

# Journal of EAHIL

**Theme Issue**

**Library Education  
Programmes  
and  
Certifications**

**EAHIL Elections  
for the new EAHIL Councillors  
Voting now open**

**EAHIL Workshop 5-8 July 2010  
Istanbul, Turkey**

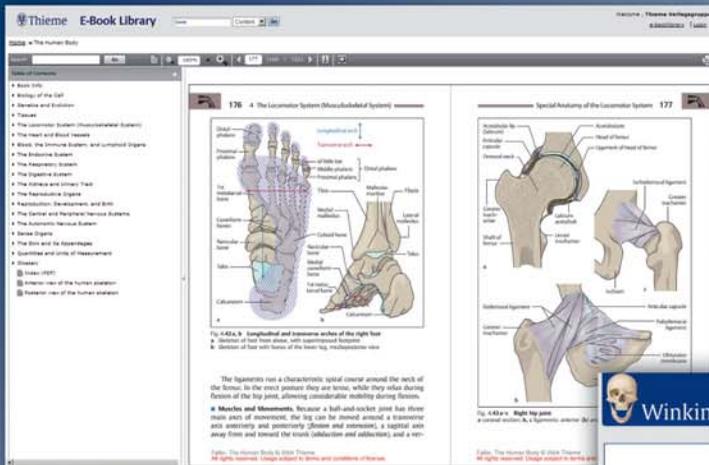
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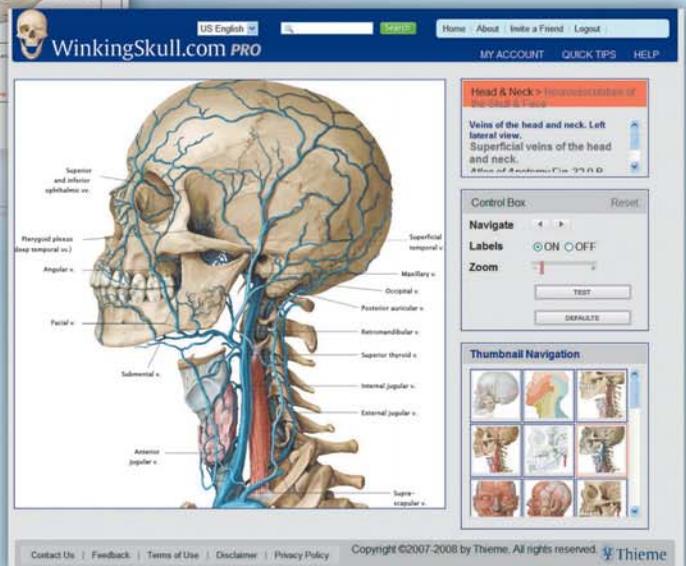
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# Journal of the European Association for Health Information and Libraries

Vol. 6 No. 4 November 2010

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## Editorial

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**Sally Wood-Lamont**  
Editor-in-Chief

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Hello Everyone,

Another year is almost over and already winter has set in here in Romania. I am hoping that we shall not see the same record falls of snow over Europe that happened in 2009-2010.

As Chair of the EAHIL Nomination Election Committee with Patricia Flor (Norway), Margarida Miera (Portugal) and Ronald Van Dieen (Netherlands) representing North, South and West Europe respectively, we have been busy over the last two months gathering new candidates to act as Councillors for their country for the period 2011-2014 and asking others who are eligible to stay on for a further term to consider remaining. The results are listed in this issue, an election will take place for Councillors for Spain and Sweden. I would like to thank the members of the Nomination Committee for all their excellent work.

In our *JEAHIL* Editorial Board Meeting on the 18 June 2010 in Estoril, Portugal attended by Federica Napolitani, Giovanna Miranda, Tuulevi Ovaska, Oliver Obst and myself there was a discussion regarding the dates of the production of the *JEAHIL*. I pointed out that as the first deadline of the year is 15 January and that the annual conferences/workshops have varying dates it has been really difficult to acquire articles and information in time. It was agreed that from 2011 the dates of the quarterly issues of the *Journal* would be now March, June, September and December. Consequently the deadline dates will be now changed to **5<sup>th</sup> February, 5<sup>th</sup> May, 5<sup>th</sup> of August, 5<sup>th</sup> November** starting in 2011.

One of the principal problems of the present *Journal* is the lack of journal articles being submitted. Some solutions were proposed:

- conference/workshops could be used as a hunting ground for articles on those proposed themes;
- an incentive should be offered annually in the form of a 500 euro scholarship for the next EAHIL conference/workshop to the best paper accepted for the *JEAHIL* in the previous year (excluding prize articles from EAHIL conference/workshops). This scholarship would be an additional scholarship to these proposed by the EAHIL Board.

As always there was also a lively debate on what themes we should choose for 2011 and the results are listed below:

ISSUE 2011	THEME	DEADLINE
March	Open issue - articles on all subjects accepted	<b>5<sup>th</sup> February</b>
June	Coping with financial restrictions in libraries; challenges and solutions	<b>5<sup>th</sup> May</b>
September	Memories from the Turkey workshop	<b>5<sup>th</sup> August</b>
December	Virtual libraries: virtual librarians - what's next?	<b>5<sup>th</sup> November</b>

I would like to thank again the members of the Editorial Board for their marvellous support and hard work in 2010. The Board would also like to thank all contributors in 2009-2010 and encourage all EAHIL members to submit articles and news items regarding developments in their library and information services. The *Journal of EAHIL* relies on your contributions in order to continually improve its content.

