Taman bacaan masyarakat anak-anak

INTRODUCTION

Since the end of the COVID-19 pandemic, some children have remained vigilant, but some children have begun to ignore healthy lifestyles. Haryanto (2020) noted that children in Indonesia are at risk of contracting diseases due to unhealthy living conditions, malnutrition, and environmental factors.

This indicates that children are susceptible to infectious diseases. Children's health is the foundation of adult health and well-being. Therefore, families, school environments, communities, and the Government must fully support children to live healthy by providing valid health information for them. One of them is through the role of the Reading Community, which has provided direct access to reading materials containing health information.

The Sumedang Regency Reading Community has a specific target for children. This is in line with the role of the Reading Community (RC) in storing and disseminating knowledge in every area of community life. Hence, the community is able to be independent and have skills in literacy.

Reading Communities can provide health information literacy through reading collections and activities. It can reduce the spread of hoax information in the community. Rachmawati et al. (2021) stated that the information about health available is indeed very diverse. In general, currently, more health information can be accessed than before. For this reason, the aspect of information recognition is necessary in information literacy skills as a development of thinking habits and practices in seeking new information.

Therefore, the RC can provide health information to the community by

providing skills in searching, collecting, using, managing, and synthesizing information about health. The Reading Community at Sumedang Regency has a collection service that the community can access. Children can read collections on health topics.

Users have skills in finding, using, and creating information. The concept is information literacy skills. Users can find various information on several topics, especially health information. However, users who seek health information must have skills in health information literacy.

Health information literacy is important to provide to children. Reading community managers must have the ability to master health-themed collections and how to convey them to children. According to Rowlands et al. (2015), health literacy for individuals is essential to access, understand, assess and use information and services for making the right decisions about health as a key to increasing community control over healthy living.

Users have skills in health information literacy to find health information, use and practice information. Users, through the framework literacy, help practice health information literacy, consisting of the NNLM health information literacy framework, Big6, and SCONUL (Stordy, 2015). The NNLM health information literacy framework has three factors that influence individual or organizational skills to access, understand, and use health information, which consist of individuals, organizations, and socio-cultural.

The concept is a health information literacy framework. Users who seek health information will be influenced by how they interact with institutions or environments and the culture they embrace. Individuals are at the center of the health information

literacy framework because individuals fully access and use health information. Therefore, organizations should have policies, practices, and norms in health information literacy practices. Social and cultural factors influence users in terms of language, community, and environment.

People seek and utilize health information. School students need health information for self-development and school assignment needs. Many schools use Eisenberg's Big6 model as a literacy framework. School students sometimes have problems finding the information they need to complete tasks. The Big6 model has information on problem-solving in 6 phases, consisting of task definition, information-seeking strategies, location and access, information use, synthesis and evaluation. Students can understand problem-solving about health information.

Hospitals or clinics are organizations that implement health information literacy. Users in hospitals or clinics are patients, staff, and doctors.

The SCONUL model of information literacy was created in 1999 and revised in 2011 by the Society of College, National and University Libraries (SCONUL) and is used in several health information literacy studies.

The Information Literacy model comprises 7 Information Literacy Skills: Identify, Scope, Plan, Gather, Evaluate, Manage and Present. They indicate seven sets of information literacy abilities and understandings.

Bernard et al. (2014) stated that SCONUL information literacy can be combined with metaliteracy. This is the development of ICT in society. This model consists of identification, scope, planning, collection, evaluation, management, presentation, visual literacy, and science

literacy. Researchers can identify information needed to answer research questions. Researchers can assess their knowledge and identify information gaps, develop strategies for finding information and data, and find and access needed information and data. In addition, researchers can review the research process, compare and evaluate information, and organize information professionally and ethically. Furthermore, researchers can apply the knowledge gained by presenting research results, synthesizing new and old information and data to create new knowledge, and disseminating it in various ways, such as visual literacy, which is the application of information literacy to visual materials, and scientific literacy is information literacy in science.

The National Network of Libraries of Medicine (NNLM), Big6, and SCONUL health information literacy frameworks are literacy frameworks for accessing, understanding, and using information. Users from any background can use these literacy frameworks. Users have unique methods for accessing health information literacy. The NNLM health information literacy framework is used in hospitals or clinics, libraries and organizations. The Big6 model has special users, namely students in schools.

