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The Bulletin of the Medical Library Association:
An Instrument for Cooperation Among Medical Libraries

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Abstract

The Bulletin of the Medical Library Association is a communications channel that brings a large and diverse population of libraries in contact with each other. The subsets of audience, by type of sponsoring organization in the United States, is analyzed. In responding to the information needs of this audience, the Bulletin has identified four major objectives: to communicate new ideas and developments; to provide a current-awareness service; to serve as an opinion forum; and to preserve records of the Association.

As Editor of the Bulletin of the Medical Library Association, I have been invited to speak to you on the Bulletin as an instrument for cooperation among medical libraries. There are a number of approaches I could take, and I think that one which may be of interest to you is an analysis of the audience of the Bulletin and how we have developed a publications program to meet the needs of that audience. In taking this approach, I will give a contemporary picture of health sciences libraries in the United States.

The Bulletin is the official journal of the Medical Library Association (MLA) and as such, it is an international journal. Although it circulates world-wide, over 95% of the Association membership is from the United States and the focus is therefore on American libraries. The Bulletin has some 6000 subscriptions and the estimated readership is 12-14,000. As we will see later, this is a highly diverse audience and a major role of the Bulletin is to communicate across the boundaries of library type, size and influence.

Audience and Readership of the Bulletin

The total number of health sciences libraries in the United States is approximately 3500. These libraries may be divided into the following groups by type of sponsoring organization:

- Medical Schools
- Allied health professional and vocational schools
- Business and industrial organizations
- Research organizations
- Societies and foundations
- Federal, state and local governments
- Other

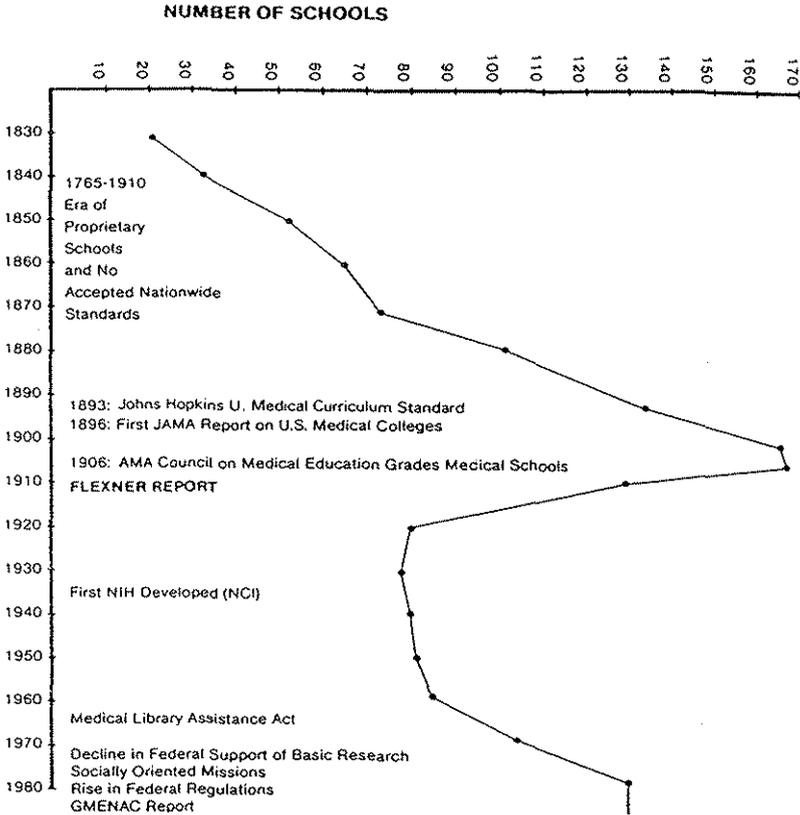
The total number of personnel, including professionals and nonprofessionals is around 9300. The total number of bound volumes for all health sciences libraries is some 35 million and the total serial subscriptions is approximately 733,000. So taken in all, we have a large population of libraries and a substantial national resource, as indicated by the most current data collected in 1979 (2).

The two types of health organizations that provide the majority of health care in the United States are medical schools and hospitals. There are 128 medical school libraries and approximately 2000 hospital libraries. Hospital libraries are much smaller than the medical school libraries, some being staffed by one person or even by only part-time or voluntary staff.

Medical School Libraries

Large, influential and at the frontiers of technology application, medical schools perform the functions of research, teaching and patient care. In America, they have had an interesting history as shown in Figure 1 which gives us a perspective of medical schools in the United States from 1830 through 1981 (3).

