HOW RESEARCHERS CAN TRANSLATE HEALTH EVIDENCE INTO BOOKS FOR CHILDREN

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BACKGROUND

The "Black Summer" 2019/20 bushfires generated a 5,250,000 square kilometre smoke plume that persisted for over three months, potentially impacting the health of many, but particularly children and marginalized communities[1,2]. There is demand for high-quality health communication that can reach people who are not well served by conventional public health messaging such as children[3,4]. Books are familiar, appropriate, and invite parent/child interaction and engagement[5].

Evidence regarding the process, reasoning, and approaches for developing books for children that incorporate evidence-based information about health and natural disasters, such as exposure to bushfire smoke, is needed.

METHOD

Systematic literature review, search 2/9/2020 in four databases (Web of Science, PubMed, Ovid/MEDLINE, and Google Scholar). 26,558 results ➔ **final *n*=9**

Semi-structured interviews with authors of books for children relating to natural disasters and health messages, identified by publications listed in Google Books and Amazon Books. 2811 book search results ➔ 215 at screening ➔ 86 authors contactable ➔ **final *n*= 22**

RESULTS AND DISCUSSION

The systematic review identifed manuscript which took an atomistic view, where storytelling and engagement were framed as tools for reaching the goal of knowledge transfer and behaviour change. Interviewes showed that authors of books for children took a holistic view, where engagement, knowledge transfer, storytelling and impact on children are interwoven. The following combines their insights.
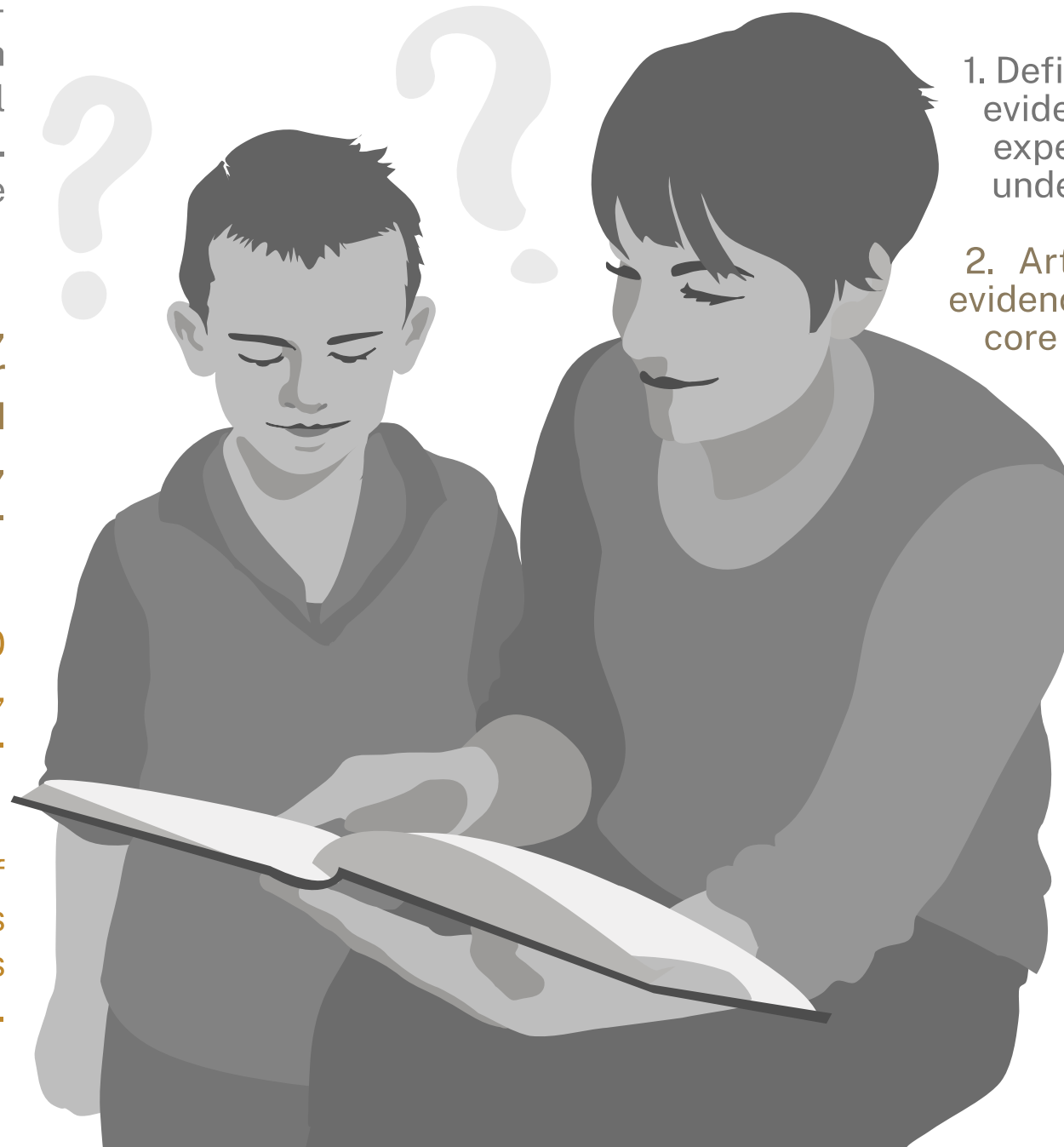
1. Define the user group, and ensure the evidence needs and format expectations of the audience are well understood.

2. Articulate the topic and research evidence that will inform the intent and core health messaging content.

3. Assemble a small collaborative team with a combination of content knowledge and creative expertise.

4. There is no single stylistic and format choice that fits all – this should be made to suit the user group, guided by the creative team.

5. Early testing with children and their support system is key.

6. Develop a dissemination strategy to reach the user group.

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