The study on health information literacy was conducted among children who were users of three Reading Communities in Sumedang Regency, namely the *Lingkaran Cahaya* RC, the *Bina Kreasi Muda* RC, and the *Pabukon Ngadongeng* RC. Through the SCONUL module, children could understand health information because of their skills in organizing and using health information.

Furthermore, these three Reading Communities specialize in serving children

because children learn and play in these three Reading Communities. The three Reading Communities received donations of health-themed books in comic format from the Center for Health Communication Studies, Faculty of Communication Sciences, Universitas Padjadjaran. Children in the Reading Communities use the books to access health information.

Books are one of the media for delivering messages in the dissemination of health information. The reading community, as a non-formal institution in society, aims to educate the public to be literate and have literacy skills. One of them is the provision of health information for children.

The reading community plays an important role in conveying government policies related to health through its collections. The Reading Community also invites the public to learn to find credible information about health information.

Research on health information literacy is vital for the development of health education in children. Children are special users in a reading community. If children are healthy, they will access and play in the reading community. The Reading Community's vision is to educate the community to be better in life, for example, children. Besides, the Reading Community provides health information literacy skills to children as well as trains children in identifying, determining the scope, planning, collecting, evaluating, managing, and presenting health information. So, children have independent skills in using health information. Thus, children have independent skills in using health information.

Research on information literacy related to healthy living is an interesting topic to study. Several researchers have

studied this topic; the first study was conducted by Gao et al. (2023) about the impact of the COVID-19 pandemic on the mental health of Chinese college students. The result emphasizes the urgent need to enhance Mental Health Literacy (MHL) education to address the rising mental health issues among this demographic.

The research method used phenomenological interviews and the transnational literacy theory. The subjects of the study were six participants who constituted information-rich cases at a large U.S. public university. The results showed that the participants' bilingual information environment was a defining feature of Chinese international students' information-seeking experiences during the COVID-19 pandemic. Participants also exhibited their cultural ways of information seeking and participants' unique information credibility assessment practices, utilizing all available resources (Gao et al., 2023).

The study has similarities and differences with the research of Gao et al. (2023). The research object has similarities with information literacy theory. The differences in the study include research subjects, research purposes, qualitative types, and research locations. The researchers conducted a study on children in three reading communities, while the subjects of the previous study were Chinese International Students. The purpose of this study was to determine health information literacy in children in three reading communities, while the purpose of the previous study was to determine information literacy in health care practices.

This study used a descriptive qualitative type, while previous studies used phenomenological methods. The location of the study was in three Reading

Communities in Sumedang Regency, while the location of the previous study was at a state university in the U.S.

The second study was conducted by Sharun (2019) on the implementation of information literacy at the Community Health Center in Alberta, Canada. This study uses a phenomenological research method by looking at the experiences of Community Health Center staff in implementing information literacy. Based on the experiences of health service staff, information practices are divided into four (4) subcategories, including resourcing, referral, outsourcing, and advocating.

Alberta Community Health Center staff, in terms of resource provision, describe the strategies they use to identify, locate, access, and assess information obtained for patient care. Alberta Community Health Center staff, in terms of referral, have understood and used health information for staff, patients, and other social workers. Staff use the information received to make decisions that will be conveyed on health forms.

Alberta Community Health Center staff who outsource are concerned about finding appropriate programs or services for clients and about clients' ability to receive and apply the information provided. Strategies for finding appropriate external resources include asking colleagues, contacting agencies, and searching the Internet. Alberta Community Health Center staff in advocacy advocate and empower patients in using community services and resources. Staff communicate relevant and useful information to patients.

This study has similarities and differences with Sharun's (2019) study. The research object has similarities to the health information literacy topic. This study used a qualitative research method. The

differences in this study are the research subjects, research objectives, qualitative types, and research location. This study has research subjects in children, while the previous study was on staff members - Youth Support Specialists and Medical Office Assistants at community youth health centers in Alberta, Canada. The purpose of this study was to determine the health information literacy process in children from three reading communities, while the previous study was to determine the implementation of information literacy at the Community Health Center in Alberta, Canada.