## CILIP's certification scheme for paraprofessional library and information practitioners.

Marion Huckle

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London, UK

### Abstract

*In this article I will describe the nature and purpose of CILIP's Certification Scheme, a professional award for paraprofessional staff, based on continuing professional development. I will explain why it is important both for CILIP and for the wider library and information community. The article includes a short case study by one of the first members who achieved certification and earned the right to the use of the post nominal letters: ACLIP.*

*Key words:* certification; librarians; information specialists.

### Introduction to CILIP

CILIP is the UK's largest professional body for library and information workers. Currently there are around 20,000 CILIP members working in all sectors including the health sector, both in the UK and overseas. CILIP offers a globally recognised suite of professional qualifications (1) and is also responsible for accrediting university courses in library and information science (LIS) at 15 universities in the UK and one in Europe. The Certification Scheme for paraprofessionals (2) is one of CILIP's newest qualifications, introduced in 2005 at the same time as a voluntary revalidation scheme was introduced for Chartered Members.

### Background to certification

Before 2005, CILIP's professional qualifications were restricted to those who had a CILIP accredited degree or an equivalent approved graduate level qualification. Members then completed a specified period of professional practice, before becoming Chartered Members (3).

Until the late 1990s the best known vocational awards within LIS were those offered by the City and Guilds of London Institute and the Scottish/ National Vocational Qualifications (S/NVQs) that had been introduced from 1995. These were very accessible qualifications for paraprofessional staff with few, or possibly no, academic qualifications. However, there was no bridge between these and professional LIS qualifications. Achieving S/NVQs could give students exemption from some parts of a degree course but these opportunities

were very limited and there was no way to directly progress a professional career on the basis of vocational qualifications alone.

Practitioners became increasingly unhappy that the professional body did not take account of the massive changes in academic and vocational education during the latter part of the twentieth century. At the same time a new breed of information practitioners was developing with new and very different roles and responsibilities that extended to those working in paraprofessional roles. Many very competent practitioners from non-traditional backgrounds across the library and information community, including the health sector, were unable to achieve formal recognition from their professional body. This was often in complete contrast to the support and recognition that they received from employers.

In 2002 the Library Association and the Institute of Information Scientists merged to form a new Chartered professional body, CILIP. An early commitment was to recognise those working in a paraprofessional category and to enable them to eventually move to Chartered Membership. This ambition was warmly welcomed across CILIP and particularly by the Affiliated Members group of CILIP who had campaigned long and hard for such recognition. The commitment was fulfilled by the introduction of the CILIP Certification Scheme in 2005. For the first time there was official recognition of the crucial work done in the many roles which vary widely in title, but are categorized as paraprofessional.

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### **Why is certification important?**

Certification is a key element in CILIP's employer engagement strategy. By supporting certification, employers are investing in the development and training of their staff, which helps them to recruit and retain good staff. More and more library and information services across the sector have to prove their value and impact, both to their organisations and to the communities they serve. By developing a more effective workforce, organisations can improve their business performance and demonstrate the benefits to those who control the funding. Employers do not need to allocate time and funding for resource intensive training activities as the evidence required for certification can be developed through work place experience. Successful applicants effectively showcase good practice by their employers: it is mutually beneficial for employers and staff. Certification, in conjunction with the other CILIP qualifications provides a framework that assures employers that their staff have achieved independently verified high standards, which are also directly relevant in the workplace.

Professional qualifications, including certification, also reinforce the parity between LIS practitioners and members of other professional bodies, including those working in regulated professions, such as those in the health sector. Certification has contributed towards raising the status and standing of our members across society. At a time when the future of library and information services in all sectors is under increasing threat of cuts, certification can also give paraprofessional staff an extra competitive edge in a shrinking job market.

### **CILIP certification**

Certification is a key component of CILIP's Framework of Qualifications and Accreditation (4) (FoQA), which offers a flexible structure for personal development, allowing a mixture of educational and work-based learning to be used as evidence by those applying for qualifications. It has been widely welcomed across the LIS community.

The focus in all CILIP's qualifications is on evidence-based practice not on the basis of academic or vocational qualifications. They are awarded following the assessment of a portfolio of personal professional development in which members reflect on their learning and the application of their knowledge and skills in the workplace. This evidence can be from current and previous employment including, exceptionally, experience gained outside the workplace. CILIP provides tools to help members plan, record and reflect on their development and supports candidates with both online

and face-to-face events such as portfolio preparation workshops. CILIP also offers a Mentor Scheme. Although intended primarily for MCLIP candidates it has also been of enormous value to certification candidates: the mentor partnership helps candidates to assess and reflect on their development and individual mentors can offer valuable advice based on their own experiences.

Any Affiliated and Associate member of CILIP (5) who has been working in library and information work for two years or more may apply for ACLIP. Certification is a qualification in its own right and is also a work-based learning route to Chartered Membership. Members who apply for ACLIP have typically developed a wide range of personal, technical and professional skills through a variety of training and development activities and, of course, through practice. There are no specific requirements in terms of academic, vocational and/or work-based learning. It is up to individual members to demonstrate that they meet the assessment criteria. The criteria for assessment are:

- an ability to evaluate personal performance and service performance;
- an understanding of the ways in which their personal, technical and professional skills have developed through training and developmental activities and/or through practice;
- an appreciation of the role of library and information services in the wider community.

Although not compulsory we have found that most certification candidates value working with a mentor and have welcomed the support and advice they get from their mentors whilst preparing their portfolios. This can range from giving advice on training and development, to helping individuals to make effective use of the evidence in their portfolios and helping them recognise where they have gaps that need to be addressed. Mentors are also available for candidates who are based outside the UK.