Figure 1



—The growth of medical schools, 1830 through 1980-81

Between 1830 and 1910 medical schools increased at a phenomenal rate - there were more schools in the United States than in all of Europe. From 1910 to 1920, the number of schools dropped from 170 to fewer than 80. By 1986 the number again grew to over 128.

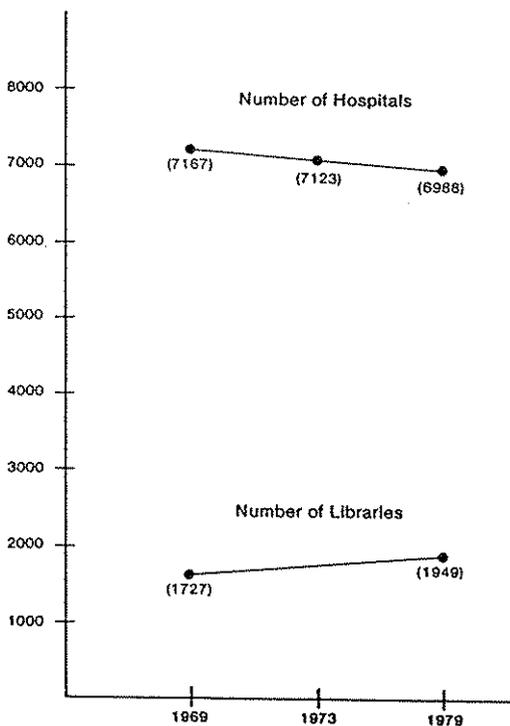
To give an idea of their size - in 1984-85, medical school libraries served some 69,000 faculty members and almost 69,500 students. They have an average of 156,000 volumes in their collections with a range from 619,000 volumes in the largest library to 11,000 in the smallest library. The average medical school library receives 2,300 current journal titles with a maximum of 6,700 in the largest library. They have an average of almost 32 professional and support staff with a high of 74 staff in the largest library (4).

As a group, more than any type of health science library, medical school libraries include the greatest aggregate of resources, personnel and advanced technology.

Hospital Libraries

There are some 6988 hospitals in the United States and approximately 2000 hospital libraries (5). Figure 2 shows that, over the past ten-year period, the number of hospitals has decreased by 2.4% and the number of hospital libraries has increased by almost 13%. While medical school libraries have education and research as well as patient care functions, the federal and community hospitals are where most of the American public go for their health care.

Figure 2



Number of hospital health science libraries in relation to number of hospitals in the United States, 1969, 1973, and 1979

Hospital libraries are much smaller than medical school libraries. Operating expenditures range from \$10,000 to over \$300,000. The number of current journal subscriptions range from under 50 to over 300 (6).

With the passage of the Medical Library Assistance Act in 1964, hospital libraries were given new support by the federal government (6). The Act provided that health sciences libraries in the United States would be organized into eleven regional networks to make up the national regional medical library network (The network was reduced to seven regions four years ago). The regional networks were funded to provide education programs for updating skills such as online searching; purchase of titles to strengthen collections; assistance in developing local and regional cooperation; and trained librarians to upgrade libraries in remote areas. As a result, hospital libraries were greatly improved during the decade of the 1970s.

Health Sciences Libraries in the 1980s

After almost two decades of growth, the health care industry began to experience new challenges and great changes in the health care environment. Between 1965 and 1982, the cost of hospital care increased by some 65%, twice as much as the general consumer price index (7). The number of medical schools increased by 60% and student enrollment by over 116%. There was a general feeling, by the 1980s, that we were overproducing physicians for the first time in over a half century. As a result, severe measures were taken by the federal government to reverse these trends through mandatory cost containment; decreased support to medical schools; and decreased support for clinical and basic research. Alternative organizations for providing health care emerged and competition among hospitals and medical centers developed. These changes in the health care field directly affect health sciences libraries which are dependent upon the needs and circumstances of their sponsoring organizations.

Responding to the Health Sciences Library Community

In the first part of this paper we analyzed the Bulletin's audience - whom we are trying to reach. We now focus on the information needs and the role of the Bulletin. In networking to health sciences libraries, the Bulletin has identified the four objectives:

- To communicate new ideas and developments
- To provide a current-awareness service
- To serve as an opinion forum by for different viewpoints
- To preserve the record of the Association's proceedings

Communicating New Ideas and Developments

Contributed manuscripts make up approximately 70% of papers published in the Bulletin. These are voluntary, non-solicited manuscripts that represent all segments of the health sciences library community. They are peer-reviewed carefully and the rejection rate is around 50%. We receive over 100 contributed manuscripts each year and publish about a half.