This study used a qualitative descriptive research method, while the previous study used a phenomenography research method to obtain experiences from information literacy activities. The research location was in three Reading Communities at Sumedang Regency, while the previous study was only in the Community Youth Health Center in Alberta, Canada.

Based on the background description above, this study had novelty in the use of research methods and research subjects. The researcher used a descriptive qualitative research type to explore the application of the health information literacy theme at the Reading Communities in Sumedang Regency. Sometimes, research on health information literacy is conducted in health institutions, such as hospitals or clinics. In this study, we opened a new research path by examining health information literacy among children in Reading Communities. This study looked at how children sought health information and used health information in Reading Communities.

Researchers contributed to new research in Reading Communities. Most studies in Reading Communities are about

information organization, services, preservation, promotion, librarians, and digitalization or digitization in reading communities. Health information literacy is a new topic in Reading Community research. Researchers argued that children in the Reading Community should have skills in health information literacy. Children can identify, determine the scope, plan, gather, evaluate, manage, and present health information literacy independently. Therefore, this study aimed to determine health information literacy among children at Reading Communities in Sumedang Regency through an analysis of identifying, determining the scope, planning, gathering, evaluating, managing, and presenting health information literacy.

RESEARCH METHOD

The research used a qualitative descriptive method. The qualitative descriptive research method explores the experiences of informants (Wilson et al., 2024). More precisely, the informants' relationship to the phenomenon or problem studied. The research method emphasizes direct and rich descriptions of experiences and events (Hall et al., 2024). The study examined health information literacy among children in Reading Communities in Sumedang Regency.

The research was conducted from 3 to August 8, 2023, in three Reading Communities in Sumedang Regency, namely the *Lingkaran Cahaya* RC, the *Bina Kreasi Muda*, and the *Pabukon* Ngadongeng RC. The research subjects were fifteen children aged 9-11 years from three Reading Communities and funders/volunteers from the research location. Informants were selected based on purposive sampling. Observations were carried out on the health information

literacy process at the research location. Data collection used interviews, observations, and documentation. Documentation was taken at the research location during observations and interviews.

The data analysis used data condensation, data display, drawing, and verifying conclusions (Miles et al., 2014). Data condensation is the process of selecting, focusing, finding, abstracting, transforming data, and verifying interview transcripts. The data display is "a collection of organized and compressed assembly of information that allows conclusion drawing and action" (Miles et al., 2014). The researchers read the results again to verify the theory.

RESULT AND DISCUSSION

The Reading Community is a public space for the community where they can access readings, facilities, and activities for free. Children are special users in the reading community because they can learn and express themselves in the reading community.

Children need to get health information to maintain their health. Currently, some children already have gadgets, and can access health information through their gadgets, for example, about the health of body parts. However, children are vulnerable to receiving incorrect health information. Therefore, the Reading Community plays a role in providing appropriate health education to children.

The location of the *Lingkaran Cahaya* Reading Community is in Cikopo, Cipacing Village, Jatinangor District, Sumedang Regency. The founder of this Reading Community, Mrs. Yuyu, established this Reading Community to promote reading interest in the surrounding area.

Furthermore, the location of *Bina Kreasi Muda* RC is in Dusun Cijambu, Kadakajaya Village, Tanjungsari District, Sumedang Regency. This Reading Community was founded in 2010 by Mr. Rohman and is a place for reading, community development, and community empowerment.

The location of the *Pabukon Ngadongeng* RC is in Dusun Manglayang, Mekarsari Village, Sukasari District, Sumedang Regency. The founder of this Reading Community is Mrs. Evi, who established it in 2019. This Reading Community focuses on children's services and aims to facilitate children in playing, acquiring education, and entertainment.

The research site has received books donated by the Faculty of Communication Sciences, Universitas Padjadjaran. In addition, it has provided children from these three reading communities with education on health information literacy and creative activities.