### **Certification in practice**

Initially, some members had concerns about the emphasis placed on demonstrating reflection and evaluation in their portfolios. We assured them that they were not being asked to do anything more than they already did, for example, when they prepared for appraisal and/or performance review. As you will see in Mary Edmans' story ACLIP candidates now often have a head start when they move on to chartership because they have mastered the techniques of evaluation.

Another challenge was that of physically assembling the portfolio but as time has gone on this has become less of an issue. Selectivity remains a challenge across both certification and chartership: the most successful applications are those that contain the mandatory documents and a few carefully selected items of evidence. Information on what must accompany an application is available on the CILIP web site (6). Once a portfolio is accepted, members can use the post nominal letters ACLIP, public proof of their commitment and achievement that is recognised nationally and indeed internationally.

ACLIPs maintain and manage many significant aspects of library and information services. They may be responsible for practical or technical work and may also be involved in the management and development of staff and services. One of the first ACLIPs, Sue Bastone, said that *the process of learning to evaluate and assess my development and its impact ... has been of immense value, not only for my work in the school library but for life in general.*

Many ACLIP holders have taken advantage of this route to go on to achieve Chartered status (MCLIP), including a number from the health sector. The first ACLIP candidates to Charter were elected to the Register in April 2007. Since then twenty more members have followed their path and become Chartered members. Currently, there are over 300 ACLIPs with a further 250 working towards certification.

Before the certification route to chartership was introduced a number of members and employers were concerned that this could lead to a 'dumbing down' of the qualification. The reality has been that the members who do progress from ACLIP to MCLIP have provided very convincing evidence of their professionalism. This is the view of members of the Chartership Board and also of the external examiners who oversee the processes and procedures.

Whatever I write, it is the views of practitioners that count. How has CILIP certification affected their professional lives; has it helped when applying for jobs?

I am very grateful to a colleague who was one of the first to achieve ACLIP for sharing her experiences. I hope you agree that her story is inspiring and demonstrates the importance of certification in the LIS profession.

### **Mary Edmans, Public Health Librarian**

Mary completed her ACLIP in 2007 and has since gone on to Charter (2009). Mary's view could be summarised in this quote "I think ACLIP is a fantastic qualification, it has allowed me to become Chartered and gain the position of Deputy Librarian" but I have also included some extracts from a letter she wrote to CILIP Gazette in 2008 (7).

*... I was dubious that it would be seen by qualified professionals as a worthy achievement. I thought it would still be a difficult hurdle to surmount when applying for posts. I am delighted to say that this has not been the case and I have only met with enthusiasm and support ... Wording in job advertisements is subtly changing to invite applications from ACLIP librarians and I have secured a Grade 5 Assistant Librarian post. My self confidence has been boosted not only by the support and by appointment but by the excellent experience that building an ACLIP portfolio has given me... the key process of being reflective and evaluative has become second nature due to ACLIP... at this point that I must give congratulations to CILIP for recognising the contribution and the needs of the unqualified but extremely experienced workforce out there and giving them the opportunity for advancement by introducing ACLIP certification. In my experience it is a resounding success.*

The introduction of the Certification Scheme was an important step towards creating a truly accessible framework of professional qualifications that recognise and reward the knowledge and skills of all LIS staff. Now the challenge for CILIP is to build on that success by recruiting more members who are attracted by the opportunities for personal development and learning, linked to specific qualifications, which will help ensure we remain an effective and responsive professional body for all those working in and around LIS.

*Submitted on 04.10.2010 Accepted on 11.10.2010*

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# CERTIDoc certification: a tool for the reflective practitioner

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### Abstract

*CERTIDoc is a tool box for the certification of European LIS (Library and Information Science) professionals. This article shows how this tool box has been created; it examines its components and indicates the perspectives it can offer.*

*Key words:* CERTIDoc; certification; competence; Euroguide LIS.

### **DECIDoc and CERTIDoc**

The certification system CERTIDoc is the result of two European projects: DECIDoc (Developing European Competences in Information and Documentation), 1998-2001; and CERTIDoc (Certification Européenne des Professionnels de L'information-Documentation), 2002-2004 which were carried out in the framework of the European Commission Leonardo da Vinci Programme (1).

The DECIDoc project was promoted by the European LIS (Library and Information Science) Associations collected together in the ECIA (European Council of Information Associations). The aim of the project was the analysis of the competence of information professionals. In 1999 the project produced the first version of Euroguide, both in French (Euroréférentiel I&D) and in English (Euroguide LIS).

The objective of the CERTIDoc project was the creation of a certification system for LIS professionals based on an assessment of competence. The project carried out the new elaboration of Euroguide and the creation of operative rules and tools of CERTIDoc certification system (2).

In 2005, further to this project, the European CERTIDoc Consortium was founded. At present the Consortium is composed of the following members: Deutsche Gesellschaft für Informationswissenschaft und praxis, (DGI); Association des Professionnels de l'information et de la Documentation, (ADBS); Asociación Española de Documentación e Información (SEDIC); CERTIDoc Italia. They are qualified to issue the CERTIDoc

European certificate, also in partnership with other professional associations.

### **New LIS professions and competences**

The field of new LIS professions is constantly growing, under the influence of new information and communication technologies, especially those relating to the Internet. A list, mainly based on the examination of some American professional reviews, identifies more than 370 different denominations for LIS professions (3).

An accurate and updated analysis of LIS professions is included in *Référentiel des métiers et des fonctions de l'information-documentation*, edited by ADBS (4). On the basis of the Euroguide, the *Référentiel* indicates different denominations, missions, activities and qualification levels for each of the thirteen professions classified. A guide to Internet professions proposed in the portal, put online by the French Government, is also of great interest (5).