The other 30% of published papers are solicited by the Editor or suggested by readers. When a new area of interest is identified, the Editor usually organizes a symposium on different aspects of the area and selects a Symposium Editor who is responsible for assigning authors. Examples include recent symposia on electronic publishing, integrated academic information management systems, and hospital health sciences libraries. The symposia are usually formatted as tutorials and are especially important to the membership for keeping aware of new developments. Voluntary manuscripts do not cover

topics in this breadth and it may take 2-3 years before authors are ready to report, or they may never report their work. Symposia are a lot of work to develop and some are aborted - they never get published because authors promise papers they never submit or a solicited paper may not meet the standards of the Bulletin.

Current-awareness

Keeping up with developments in one's fields of interest is important in the health sciences, especially as socioeconomic conditions change and new technology is developed. Librarians rarely make new discoveries or develop new technology but they apply technology and organize very effective programs. In addition to the symposia, three other sections of the Bulletin are devoted to current awareness:

Brief Communications

Journal Notes

Book Reviews

The Brief Communications are one-page reports on current work, new developments, applications, and solutions to problems. They alert the readership on what is going on before a final 5-10 page manuscript is published a few years later.

Journal Notes reviews library and information science journals world-wide as well as medical and scientific journals. The Book Review and Books Received sections serve as acquisitions guides.

Special Reports and Opinion Forum

Special reports usually emanate from committees of the Association. They cover such topics as hospital library standards, the Fifth International Congress on Medical Librarianship, and academic information management. Editorials, written by the Editor or a guest editor, focus on such issues as the peer review process, Association policies and significance of MLA's strategic planning process. Letters to the Editor provide another means by which the membership may express a viewpoint or bring an event to the attention of readers. Brief Communications and Letters to the Editor also are peer reviewed.

Preserving the Record of the Association

Both the minutes of the Board of Directors of the Association and the Proceedings of the Annual Meeting are published in the Bulletin. These, with the annual reports make up the Association Record. The Proceedings are a day-to-day record of what goes on during the Association's annual meeting. Publication in the Bulletin ensures that the record will be indexed in the major bibliographic databases, including the Index Medicus and Medline.

Mr. Walckiers indicated in a trans-Atlantic conversation that the European librarians are considering initiating a new journal. I have therefore focused this presentation on the readers of the Bulletin and on how we attempt to meet their needs. Are health sciences libraries in Europe similar to American libraries in their functions and organization? I hope that some of the principles are generalizable across both groups. The Bulletin may be viewed as a communications channel that reaches across vast geographic territory to bring a diverse population of libraries in contact with each other.

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HEALTH LIBRARIES REVIEW: THE NEED, THE CHALLENGE AND THE FUTURE

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Health Libraries Review is the official journal of the Library Association: Medical Health and Welfare Libraries group. Health care librarianship is an exciting, fast developing and volatile area radically affected by the new technologies.

A professional association bears a major responsibility for promoting awareness of change and for serving the information, training and continuing education needs of its own membership. If health care librarians are to respond positively, confidently and dynamically to the challenge facing the profession there is a need to debate the questions raised as to our changing role, to take opportunities for innovation and experiment, to adopt a higher profile for the profession and to maintain a flexible approach.

Professional communication is perhaps the most vital aspect of professional development and in 1984 the Group took the initiative of launching a professional journal, whose aim is to provide a forum for the exchange of ideas and information. The background to this is discussed and experience gained from the first three years briefly outlined. In conclusion congress delegates are invited to consider the value for us all of being able to share ideas and experience across national boundaries. Perhaps Health Libraries Review can serve as part of the means to this end in the future and provide a forum to debate the challenges we all face in as wide a context as possible.

Health Libraries Review is the official journal of the Library Association: Medical, Health and Welfare Libraries Group. Launched in 1984 it is about to complete its third year of publication.

A professional association bears a major responsibility for promoting awareness of change and for serving the information, training and continuing education needs of its own membership. In the exchange of ideas and information and the recording of work and progress the journal is a vital element.