Although only a few children were exposed to health information literacy, the researchers wanted to see how the health information literacy process was carried out among children in those three Reading Communities. The researchers used the SCONUL model in the information literacy process, which comprised identity, scope, plan, gather, evaluate, manage, and present (Bernard et al., 2014). SCONUL model users have a large space to explore information, from identifying to presenting the information they obtain. Users analyze information needs at the identification stage. They classify and select the right of information. The founders of Reading Communities assist users in planning strategies for health information literacy. They gather and organize health information. Finally, users present the

health information they have obtained.

The first process in SCONUL is to identify. The identification activity in the SCONUL model is the identification of information needs in asking questions. Informants from the three Reading Communities have health information, for example, about how to wash hands, how to brush teeth, healthy food and a healthy and fit body.

Informants, when washing hands, use running water and soap. They understand the importance of washing hands but do not yet understand the complete procedure for washing hands.

Therefore, they need health information literacy on how to wash their hands properly. Children need information about healthy food because they often buy snacks at school, such as spicy-colored foods or junk food.

Many children's snacks contain too many flavors, coloring agents, artificial spicy flavors, and excess oil. Elhassaneen et al. (2015) stated that snacks such as potato chips, puff snacks, and fatty cookies contain high amounts of oil and food additives, including flavors and coloring agents. These additives have been linked to various health issues, including nutritional deficiencies and adverse effects on behavior. Therefore, children need information about healthy foods.

Children are now familiar with gadgets. They use them to play online games and social media in their spare time. When there are activities that require movement, sometimes they are too lazy to participate. This condition will make children obese, unhealthy, less enthusiastic, and susceptible to other diseases. Therefore, children need health information about a healthy and fit body.

Furthermore, they also need health

information about how to brush their teeth properly. They have practiced brushing their teeth at school taught by college students. Although children brush their teeth every day, they still need information about brushing their teeth properly.

The second process in SCONUL is scope. The three Reading Communities have several types of reading material, namely books, comics, and magazines. Children read fiction books, for example picture books, pop-up books, and novels. Some picture books have health information messages for children, such as information about bathing, cutting nails, brushing teeth, washing hands, wearing masks during the COVID-19 pandemic,

and several other health themes, specifically for children.

The three Reading Communities have small pop-up books, and the theme is only about human body parts. The stories in the novels are about who is sick, how to play when sick, how to be friends with people with special needs, and how to take care of one's health.

Moreover, the three Reading Communities have "*Jojo Comics*" donated by the Center for Health Communication Studies, Faculty of Communication Sciences, Universitas Padjadjaran. The "*Jojo Comics*" was written in 2008 and conveyed health information messages to children.



Figure 1. Children reading the *Jojo Comics* at the *Lingkaran Cahaya* Reading Community
Source: The Center for Health Communication Studies, 2023



Figure 2. Children reading *Jojo Comics* at the *Bina Kreasi Muda* Reading Community
Source: The Center for Health Communication Studies, 2023



Figure 3. Children reading *Jojo Comics* at the *Pabukon Ngadongeng* Reading Community
Source: The Center for Health Communication Studies, 2023

The first edition of *Jojo Comics* is "*Sehat Ceria di Masa Pandemi*". This comic consists of 30 color pages printed on double-sided art paper. The colorful cartoon illustrations are designed to attract the interest of readers, particularly elementary school students. The informal language used combined Indonesian and Sundanese (Dida et al., 2022). The *Jojo Comics* contained a story consisting of two volumes, published in 2022. The story characters teach children how to wash their hands, sneeze and cough etiquette so as not to infect others and the importance of bathing regularly.

The *Jojo Comics* is available in pocketbook form. It contains three things about healthy living post-COVID-19 pandemic, namely the importance of washing hands, wearing masks, and sneezing and coughing etiquette. The booklet contains messages for children not to share the same items with a friend who has a cold or cough. Children should maintain their health by exercising, getting enough sleep, and maintaining a clean and nutritious diet.

Initially, the Center for Health Communication Studies of Universitas Padjadjaran wrote *Jojo Comics* to provide

information to children at school during the COVID-19 pandemic. Post-pandemic, children went to school without wearing masks. In addition, children also did not know what activities to do at school. *Jojo Comics* then became a health information reading for children in elementary schools. The Center for Health Communication Studies promotes *Jojo Comics* through storytelling. Children can listen to and retell the story. They will understand and practice health information in their activities.