Apart from providing a tool for a reliable validation of the competence of old and new LIS professions, the CERTIDoc certification system satisfies two other important needs: the first one is connected to an increased professional and geographical mobility; the second one concerns the construction of a dynamic professional identity which is no longer linked to curricula and academic titles.

In accordance with the main objective of the project it originates from, CERTIDoc certification grants, by its procedures, its validity in all countries of the European

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Union. The validity of certification limited to five years takes into account the fact that the practice of LIS professions requires continuous professional development.

### ***European network of CERTIDoc***

A remarkable aspect of the CERTIDoc certification system is that it originates and develops through confrontation and collaboration of different communities of LIS professionals coming from many different European countries.

At present the dissemination area of Euroguide LIS involves 12 European countries. As far as certification is concerned, as well as associations joining the European CERTIDoc Consortium, professional associations from Belgium, Switzerland and Romania are also involved, through partnerships links with ADBS (6).

In this context CERTIDoc Italia is a very interesting experience. CERTIDoc Italia is the Italian certification body which originated from the collaboration of four professional associations: AIDA (Associazione Italiana per la Documentazione Avanzata), AIBD (Associazione Italiana Documentalisti Brevettuali), GIDIF RBM (Gruppo Italiano Documentalisti dell'Industria Farmaceutica e degli Istituti di Ricerca Biomedica), IAML (International Association of Music Libraries) Italia. The collaboration between associations belonging to different communities of LIS professionals allowed the flexibility and adaptability of the CERTIDoc system to be tested and is providing useful indications for its further development (7).

### ***Components of the CERTIDOC certification system***

The CERTIDOC certification system is formed of the following components: ISO 17024, *General regulations, Guide to assessment, Rules for the Qualification of Evaluators* and *Organization of the Jury and Euroguide LIS*. These documents establish the rules and procedures for the whole certification process, from the setting up of the dossier to the issue of the certificate (8).

CERTIDoc basic *grammar* is composed of ISO 17024 - general requirements for bodies operating certification of persons - that fixes the rules to be followed by bodies certifying professionals in the fulfilment of their task. The reference of CERTIDoc to ISO 17024 assures the conformity of certification procedures applied by certifying bodies in different European countries. General regulations, Guide to assessment, Rules for qualification of evaluators and organization of the jury represent the internal rules and procedures that the European Consortium CERTIDoc established for certification bodies in accordance with ISO 17024.

The Euroguide LIS, foundation of CERTIDoc system, provides a *vocabulary* that enables LIS professionals to evaluate concretely their competences. The competence, in accordance with the Euroguide Group's definition is *a set of proven abilities to perform a professional activity and the proficiency of the required behaviour; the result of combining three elements: knowledge, skills and abilities* (9).

The importance of the concept of competence started being recognized in the 1970's. The current interest in competence is connected to the challenges of competitiveness which firms and organizations are coping with: quality, responsiveness, variety economy and innovation. On the other hand the traditional linearity of relationship between initial education and type of work undertaken has progressively lost importance in favour of what has been defined as a "tied package of work and learning" (10).

The Euroguide LIS identifies thirty-three fields of expertise, that are gathered in five groups and twenty main aptitudes (*Table 1*). The *Information* group comprises fields of expertise which represent the *heart of the profession*.

### ***Perspectives of the CERTIDoc certification system***

"The Euroguide LIS is a polyvalent analytic tool, a reference document used for multiple purposes" (11). In the framework of the certification process, it serves as a guide to structure the candidate's dossier, and enables the candidate to identify his or her level in each field of expertise.

It has become a real reference document for the profession, for a new organization of academic courses (such as in Spain), and for job descriptions as well as the drawing up of a CV (12-16).

After five years of activity, the members of the European Consortium, together with many European professional associations are reflecting on the development of the CERTIDoc system. It is undeniable that the CERTIDoc system is "very time consuming and needs a huge effort to get it started ... as well as maintaining it" (17). The first step of this reflection activity was the start of work to update the Euroguide, precisely for the need to adapt the CERTIDoc system to the development of LIS professions and make its management smoother keeping the ISO 17024 as a fundamental reference framework all the same.

The first interesting experiences in extending the CERTIDoc system and adapting it to the demands of

**Table 1.** Summary of the fields of expertise and principal aptitudes

<b>THIRTY-THREE FIELDS OF EXPERTISE</b>	<b>TWENTY PRINCIPAL APTITUDES</b>
<p><b>Group I – Information</b></p> <p>I01 – Relations with users and clients  I02 – Understanding the LIS environment  I03 – Application of the law of information  I04 – Contents and knowledge management  I05 – Identification and validation of information sources  I06 – Analysis and representation of information  I07 – Information seeking  I08 – Management of collections  I09 – Enrichment of collections  I10 – Material handling of documents  I11 – Organisation of site and equipment  I12 – Conception of products and services</p> <p><b>Group T – Technology</b></p> <p>T01 – Computer based design of information systems  T02 – Computer based development of applications  T03 – Publishing and editing  T04 – Internet technology  T05 – Information and computer technology</p> <p><b>Group C – Communication</b></p> <p>C01 – Oral communication  C02 – Written communication  C03 – Audiovisual communication  C04 – Computerized communication  C05 – Using a foreign language  C06 – Interpersonal communication  C07 – Institutional communication</p> <p><b>Group M – Management</b></p> <p>M01 – Global management of information  M02 – Marketing  M03 – Sales and diffusion  M04 – Budgetary management  M05 – Project management and planning  M06 – Diagnosis and evaluation  M07 – Human resources management  M08 – Management of education and training</p> <p><b>Group S – Other scientific knowledge</b></p> <p>S01 – Additional fields</p>	<p><b>A – Personal Relations</b></p> <p>1 – Autonomy  2 – Communication skills  3 – Availability  4 – Empathy  5 – Team spirit  6 – Sense for negotiation  7 – Teaching skills</p> <p><b>B – Research</b></p> <p>1 – An enquiring mind</p> <p><b>C – Analysis</b></p> <p>1 – Analytical ability  2 – Critical ability  3 – Ability to synthesise</p> <p><b>D – Communication</b></p> <p>1 – Discretion  2 – Responsiveness</p> <p><b>E – Managing</b></p> <p>1 – Perseverance  2 – Rigour</p> <p><b>F – Organising</b></p> <p>1 – Adaptability  2 – Foresight  3 – Decisiveness  4 – Initiative  5 – Sense of organisation</p>

