The Development of Education For Medical Librarianship[1]

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A description of the development of education for medical librarianship can be brief indeed. Such education has been almost wholly the old apprenticeship method of learning on the job, until within a very few years. Medical libraries seem to have existed apart from ordinary library currents almost up to the present time, and are only just beginning to be drawn into the main stream. The cause lies probably in the difference in the evolution of medical librarians and of general librarians.

In medicine, the books existed first, producing eventually the need for a librarian. General librarians undoubtedly began in this way, too, but they have for a long time now attained a point in development where the librarian comes first and is often engaged to produce and organize a book-collection into a library. This latter stage is now being reached in the medical library world, but it is just barely starting. It is still seldom that one hears of a medical librarian in search of a library: it is nearly always the medical books that are in search of a librarian!

In medicine, collections of books for the use of students and practitioners were a necessity from the earliest times. Until the late nineteenth century, they formed the comparatively small working collections cared for by some responsible soul among the users who valued his literary tools enough to try to keep them in order. Some of these workers became the great bibliographers of science, scholars like Gesner and Haller. The rank and file, however, were the physicians who used the books in their daily practice, in their teaching, or for their recreation. Their care was either a labor of necessity or of love.

Most such collections were comparatively small private ones until the freshet of medical periodical publishing started gushing in the middle of the nineteenth century. The gathering volume resulted in the pooling of literary wealth by groups of individuals, and thus the medical society libraries and some of the older hospital medical libraries came into being.

[1]Presidential address, 48th Annual Meeting, Medical Library Association, Galveston, Texas, April 13, 1949.

These collections were still small by present standards, and in only occasional instances acquired the full-time attention of a caretaker. Most of them doubtless maintained the same sort of precarious existence which an unattended departmental library still does, new books being supplied by the authorities fairly regularly and being just as regularly drained off by nonchalant borrowers who neglected to return them.

In spite of these adverse circumstances, collections began to become sizable, and took more time than even a book-loving medical man could spare; by the last quarter of the century, the physician-librarian had become only the titular head of the library while to the physician's secretary had been turned over the technical and physical chores of the now firmly established library. Small collections in hospitals, especially, would be cared for by a secretary in her spare time, or by the record-room assistant—a condition still obtaining frequently today. And as the collections grew larger and more staff was required, it was normally drawn from sources with which the medical authorities, who were the owners, were familiar: their secretarial or technical assistants—though there were, of course, occasional exceptions in librarians coming from among the physician-users themselves, like John Shaw Billings and Fielding H. Garrison.

By the end of the century, then, we find that the medical profession had developed its individual book collections into more or less formal libraries supported by groups or institutions, whose moving-spirits were the medical men themselves and whose technical workers were recruited from the clerical services auxiliary to medicine. This was the situation at the time of the founding, in 1898, of the Medical Library Association. Its charter members numbered four physicians, Dr. George M. Gould, Dr. John L. Rothrock, Dr. E. H. Brigham, and Dr. William Browning, and four librarians, Miss Margaret R. Charlton, Miss Marcia C. Noyes, Mrs. Elizabeth Thies-Meyer, and Mr. Charles Perry Fisher. Of these librarians—who may be assumed, from their taking part in such an association, to have been among the outstanding members of their profession—as far as I could learn, only one had had any library school education, a short summer course, while three had previously had brief library experience. They learned their work by doing it—and they learned and did it well!

As libraries began to grow apace after the beginning of the twentieth century and new collections to start up, the demand for librarians increased. These continued to be recruited in part from the secretarial and record-room staffs, but some came, too, from the outside world who had been to library school. It was found that the methods learned there could be applied, sometimes with adjustment, to medical libraries. With the continued rapid increase in the need for medical librarians in the last two

decades, more and more of them have come from the general field. And yet the apprentice-system of instruction has continued to a large extent in effect: the only way to know medical library methods was to work in a medical library. And this is still true! Except for the handful of students who took the medical library course at the Columbia University School of Library Service in the last few years, every medical librarian has had to learn through apprenticeship most of what he knows, by working under someone who could teach him the tools and methods of his special field.

Apparently through preoccupation with their affairs in their own world, medical librarians remained for years little affected by advances made in general library education. In 1898, as we have seen, only one of the four librarians who helped to found our Association had had a short course in library work, although there were then four schools functioning, one of them for over ten years. Few of their graduates seemed to go into medical libraries, however; perhaps because few of the medical librarians ever vacated their posts till retirement removed them. It would surprise us, I think, to find how small was the number of library school graduates in medical libraries even as late as the 1920's. In 1926, for instance, the staff of one of our larger libraries, numbering ten in all, included just one library school graduate—and that one was not the librarian in charge. It must make us very proud of our colleagues to contemplate what they accomplished through native intelligence, common sense, industry, and unsurpassed devotion to their profession. While the infiltration of trained librarians into the medical field has been remarkably slow, it has been increasing, and library school graduates in medical libraries are now becoming the rule instead of the exception.