The three Reading Communities have collaborated with the Center for Health Communication Studies. The collaboration has impacted the children's information literacy level related to health information. This is in line with the opinion of Joseph et al. (2016), who stated that a person's experience with information literacy will increase their knowledge. Children from the three Reading Communities had more knowledge about self-care.

The three Reading Communities also have magazines as other reading material. The *Bina Kreasi Muda* RC has *Bobo Magazine*, and the *Pabukon Ngadongeng* RC has *Bobo Magazine* and *Mombi Magazine*. The sources of both magazines come from donations.

Bobo and Mombi Magazine occasionally have health columns. Bobo Magazine has columns such as "*Boleh Tahu*," "*Pengetahuan*," or "*EnsikloBobo*." Mombi Magazine's characteristics are that its users are up to early childhood. The columns in this magazine only have one theme; for example, in two of its editions, namely in 2021, the April 7, 2021 edition of Mombi Magazine had the theme of dental and oral health, and in the December 1, 2021 edition had the theme of fruits and vegetables. Most of the columns in these editions have big themes, consisting of *Activity*, *Story writing*, *English*, *Painting*, and *Let's Draw* columns.

The three Reading Communities provide health-themed readings to children through book-lending services. This service is a process of disseminating information. The three Reading Communities have interesting activities, such as practicing health information from the reading material with the children.

The three Reading Communities provide healthy-themed reading services with free access. This is in accordance with the mandate of Law Number 43 of 2007 concerning Libraries, which states that the community strives to build Reading Communities or libraries to meet the needs of users through readings that can be accessed easily and for free (Presiden Republik Indonesia, 2007). The three Reading Communities provide reading services for the community to access, and all services are free. Children can read and borrow magazines and books at the Reading Communities.

Therefore, the three Reading Communities have the same method of providing health-themed information services, namely lending services. Children who have registered as members can

borrow health-themed readings for free. At the same time, children who have not registered can read in the Reading Community room.

The three Reading Communities have constraints in providing services on the health theme because children must first understand the health theme. Joseph et al. (2016) stated that an information professional needs to improve information services, especially sexual and reproductive information services. Informants are at risk when they hear sexual and reproductive information. In addition, sexual and reproductive information is important for informants because they can protect themselves.

The third process in SCONUL is plan. The three processes in SCONUL-based information literacy are planning to find information and data. The three Reading Communities strategize to access information for children and find and use the information.

The three Reading Communities have different strategies for compiling health information data for children. This is what makes the Reading Community unique. The *Lingkaran Cahaya* RC compiles health information in the form of religious materials. They provide religious materials every day from noon to evening. Children study and read the Quran for two hours. They start studying at 1 pm for early childhood and children in elementary school, grades 1 to 4, and children in grades 5 to 6 at 3 pm.

The learning materials consist of reading and writing *hijaiyah* letters, reading the Qur'an, memorizing short verses, telling stories, and memorizing Islamic prayers. Every child has different learning abilities. Informants learn the Qur'an. Informants will learn *Iqro* if they cannot

read the Qur'an. The funder of the *Lingkaran Cahaya* RC acts as a teacher. She inserts health information into Islamic stories. The *Lingkaran Cahaya* RC has Sunday school lesson materials on Sundays. The founder inserts health information to the children while the children are on break.

The *Bina Kreasi Muda* RC has a strategy to compile health information by making videos. This Reading Community

has special services in making films. The *Bina Kreasi Muda* RC founder writes the script, produces, and directs the films. Children act as actresses/actors in the films. The founder inserts health topics in the film script and dialogue. Film is a medium for conveying messages. The power of the script is the key to the success of the film. Actors/actresses memorize and dialogue with the script. They convey the health information in the script to others.



Figure 4. *Duloh Jadi Dukun* film at the *Bina Kreasi Muda* Reading Community
Source: *Bina Kreasi Muda* Reading Community, 2023

The *Pabukon Ngadongeng* RC provides health information through fairy tales. This reading community has a special storytelling service for children. The founder of this Reading Community always writes health themes in stories and fairy tales for children, for example, stories about how to wash hands, healthy food, snacks versus cooking, toothache, and other themes.