particular LIS professional communities were carried out by the ADBS. These experiences concerned certification of business intelligence professionals of FÉPIE (Fédération des Professionnels de l'Intelligence Economique) (18), and of ministerial inspectors of the French Culture Ministry.

The change and development of the CERTIDoc will mainly depend on the way in which the numerous communities of practice, and the professional associations which address their needs, will be able to

work together to improve the effectiveness of this tool: a tool that has the ambition to serve as a *reflective practitioner* (19) also in the LIS field.

The fundamental challenge for the *reflective practitioner* is to cope with *wicked problems* (20) by improving the skill of conceptualising his or her action in order to further reinvest schemes of understanding or of action in other contexts (10).

Submitted on 27.09.2010 Accepted on 03.10.2010

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# Training needs of health science librarians in Greece

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### Abstract

*The aim of this study is to determine the training needs of the Greek health sciences librarians. Quantitative and qualitative data were collected from 48 questionnaires and individual semi-structured interviews with three librarians. The results indicated the need for continuing education of the health sciences librarians. Most of the librarians had not attended any training course in medical librarianship and did not have subject knowledge in the health sciences field. Respondents indicated that the preferred subjects for their training were "databases and medical sources on the Internet" and "methodology of medical information retrieval". More than 80% stated that the updating of knowledge and skills was the most important motivation for participation in a training course. The Greek health sciences librarians need further training in health sciences databases, medical information sources, teaching methodology and subject knowledge in the health sciences field. They want to be trained mainly by open and distance learning. However, the lack of provision for continuing education from the professional organizations reduces the possibilities for their training.*

*Key words:* education, continuing; librarians; libraries, medical; Greece.

### Introduction

The literature on the training of health sciences librarians investigates their preferred subjects for training, modes/methods of continuing education and motivations and deterrents of training. Previous studies indicate that health sciences librarians prefer short (one day) courses in subjects related to automated systems, planning and marketing (1-2). Recent studies report the need for subject knowledge (3-5). Most studies conclude that librarianship school education does not provide adequate knowledge on health sciences terminology in order for librarians to exercise their duties in health sciences libraries. The knowledge of subject terminology and classification acquired by studies or by professional experience in a corresponding library leads to improve librarian's skills in database searching and increases users' confidence in librarians. However, library schools curricula give limited opportunities for education in subject knowledge in basic health sciences fields. According to research findings, library schools need to include in their curricula: teaching skills, advanced information retrieval skills and methods, project management skills with more practical exercises. Particular attention should be given to librarians training

in medical terminology who do not have subject knowledge in the health sciences field (4).

### Aim

The aim of this empirical survey was to investigate the training needs of health sciences librarians in Greece. The study investigates the following:

1. Do the librarians of Greek health sciences' libraries have any specific training needs and if so what are they?
2. Have librarians been trained? Are they willing to be educated? What are the various methods of continuing education, the motivations and deterrents of training?
3. What are the librarians' opinions regarding their ability to train library users?

### Methods

The survey was conducted in two phases. During the first phase, quantitative data was collected from the entire population of Greek health sciences librarians (6). Specifically: the hospital libraries (general, special and university hospitals), academic health sciences libraries

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**Table 1.** Allocation of health sciences librarian by gender, degree and type of library

	Woman			Man		
	Hospital Library	Academic Library	Research Library	Hospital Library	Academic Library	Research Library
Phd	1					
Msc	4		1	1		
University degree			1			
Technological degree	24	5	1	1	3	2
No degree	1					
Other	2	1				
TOTAL	32	6	3	2	3	2

(medical, veterinary, dentistry, pharmacy schools, etc.), research centers and institutes libraries (Biomedical Research Foundation Academy of Athens, Institute Pasteur, Centre for Mental Health, etc.

The survey was conducted during the period February to March 2009. The same questionnaire was sent individually to 62 librarians who are employed in 37 biomedical libraries. Forty-eight (77.42%) questionnaires were returned.

The second phase consisted of three personal semi-structured interviews. Our sample was a purpose sample of three typical cases: a hospital librarian working in a hospital with fewer than 400 beds capacity and an average work experience; a research librarian with little work experience and an academic librarian with extensive professional experience (7). Data from questionnaire surveys were used to create questions asked during the three librarian interviews. The interviews were conducted in late April. The method of content analysis was used to extract interviews data (8).

*Questionnaire*

A questionnaire was designed for the quantitative survey consisting of twenty-five (25) open and closed questions. The questionnaire was designed to gather information on 1) library features, 2) demographic characteristics of health sciences librarians, 3) methods of continuing education, 4) subjects for training 5) motivations and deterrents.

*Semi-structured interview*

The interviews were planned based on 9 key questions. Interview questions explored the views of librarians on

the influence of subject knowledge in their work, and the need for enhancement of their educational role.