A few figures from the personnel survey conducted last year by a committee of the Medical Library Association under the chairmanship of Mrs. Breed Robinson* show the advances in this direction. A comparison was made between the percentage of library school graduates among those who entered the field some twenty-five years ago and those entering now. Of the ninety-two of our librarians now over fifty years of age, fifty-one, or 55 percent, have had no library school training; whereas, of the sixteen librarians listed in the survey files who have joined the Association in the past two years, only five, or 31 percent, are without library training. While it is possible for an individual to become an excellent medical librarian without formal library training, there can be little question that on the whole it is an advantage for our librarians to have it. When physicians inquire if we know of someone to take charge of their hospital library, they

*My warm thanks are due her for gathering the statistics given here.

are now apt to say, "I suppose we should get a *trained* librarian?" Other things being equal, they should!

But the other things must be equal. The medical background which the older secretary-librarian or record-room assistant brought to his task, the familiarity with medical literature and medical bibliographical methods and the peculiarities of medical library administration which the apprenticed worker in a medical library acquired as he went along, must somehow be learned by the fresh-water library student, if he is to be immediately and fully useful to his prospective employer. Basic library training should be supplemented by a course in medical terminology, in the extensive bibliography of medicine, its specialties and the allied sciences, and in the varying methods of administration, and in values in medical libraries. A course was formulated for hospital and medical librarians during the session of 1923-24 by Dr. Richard O. Beard, secretary of the medical faculty at the University of Minnesota. A special bulletin was issued which outlined a sequence of three years of collegiate study with special emphasis on biology and social service, a year of general library training, and a fifth year devoted to the theory and practice of hospital library service. But there was at that time no organized course of library training offered at the University, and this Special Bulletin evidently did not produce enough enthusiasm, for though the course was included in the University's Bulletin for several years, no applicants materialized and it was cancelled.* The earliest course pointing in this direction actually given was that instituted in the spring of 1937 by the University of Minnesota Division of Library Instruction. Lectures on medical library work were delivered for this course by Miss Isabelle T. Anderson and Miss Helen H. Norris. As a course for hospital librarians, however, most of its emphasis was on patients' libraries, so that comparatively small attention fell to the hospital medical library. It remained for the Columbia University School of Library Service to offer in its summer session of 1939 the first course devoted entirely to medical library matters. Taught by Mr. Thomas P. Fleming, Librarian of the College of Physicians and Surgeons of Columbia University, this course covered only medical bibliography and reference. In this, however, it began with the most important point of difference between medical and general libraries: the subject matter and the keys to it.

Meanwhile, new ideas were fermenting in general library education. Library administrators were dissatisfied with the product turned out by the library schools, while the school directors were sure they knew better than

*Mr. Thomas P. Fleming kindly brought this interesting item to my attention. It will be found in: Frank K. Walter, *Training for Librarianship at the University of Minnesota; a Historical Summary,* Minneapolis, The University, 1942. 32 p. (p.10-11)

the librarians themselves what was wanted in the trained assistant. Conferences between representatives of both camps were held in which each side continued to assert it was right. In this impasse, the Council of National Library Associations stepped in, convinced that a frank and thorough searching of the general situation was called for. Its conference held at Princeton in December 1948 cleared the air to the extent of a plain statement that library administrators want differently trained assistants from those the schools have been turning out. The Council of National Library Associations is forming a Joint Committee on Education for Librarianship, and further discussions conducted under this same aegis of honest and searching inquiry are in prospect.

While this investigation of general library education has been in progress, medical librarians have also been gradually becoming aware that the preparation of candidates for their field needed more attention than it had had so far. Eileen R. Cunningham in an article in *Special Libraries* in January 1940, called attention to the inadequacy of the library school undergraduate curriculum as a preparation for special librarianship, and discussed the difficulties the library schools faced in attempting to provide courses to meet all sorts of special fields' requirements. She also drew up tentative courses for special librarianship in the natural and applied sciences, outlining the work which should be emphasized during the four years of college and the one year of library school.

Active investigation of the possibilities for education directed towards preparing library school students for work in medical libraries was not started, however, until Miss Mary Louise Marshall at the Annual Meeting of Medical Library Association in 1946 gave a report showing what she had been able to accomplish in the Orleans Parish Medical Society Library through supervised instructional internships one student a year. The Medical Library Association voted then to establish a committee to consider the possibilities of adoption of a training program and standards for medical librarianship. This Committee, under the chairmanship of Miss Marshall, began a study of the problem through questionnaires to medical librarians, and recommended in 1947 that the Association sponsor a program of training and the establishment of a plan for certification. In addition, a recruitment campaign was urged. By the end of the second year of investigation, the first course attempting to cover medical library work with any completeness had been started in the spring of 1948 at the Columbia University School of Library Service, being taught by Miss Estelle Brodman, for which twelve students received credit; and, further, the Association had voted to establish certification. A by-law enabling it to undertake this is about to be presented at this meeting.