Health information in the form of interesting stories. Children listen to stories about health information. We see children often snacking on unhealthy foods, such as seblak. We know that seblak is difficult for the intestines to digest and can cause constipation in the stomach. Through

stories, children can understand the process of digesting food in the stomach. Children understand to eat healthy foods and they do not often buy snacks to snack on.

The three Reading Communities develop strategies for seeking information for children. Halder et al. (2024) stated that it is necessary to understand psychological and socio-economic variables as factors in seeking information. Psychological factors (e.g., beliefs, perception and addiction) and socio-economic factors (e.g., family, work, money and housing) that affect children's well-being make them forget to maintain a healthy lifestyle. Children may eat with dirty hands; they do not wash their hands. Children from middle-income families will

care about a healthy lifestyle, but children from lower-middle-income families will ignore a healthy lifestyle. So, psychological factors and socio-economic factors will have an impact on a healthy lifestyle.

The fourth process in information literacy in SCONUL is gather. Based on the research results, children from the three Reading Communities found health information examples from literature, for example, books, comics, and magazines. In addition, the *Lingkaran Cahaya* RC has two activities in introducing health information by collaborating with Universitas Padjadjaran students. First, they provided *Jojo Comics* from the Health Communication Study Program, Faculty of Communication Sciences, Universitas Padjadjaran. Children learn the practice of washing hands as one of the ways to live a healthy life. Second, they collaborated with students from the Creativity and

Entrepreneurship study program, Universitas Padjadjaran, in introducing health information from practices in daily activities to children, for example, creative games, coloring books, cooking, and gardening. The *Bina Kreasi Muda* RC also collaborates with the Health Communication Study Program, Faculty of Communication Sciences, Universitas Padjadjaran, through *Jojo Comics*. Children learn health information from the characters in *Jojo Comics*, which motivates children to live a healthy life, such as choosing healthy food.

The *Bina Kreasi Muda* RC collaborates with the Smartfren provider to introduce access to information through a digital literacy workshop. They teach children access to health information through gadgets. Children in the digital literacy workshop learn about accessing the right health information through gadgets.



Figure 5. The *Lingkaran Cahaya* Reading Community collaborated with students from the Olah Kreativitas dan Kewirausahaan (OKK) course

Source: *Lingkaran Cahaya Muda* Reading Community, 2024

The *Pabukon Ngadongeng* RC has a Bulian version of the Online Public Access Catalog (OPAC) on the website on gadgets. Children write down the call number on the book and look for it on the bookshelf, then

contact the founder of *Pabukon Ngadongeng* to request the book.

The *Pabukon Ngadongeng* RC has a literature-based reading and storytelling program. They introduce reading aloud to

children from picture books on the *Ruang Baca website*. Children read aloud from other stories, except health stories. The Reading Community collaborates with the Alinea Community. This community focuses on promoting the Sundanese language based on stories. They read aloud to children, and then the children look for the literature in the Reading Community.

The Founder of *Pabukon Ngadongeng* RC provides a health storytelling style based on *Jojo Comics* to children. After providing the storytelling style, she invites children to reread the comic and practice the correct way to wash their hands. Children are already familiar with health topics from literature. Multas (2024) said that if someone understands information literacy about health information, they will use health services. If children understand health information, they will protect themselves.

The Fifth process in SCONUL is evaluate. Based on observations from three reading communities, children evaluate health information. They know the source of comic book information. Then, they know the types of literature, examples of picture books, encyclopedias, and non-fiction books. They can distinguish the forms of three types of books, both online and printed. Children understand the topics of health information from literature, which consists of healthy food, washing hands, sneezing and coughing etiquette, and exercising.

Children seek health information from printed books and digital books. They seek an understanding of health information and how to practice health

information, and then they share this message with their friends. However, children have different opinions on washing their hands, including washing hands with soap and when to wash their hands. Children understand health information from literature, and literature must be put into practice.

The most important thing in reading activities is understanding the contents of books and health information (Joseph et al., 2016). The founder of the Reading Community created a review or discussion activity about the books. This activity uses the read-aloud technique. The founder of the Reading Community reads aloud to the children, and then they think aloud.