**Results**

This study concerns 48 health sciences librarians working in 37 biomedical libraries in Greece. The survey revealed that more than 70% librarians in Greece work in hospital libraries and most of them (64%) work in large hospitals with more than 400 beds, 18.75% in academic libraries and 10.42% in biomedical research centers and institutes. The majority of librarians are married women with at least one child, have a degree in library and information studies from the Technological Educational Institute of Greece (TEI) and they work in hospital libraries (*Table 1*).

They have professional experience, over 11 years in health sciences libraries but they have not a degree in health sciences field. However, 72% of respondents believe that a degree in health science would give them more confidence in terminology and general subject knowledge, particularly at the beginning of their careers. On the other hand, after a few years the professional experience counterbalances the lack of subject knowledge. Similar findings gave the qualitative data by content analysis of interviews.

Librarians reported that the library schools did not give them the specific qualifications to work as health sciences librarians but gave them general knowledge and information tools in order to work.

**Continuing education**

More than 90% of the respondents had not attended any training course in medical librarianship whilst more than 85% indicated a desire for training (*Table 2*).

**Table 2.** Modes of continuing education preferred by librarians

	HIGH PREFERENCE		AVERAGE PREFERENCE		LOW PREFERENCE	
Seminar (workshop)	42	87.50%	2	4.17%	0	0.00%
Online Courses	26	54.17%	15	31.25%	5	10.42%
Teleconference	9	18.75%	13	27.08%	18	37.50%
Self-study programs	6	12.50%	12	25.00%	23	47.92%
Professional meetings	26	54.17%	11	22.92%	6	12.50%
Providing educational material and instructions	16	33.33%	12	25.00%	15	31.25%
Conferences	27	56.25%	9	18.75%	9	18.75%

Regarding the various modes of training, 60% of the librarians preferred the long-term courses using open and distance learning, while 87.50% of them indicated a high preference for seminars/workshops. The self-study received low preference ranking from 47.92% of respondents. However, almost half of the respondents indicated that they spent 1-5 hours a week on training activities. Librarians (60%) indicated that they did not read journals of medical librarianship. Moreover, only one third of the respondents who read indicated the particular journal name. Sixty per cent of respondents replied that they usually visited health sciences websites weekly, giving high priority to PubMed (Table 3).

Related to preferred subjects of continuing education, respondents considered Databases and medical sources on the Internet (Pubmed, Medline, CINAHL, INTUTE, Mednet, Medical Matrix) as a high preference issue for additional training (Table 4).

#### Motivations and deterrents

Regarding to the factors that might encourage or discourage participation in a training medical

librarianship course, respondents were asked to mark their motivations and deterrents (Tables 5-6). Updating knowledge and skills were by far the most important motivation (81.25%). The high cost (52.08%) and the distance (27.08%) on a scale 1-7 were the strongest deterrents.

#### Discussion

The need for specific subject knowledge and lifelong learning of health sciences librarians concludes as a finding of this study following other earlier studies concerning subject knowledge of librarians (1-2, 4-5, 9). Especially in Greece, training programs for medical librarianship are not provided as there is not a relevant body, for example, an Association of Greek medical librarians. The survey favored open and distance education method of continuing education as physical presence is not required. It also facilitates mothers and working librarians. The seminars are preferred because they are the most common mode of training. The type of library and the size of institution do not seem to have an effect on the librarians' preferences.

**Table 3.** Activities for knowledge acquisition

	No useful	Less Useful	Moderately useful	Very useful	Extremely useful
Reading e-newsletters	0.00%	10.42%	22.92%	43.75%	20.83%
Reading journals or newspapers	2.08%	4.17%	22.92%	58.33%	10.42%
Participation in professional organizations	0.00%	14.58%	27.08%	45.83%	10.42%
Visits to scientific websites	0.00%	0.00%	10.42%	60.42%	27.08%
Training courses / seminars	0.00%	0.00%	2.08%	45.83%	50.00%
Self- study	2.08%	6.25%	37.50%	33.33%	18.75%

## Training needs of health science librarians in Greece

**Table 4.** *Subjects preferred by health sciences librarians for continuing education*

	HIGH preference (score 1-3)	AVERAGE preference (score 4-6)	LOW Preference (score 7-11)
Administration	33.33%	18.75%	33.33%
Marketing	20.83%	20.83%	39.58%
Health care economics	12.50%	8.33%	60.42%
Databases and medical sources on the Internet (Pubmed, Medline, CINAHL, INTUTE, Mednet, Medical Matrix )	77.08%	12.50%	4,17%
Cataloguing	22.92%	25.00%	35.42%
Collection Development	27.08%	33.33%	18,75.
Education methodology	35.42%	37.50%	14.58%
Medical information retrieval (search techniques and tools on the Internet, full text books and journals)	72.92%	8.33%	10.42%
Subject knowledge in health sciences (terminology, classification, searching)	43.75%	31.25%	18.75%
Library with one librarian	12.50%	18.75%	41.67%

**Table 5.** *Motivations for continuing education*

	1	2	3	4	5
Updating knowledge/ skills	81.25%	8.33%	2.08%	0.00%	2.08%
Personal satisfaction	8.33%	50.00%	18.75%	14.58%	4.17%
Certification requirements	4.17%	8.33%	43.75%	37.50%	4.17%
Professional recognition	6.25%	31.25%	20.83%	29.17%	6.25%

**Table 6.** *Deterrents to continuing education*

	1	2	3	4	5	6	7
Distance	27.08%	27.08%	8.33%	14.58%	12.50%	0.00%	2.08%
High cost	52.08%	20.83%	20.83%	0.00%	2.08%	0.00%	0.00%
Time	10.42%	12.50%	20.83%	22.92%	8.33%	8.33%	4.17%
No training provided according to my interests	22.92%	14.58%	14.58%	18.75%	10.42%	4.17%	2.08%
Low quality of organization (training halls, program, trainers etc.)	10.42%	12.50%	12.50%	16.67%	27.08%	4.17%	0.00%
No recognition of training	4.17%	6.25%	8.33%	6.25%	8.33%	41.67%	10.42%