Education for medical librarianship is at present in a healthy state of flux. A candidate taking the full library schedule of three semesters at the Columbia school, with the medical course included, will receive an M.S. degree. When there are enough applicants to justify additional facilities, we hope that one or two other library schools in different sections of the country will inaugurate a medical course. In time, with the development of more advanced courses, a Ph D. may perhaps be earned. All such courses need periods of internship in medical libraries, and all would benefit by some practical means of acquiring subject knowledge along with library techniques and principles. This might be done either by affiliation with schools of nursing, physical education, public health, or medical welfare work. The new combined three-year curriculum of the Graduate Library School at the University of Chicago has in it the seeds of such a possible combination of subject specialization and technical library instruction, a system which might be followed with particularly happy results for medical librarianship.

Such specialization cannot be asked of the library schools, however, until it is made economically possible through sufficient demand, and demand is not likely until there is sufficient remuneration. We believe that the increase in the number of medical libraries, the great shortage of librarians — and particularly librarians with medical backgrounds — and the improving salary situation are already making convincing proof of its possibility. We believe that no kind of library work is more rewarding than that for medicine. If advances are to be made by the profession, however, it must train its newcomers to make them — otherwise we are trying the old and impossible trick of raising ourselves by our own bootstraps. We who learned and have spent our working-years with the old apprentice-method are eager to see new and better methods instituted. Candidates with the best training in library techniques should be able to add to this the special methods of their chosen field, a good general grounding in their subject-matter of medicine, and a chance to apply their new knowledge under supervision through a reasonable period of internship. When this is true, medical librarianship will have emerged from the apprentice stage into that of a full-fledged profession.

In closing, I should like to recall to your minds one of the great physicians of modern times who was among the outstanding knowers and lovers of libraries, Sir William Osler. He was constantly giving choice volumes to the libraries of his acquaintance — which was wide, not confined just to the institutions with which he had been connected. The Boston Medical Library and the Library of the New York Academy of Medicine each possess a first edition of Vesalius, gifts from him, and they are merely

examples of the many recipients of his bounty and his encompassing eagerness to see the treasures of his profession's literature made accessible to every member of it. Innumerable libraries in this country, as well as some in England and France, can show rarities in their exhibition cases labeled, "Gift of Dr. Osler". His own marvelous collection of some 7,600 books significant in the development of medicine went back to his medical school at McGill. The monumental annotated catalogue of this collection was outlined by him and begun under his direction, then completed after his death by four of his close friends: two of them were our physician-librarians, Dr. W. W. Francis and Dr. Archibald Malloch, while the others were Mr. R. H. Hill of the Bodleian Library and the late Mr. Leonard Mackall, the eminent bookman. It is an immensely valuable contribution to medical bibliography.

But what I wanted to speak about especially was the keen first-hand knowledge which Osler had of library practices and pitfalls. I wonder how many of you are familiar with his address at the opening of the Summer School of Library Service, Aberystwyth, Wales, in 1917. It demonstrates an amazing understanding of the ways of libraries. He mentions, for instance, the use of "printed cards, free from slips in copying." Only one who had made such slips and caught them would be aware of the bane of their existence. Because he did know what went on in libraries, Osler knew also the educational equipment which their librarians ought to have. He called attention, with sorrow, to the scarcity of college-bred individuals on library staffs: out of 650 library school graduates in the previous 20 years, not 6 were college graduates (this was in Wales, and is happily not true in America). I might mention parenthetically that the lack of a college education is not an insuperable handicap to either librarians or prime-ministers: Churchill has just remarked that in spite of his not having college training, he seemed to have picked up a few things as he went along! But to go back to Osler, he made comparison with the apprentice-method so long in vogue in medical education (and still in effect, as we have seen, in medical library education). The lack of adequate preparation for the tasks of a librarian was very disturbing to him.

I wish I could quote at length from his entertaining and instructive discourse, but time allows me to repeat only a few phrases showing his acute awareness of the position the librarian fills in the world's economy. He calls them "the purveyors of knowledge," "the universal providers of the mental food of the public . . . often called upon to do the work of cooks and doctors." Of them he says, "No man in the community requires a more comprehensive and thorough education. All knowledge is his province. A common tap for the waters of wisdom, he should not perhaps

know everything, but he should know where everything may be found . . . He is the badly salaried intellect of the community, and if fortunate enough to be able to suffer fools gladly, he leads a life of surprising usefulness. And let us not forget other qualifications — an ability to manage a business as complicated as a department shop, and a knowledge of men and a gift of manners that will enable him to drive his Committee or Council without strain on bit or rein." I wish I could go on quoting from Osler's incisive, humorous, and human examination of librarians, but you will have to read it for yourselves in the *Library Association Record* for August and September 1917. I cannot refrain from one last bit, however, his injunction to the young librarians he was addressing, which is quite as applicable to ourselves today: "Strive for mental accuracy and independence, cultivate the critical investigating faculty, keeping at the same time your mouth shut. In a profession demanding an amazing measure of equanimity, you cannot afford either to fight or to fret."

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