The Sixth process in SCONUL is manage. The three Reading Communities have different ways of managing health information. The *Bina Kreasi Muda* RC and the *Pabukon Ngadongeng* RC are Reading Communities that still manage health information literacy.

The *Bina Kreasi Muda* RC has an electronic catalog in Microsoft Excel. Students of the Library and Information Science Study Program, CODA Program, assist the *Bina Kreasi Muda* RC in entering metadata and organizing books.

The *Pabukon Ngadongeng* RC has a digital master on Google Spreadsheet. After they enter the metadata in Google Spreadsheet, they enter the metadata into the SLiMS OPAC on the website. However, they do not have a computer to access the OPAC. They can only access the OPAC through gadgets.

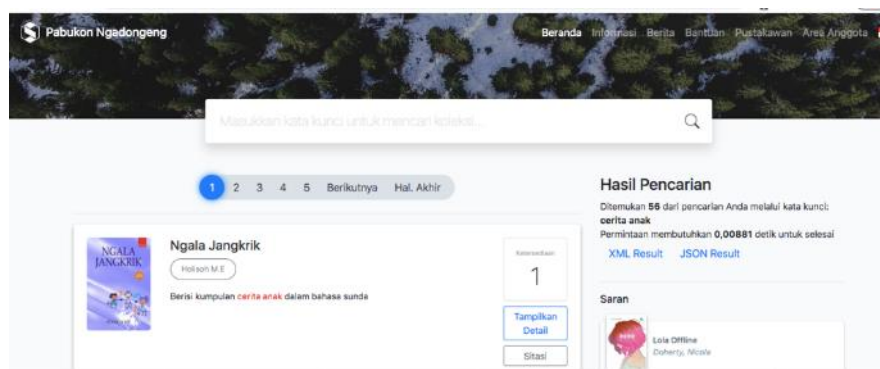


Figure 5. SLiMS OPAC at Pabukon Ngadongeng Reading Community

Source: Pabukon Ngadongeng Reading Community, 2024

Bolek et al. (2018) agree that the founder of a Reading Community must have information literacy skills to process information. The *Bina Kreasi Muda* RC and the *Pabukon Ngadongeng* RC use ICT to process information, such as Google Spreadsheets, OPAC, and websites.

The *Pabukon Ngadongeng* RC even creates mini abstracts in the OPAC or book reviews. When children find readings in the OPAC, they will read the abstract. Librarians must have the skills to create abstracts because abstracts help users find readings quickly. Then, the abstract becomes a recommendation for users.

The seventh process in SCONUL is present. The *Lingkar Cahaya* RC, *Bina Kreasi Muda* RC, and *Pabukon Ngadongeng* RC share health information in information literacy activities on social media.

Information literacy activities provide education to children about health information. From Monday to Saturday, the *Lingkar Cahaya* RC holds a Quran learning program for children. After that, the children do health information literacy activities.

The *Bina Kreasi Muda* RC has a special program, namely Cinematography. Children learn to make films. The founder of the Reading Community writes the script and dialogue of the film based on health information messages.

The *Bina Kreasi Muda* RC disseminates health information using social media. The founder of the Reading Community uses Instagram and YouTube to promote the film. Social media plays an important role in shaping public discourse about libraries in Indonesia (Harisanty et al., 2024). The public will get to know the library from social media content.

The *Pabukon Ngadongeng* RC has a storytelling service. Children listen to stories, and they get messages in the form of health information. This reading community uses social media and informs the public through Instagram and YouTube.

Storytelling, according to Backes et al. (2024), can improve information literacy by recontextualizing written language. Children can tell stories, express their meaning, and encourage critical thinking and problem-solving skills. Thus, children can understand health information themes through storytelling.

Health information literacy practices in children in three Reading Communities are carried out based on the SCONUL model consisting of seven processes, namely identify, scope, plan, gather, evaluate, manage, and present. Children identify health information to learn how to wash their hands, eat healthy food, brush their teeth, and maintain health and fitness.

They already know the need for

health information for themselves, but they do not know the correct process for implementation. Mohamed et al. (2023) stated that believing in the information needed will facilitate the process of finding information. Children in the three Reading Communities have been able to identify health information because the children believe in the information they find.