Half of the respondents reported that they spend 1-5 hours per week for continuing education activities through various means. In another study respondents reported that they spend an average 6 hours per week for training activities (5). Librarians consider that reading journals or newspapers was a helpful activity. Sixty-eight per cent of respondents reported that it was very useful and extremely useful. However, although they indicate the usefulness of current information by journals, they do not seem to be informed by them. either because of the lack of a Greek medical librarianship journal, or because of the cost of a foreign journal subscription. Another study indicated that 55% of respondents replied positively when they were asked if they are informed on current issues of medical librarianship, while 60% could not name any medical librarianship journal (9). An important role in training motivation seems to be the improvement of knowledge and skills (2).

### Conclusions

According to the survey, Greek health sciences librarians have specific training needs which deal with continuing

education in various subjects in their field, including subject knowledge and teaching and education skills for user education. The acquiring subject knowledge in health sciences is indicated as a training need provided either by specific training programs or by professional experience.

The Greek health sciences librarians indicated that they prefer the open and distance education training online lessons and workshops. The most important reason for their training is updating knowledge and skills, while the high cost of training is the main deterrent. Even though librarians consider continuing education necessary, they have not attended training courses in their field because they are not provided by any professional organization.

The Greek health sciences librarians are educating their users and have indicated that they require more training in teaching techniques and learning theories, in order to establish a framework of effective training (10).

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## The Eahil Register of Professional Competences

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### Abstract

*The project of the EAHIL Register is presented, briefly describing its objectives, how it started, the contents, as well as the state at present. The pitfalls and the essential issues regarding the necessity and feasibility of a European standard of certification of health sciences information professionals are also mentioned.*

*Key words:* library science; library associations; professional competence; certification.

One of the objectives of EAHIL in the last years has been to establish a system of professional certification of health sciences librarians at the European level. Besides the main benefit, to establish a professional standard, the same for all the European countries, the other benefit envisaged is to strengthen the role of EAHIL in our professional community, and thus answer the much repeated questions “What will I gain if I become an EAHIL member?” or “What will EAHIL do for me?”.

A taskforce was established for this purpose which included: Suzanne Bakker, Helena Bouzkova, Françoise Pasleau, Maurella Della Seta and Ioana Robu. The first meeting was held on the 2<sup>nd</sup> of February 2008 (occasioned by the EAHIL Board Meeting) and it was hosted by Suzanne in her home in Abcoude, near Amsterdam. An action plan was developed based on a number of premises established there and then.

The first one was that we had to have a model and naturally we consulted those already in place and working: MLA (USA), CHLA (Canada), CILIP (UK), CERTIDOC. The choice was for the latter, mainly because it was European and we thought it would cater for the diversity of systems, cultures and languages, which is an important issue in the European context. CERTIDOC is a system of certification of information professionals in general, including public, university, or special librarians. The Euroguide is currently translated in 10 languages (English, French, German, Spanish, Italian, Portuguese, Czech, Croat, Hungarian and Romanian) (1).

The second working premise was that the “EAHIL Register” project should begin by raising the awareness of health science librarians regarding their own profession and the various competences it involves. Establishing these competences and obtaining a large consensus on what is mandatory, desirable, optional or possible, constitutes the first stage of the project, an absolute prerequisite for a next stage which is the development of a system of certification.

Based on the four main categories of competences represented in CERTIDOC, Information, Technologies, Communication and Management, the members of the taskforce decided to create a pilot survey including the same main categories/sections, divided into subsections. The categories were distributed for elaboration to the taskforce members, one person elaborating 2 categories in collaboration with another colleague. Maurella was assigned no category, but her task was to be an “outside” supervisor of all the four categories. Deadlines were set: April for having the pilot survey published on the web, and the first results to be reported at the General Assembly in Helsinki in June.

The web based tool *Survey Monkey* was used for the pilot survey, whose first draft was structured as follows:

The *Management* section included 98 questions divided into the following subsections:

- global management of information;
- marketing;
- sales and dissemination;

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- budget management;
- project management and planning;
- human resources management;
- management of education and training.

The *Communication* section included 56 questions in the following subsections:

- oral communication;
- written communication;
- audiovisual communication;
- foreign languages;
- interpersonal communication;
- institutional communication.

The *Technology* section had 55 questions in the sections:

- computer based design of information systems;
- computer based development of applications;
- publishing and editing;
- internet technology.

The *Information* section had 48 questions in 4 subsections:

- information systems and collections;
- organization and analysis of information/information sources;
- metadata;
- information retrieval;
- rights and ethics.

All the questions are yes/no questions, with radio buttons (only one option possible); e.g. “Do you currently use and apply the MeSH thesaurus?”; “Can you write an XML file?” etc.

After the pilot survey was published and tested by a few librarians invited by the members of the task force from among their colleagues in the respective countries, we realized that the perception was somewhat different from what was intended: the respondents, almost without exception, felt apprehension and even threat when faced with so many competences (257 questions/competences in total) they thought they needed to have. This happened mainly because (a) we followed the CERTIDOC model, which undoubtedly is too dense and redundant in places, (b) we were too keen to cover all the aspects and skills possible, and especially (c) we did not emphasize sufficiently the fact that these questions were there just to raise awareness and in no way one single librarian needed to possess all or even half the competences listed.