We will look briefly at the background to the development of the journal which dates from 1978 when the Library Association: Medical, Health and

Welfare Libraries Group was formed, then cover briefly the rapid development of the Newsletter and the reasons for this and conclude with the splitting of the publication into newsletter and professional journal.

LIBRARY ASSOCIATION MEDICAL HEALTH & WELFARE LIBRARIES GROUP (LA MHWLG)

The most important professional group for health care librarians is the Medical Health and Welfare Libraries Group, which was formed in 1978 by a merger of the former Medical Section (formed in 1947) and the former Hospital and Handicapped Readers Group (formed 1962). Despite some controversy inevitable with the change and strongly held loyalties the Group made a good start numbering almost 2000, a considerably larger membership than either of its predecessors.

The new Group's Steering Committee took office in 1978 and one of its first actions was to issue a newsletter. A newsletter is an important cheap and efficient form of communication for a specialist group. In a specialised and active field a newsletter is a way of involving and communicating with all members. Newsletters are read for obvious reasons and they are usually much easier to read and more likely to be read than journals! Shortly after the new Group was formed the editor of the Newsletter wrote, "We hope that we will be able to maintain the Newsletter as a means of communication within the Group ... Because of limited finance we must continue to restrict material to short items. There is simply not room for lengthy papers in what must be essentially a newsletter".

The Newsletter included Chairman's notes from the Group Chairman, short news and notes items, brief reviews and a calendar section and numbered 16 pages. The table below indicates the explosive growth that was to occur over a period of six years.

MHWLG NEWSLETTER

Year	No of issues	Total No of pages in year
1978	3	36
1979	3	48
1980	4	68
1981	4	128
1982	4	276
1983	4	400+

PHYSICAL FEATURES AND CONTENT

During this time physical features changed as newsletter production moved onto a word processor giving great flexibility in text manipulation, organisation and layout with such features as emboldening; cover design was carried out by an experienced designer in the Department of Medical

Illustration at Charing Cross Hospital; card cover substituted for paper; spines were tape bound instead of stapled; page headers were added improving appearance and readability and content was gradually built up falling into a fairly standard pattern: Chairman's notes; Committee news; news from Sub Groups & working parties; news & notes; meeting reports; reviews & new publications; correspondence; forthcoming events.

FACTORS LEADING TO GROWTH

Three factors were vital in the growth: 1) sponsorship; 2) growth in activity in the field; 3) editorial team.

SPONSORSHIP

We mailed to a select target audience and thus could offer a very marketable product. A number of sponsors were found who^{se} support covered the increased production costs of a larger newsletter.

GROWTH AND ACTIVITY IN THE FIELD

The merger itself was of course a major factor in this as the new Group encompassed so many more interests and the profession itself was undergoing changes. The range of potential topics and material was wide.

EDITORIAL TEAM

People working together in harmony on an agreed goal draw tremendous strength from each other and the value of ideas is enhanced immeasurably through discussion. The Group Committee assigned one of its members Paul Valentine to work on the Newsletter as assistant editor, the first time such a post had been created. The third member of the team was Chris Gammon the library secretary at Charing Cross who operated the word processor. We were also fortunate to have active, enthusiastic and supportive interest from the other library staff at Charing Cross, which was to manifest itself by some valuable contributions.

The first year was an invaluable learning experience. There was much more to a finished product than met the eye and we were introduced to matters such as publications schedules, layout and design, paste up (which really is scissors and glue on the kitchen table!) and finally producing camera ready copy for offset litho printing with each page in its correct place. It was a lot of work but the editorial team survived, surmounted problems together and got the project rolling.

By 1982 sponsorship was going well and in that year we really did try to build the Newsletter up seeking to introduce an improvement, major or minor into every issue. We advertised for an indexer and produced indexes to the material for the first time. We began to realise that possibly the

Newsletter was gathering a momentum of its own and could continue to grow as long as we had sufficient human and financial resources to keep up with it.

The idea of a professional journal had first been mentioned to me by Michael Carmel shortly after I had become Newsletter editor. At the time I was unsure but practical experience suggested that the future of the Newsletter could take that route and we decided to investigate further. In January 1983 we put a document to the Committee on "The Newsletter - proposals for the future".

We indicated that the workload on the present team could not continue indefinitely. Pointing out that a number of articles had appeared in the professional press (for example *ASLIB Proceedings*) and that there was now a number of well established texts in our field we suggested that research and publication in the whole field was developing and expanding rapidly. In this situation a new professional journal could hope to receive both sufficient copy and support to be viable. We made various suggestions including an editorial board to spread the workload.