The three Reading Communities have a variety of health literature consisting of books, comics, and magazines. The literature covers health information for children. The three Reading Communities received donations of *Jojo Comics* from the Center for Health Communication Studies, Faculty of Communication Sciences, Universitas Padjadjaran. Children utilized the diverse collections to help them get a variety of topics (Abdel-Wahab et al., 2019). The children have been exposed to various types of collections and they find various health information topics.

The three Reading Communities have different strategies for planning health information literacy for children. This is carried out according to the competence or interests of the users (Gessner et al., 2015). The Reading Community creates a strategy for disseminating health information according to the competence or interests of the Reading Community or children.

The *Lingkaran Cahaya* RC has a strategy for delivering health information in daily Islamic religious education. The *Bina Kreasi Muda* RC has created a strategy for delivering health information in the form of films. The *Pabukon Ngadongeng* RC presents health information in the form of stories. This activity is in accordance with the statement of Baggett et al. (2018) that libraries can produce a series of unstructured tasks, meaning they emphasize research skills and research

applications for use in the classroom.

In the gathering activities, the three Reading Communities gathered health information from literature and conducted activity-based collaboration. The three Reading Communities collaborated with the Health Communication Study Program, Faculty of Communication Sciences, Universitas Padjadjaran. They received *Jojo Comics* and held health education activities.

In addition, the three Reading Communities also collaborated with various parties. The *Lingkaran Cahaya* RC collaborated with students of the Creativity and Entrepreneurship Study Program (OKK) at Universitas Padjadjaran to provide practice-based health information education.

The *Bina Kreasi Muda* RC collaborated with the Smartfren provider. They held a digital literacy workshop for children. The *Pabukon Ngadongeng* RC collaborated with the Alinea Community in a reading-aloud and storytelling program.

The collaboration between the three Reading Communities with various parties was able to improve children's understanding of health information. In line with the opinion of Halder et al. (2024) that collaboration between libraries and community services helps improve health literacy levels and supports a literate environment (Tringali, 2021). This collaboration is a combination of literature and projects.

The evaluation process in health information literacy is reading comprehension. The founder of the Reading Community conducts a review of activities or discussions from reading results in the form of *read-aloud* and *think-aloud*. These two methods are the process of recalling health information that has been read. Children understand the health information

topic material thoroughly, practice it and share it with their friends. Practice is an effective way to comprehend reading. Abdoh (2022) stated that information evaluation is in the form of credibility, relevance and accuracy of health information sources. Rereading is one way to see the accuracy of information.

Management activities in health information literacy communities who enjoy reading are in the form of storing information in master books and catalogs.

Bina Kreasi Muda RC manages health topic information in the form of a master book in Google Drive, a Spreadsheet and a printed master book. The *Pabukon Ngadongeng* RC has an electronic catalog in Google Drive, Spreadsheet and Bulian version of SLiMS. Children use gadgets to search for metadata collection, especially to read health information. Evaluation of health information should be analyzed more measurably; for example, Zhao et al. (2022) evaluated health information literacy using an intuitionistic fuzzy set-based method. The evaluation results showed that health information literacy influenced decision-making.

Two Reading Communities, the *Bina Kreasi Muda* RC and the *Pabukon Ngadongeng* RC, are engaged in health information literacy using social media. Harzheim et al. (2023) argue that the use of communication is essential in promoting health information literacy. Social media is one of the communication media that is widely used by the public today. Social media is used as a medium for promoting community reading and is a source of trust from donors.

CONCLUSION

Only two of the three Reading Communities in Sumedang Regency

provide access to health information for children. Children can already identify the need for health information that they obtain from various health literature. The three Reading Communities have activities based on developing children's skills in their information literacy planning strategies. It is supported by the collaboration of three Reading Communities with various parties. Children learn to comprehend reading as an evaluation of health information in the form of *read-aloud* and *think-aloud*. In addition, two Reading Communities have master books and catalogs to store information. In promoting health information activities, only two Reading Communities utilize social media. Further research should be conducted on health information literacy in Reading Communities in other regions.

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