We were given a brief to investigate further. This was largely due to the supporting document which we presented verbally outlining the actual work and time involved. The work involved fell into two areas - editorial and production. Editorial work included meetings; encouraging and commissioning copy; acknowledging and reading copy received; proof correction; personal contributions which we wrote; paste up; page numbering and liaison with the Department of Medical Illustration for the cover, the printer, the Group Treasurer, the L.A. and the distributor. There seemed to be endless meetings, letters, telephone calls and discussions. Production work included typing and printing off 100 pages; correcting and printing off 100 pages; making up copy from paste up; and finally preparing camera ready copy in A5 format for the printer.

The problems facing the Newsletter were i) workload: the editorial and production side were combined and these required separating if a reasonable workload was to be achieved; ii) finance: Newsletter copy increased faster than sponsorship and the financial gap between production and postage costs and sponsorship was eating into reserves; iii) format: content had outgrown format and offset litho from a high quality typescript was becoming increasingly inadequate for longer articles.

We became convinced that a journal was the only answer and floated a document with more detailed comments for discussion suggesting particularly that there should be 1) a split between the Newsletter & Journal (this would allow members to continue to receive the Newsletter free, albeit a much smaller one, and have the option of subscribing to a professional journal in their field); 2) separate editorial/production operations; 3) an Editorial Advisory Board; 4) column editors (this would allow others to gain valuable experience and create a pool of potential future talent).

It was decided to enter negotiations seriously with four possible publishers who had shown interest. The Group's Chairman, Secretary and myself and the assistant editor were delegated to carry out these. Following these meetings a final report was drafted which looked at the options available and recommended splitting publication into Newsletter and professional journal.

The most attractive package was offered by Blackwell Scientific Publications who already published journals for a large number of learned societies and professional associations. They were able to offer facilities for production, distribution, promotion and advertising, financial management and back up advice.

Important features of the package that were finally agreed were that i) copyright and full editorial control rested with the Group; ii) a special price to Group members; iii) the initial contract would be for five years and the publisher would carry financial responsibility; iv) the Newsletter would be included as an integral part of the Journal; v) there would be continuous production since the last Newsletter would appear in December 1983 and the first Journal /new Newsletter in March 1984.

The package was accepted and the contract signed. The relationship between the Group and the Editor and the editorial advisory board was clearly defined at the outset. *Health Libraries Review* is the official journal of the LA MHWLG and all appointments including that of Editor are reviewed every two years by the Group Committee, which itself has a two year cycle. This gives the Group final responsibility for all editorial appointments.

The jump from Newsletter, however well developed, to professional journal is a big one, bigger than we had anticipated. However the publication is settling down, appearing on schedule (usually) and has a good copy flow. The Group sees this professional publication as enhancing the professional image nationally and internationally in all the varied fields of interest represented by its membership.

Whilst it was hoped that members of the Group would subscribe to the new publication it was also recognized that not to continue with the Newsletter would effectively deprive them of all contact with Group activities. Under the new arrangement the Newsletter has reverted to its former role of carrying briefer items plus essential current information.

The stated aim of *Health Libraries Review* is to "provide a forum for the exchange of ideas and information and to publish original material reflecting current practice and new developments within this field". It was also felt that that the journal should be international in scope. With this in mind it has been editorial policy that articles from or about countries other than the United Kingdom must be included. In the issues published so far there have been contributions on individual countries both from visiting British librarians and those actually working within the country.

The practical aspects of editing a journal are much the same whatever the subject but it is one thing to be vaguely aware of, for example, the system of page and galley proofs and their associated symbols and another to have to work to the discipline of publication schedules and the various problems this can cause for authors and editors alike. It is an instructive process. We have come to appreciate the difference in styles between the spoken and written word and the need for consistency of approach to everything from the forms of language used to how the contents page is listed. Overall we have tried to maintain an informal yet informative style which is easy to read but keeps to a particular standard. At a personal level the experience has allowed us to take a broader view of the

concerns and activities of the profession than would normally be possible. We see the present policies of *Health Libraries Review* continuing in future and a consolidation and expansion of its role as a channel for communication amongst health care librarians in the United Kingdom and elsewhere. The flow of copy is encouraging and should increase as the journal becomes more firmly established. Improving the quality of professional activity in the field of health care librarianship is or should be a common goal for all of us, and the launch and development of **Health Libraries Review** is based on a desire to provide one element in that continuing process.