If the project is to continue, the pilot survey needs to be revised in the sense that the number of questions must be

reduced and perhaps the survey structured into essential, desirable, optional, possible, especially according to the working background: academic, hospital, information center, pharmaceutical industry etc.

A small group of the Council discussed the subject in Dublin. Some felt that we need to collect more data on the jobs existing in different countries. One method suggested could be collecting job descriptions and announcements of vacancies. Although difficult this group agreed on the fact that for a better visibility of the profession some job analysis and promotion of the characteristics of medical librarians and the impact of medical library services is necessary.

At the present time, the project is pending, the EAHIL subscription to *Survey Monkey* was discontinued, the new modified pilot project waiting to be moved to a new location.

However, a few essential issues need to be addressed before moving on:

- will the diversity of Europe, in terms of education and health systems, culture, language, ever allow for a common standard of professional accreditation?
- should EAHIL try to seek support from the European Union institutions in this respect?
- are the health information professionals in Europe ready to comply to a common standard?

On a more practical level, and as a possible next step, we think that the initial pilot project could be modified to become a true self-assessment tool, a friendly one above all, which not only increases the awareness of health sciences librarians regarding their profession, but also helps them (re)discover their own strengths and talents and perhaps trigger their personal investment in continuing education. But before carrying on, we would like your (EAHIL members, JEAHIL readers) opinion on the interest and utility of such a tool. Your answers, comments and suggestions will be appreciated. Please write to EAHIL-REG@mailtalk.ac.uk or to any of the Taskforce members.

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## Cyberspace information specialists in digital networks or librarians helping health professionals within the university?

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### Abstract

*This paper deals with the new roles of the librarian focusing on medical and health-related information within the academic library. The digital dissemination of documents has set new challenges and new roles for the information professionals. This is true especially within medicine where vast amounts of documents and scientific research data are published annually. It seems that traditional librarians are still needed but with new tools and equipped with a modern approach to the more internationally networked academic community.*

*Key words:* libraries, medical; medical librarians; Finland.

### Libraries and the changing environment

Maybe the most important factor that has affected academic library management has been the on-going shift to the digital library that began in the 1990's as a result of the so-called information society development. This started when international peer-reviewed journals began to move from printed dissemination to the digital. The second phase, the digital book culture has now also started to emerge. The digital environment meant a need for the networks to create and manage services for the university libraries. At the same time, many of these services were outsourced to others in the field. In addition the library monopoly of enabling access to the scientific documentation has changed to a heavily competed marketplace where different types of actors make products and services for the students and academics.

All this means that the competencies and skills needed in the daily library work have changed radically (1). A modern library worker has to be a high level academic expert, a modern manager, an efficient marketing specialist and an excellent PR-person. Most likely also in Finland – due to the new University act – the skills and know-how required in fund-raising and economic issues will become more and more important. This has added to the challenges of the aging population and the exchange of tacit knowledge between different age groups setting new challenges for the personnel management inside the university libraries.

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In this article the role of the libraries in the digital environment is discussed. Due to the new ways of disseminating library affiliated services, it is probable that the libraries face the total reorganization of the library networks, how they are resourced and how they produce library services. The constant increase of the amount of data and documents also sets new demands in how to define the libraries role as a preserving organizational memory. Libraries must also face the challenges of the on-going internationalization and globalization of the information market as well as the struggle for resources and best workforce in this highly competed working environment.

### Roles of the libraries and librarians of the future

Libraries have several different roles within the academic community. In the following, these will be discussed in more detail:

- libraries as memory organizations;
- libraries as an archive;
- libraries as a gateway to information;
- libraries as a filter for information;
- libraries as evaluators for information;
- libraries as active members of the academic community;
- libraries as makers of added value.

The emphasis here is the change from the traditional library role to the one that libraries should have as service providers in the modern information society. The

point of view stated is that of an academic library that functions within a university which has a strong strategic focus on health sciences, i.e. University of Eastern Finland (see more: <http://www.uef.fi/uef/english>).

**Libraries as memory organizations and archives**

It has been estimated that the world produces about 240 tetrabytes of unique information yearly, roughly 250 megabytes for every person in the world (2). As *Figure 1* shows, most of this consists of different types of archivable office documents and mass-market periodicals. The number of book titles published annually is about one million and scholarly journals about 40,000 titles.

This mass of documents and information sets enormous challenges for libraries. According to LaVallie’s and Wolf’s study, in one quite narrow field of medicine, i.e. medical informatics, 8859 published documents were indexed in the PubMed database during the year 2003 (3). If a person would want to read all of these, it would mean about 24 articles daily. Perhaps humanity has reached a point where it is impossible to read all interesting documents even within a narrow field of science. On the other hand, the task to archive and ensure access to all the documents published in the world has surpassed the ability of an individual library.

Traditionally one role of the libraries has been ensuring the long-time preservation of documents with other memory organizations, e.g. archives and museums. When we are facing the vast amount of data and documents published, we must also critically review this task and its implementation in the digital environment

Approximately 240 terabytes (compressed) of unique data are recorded on printed media worldwide each year, as shown in the following table

Media Type (Source and Year Cited)	Unique Items per Year	Conversion Factor	Total Terabytes (Annual Worldwide)
Books (UNESCO 1996)	968,735	Scanned image (600 dpi): 40 MB/book	39
		Digital compression: 8 MB/book	8
		Plain text: 1 MB/book	1
Newspapers (ISSN 1999)	22,643	Scanned image (600 dpi): 5.475 MB/year	124
		Digital compression: 1095 MB/year	25
		Plain text: 110 MB/year	2.5
Scholarly Journals (Ulrich's 2000)	40,000	Scanned image (600 dpi): 225 MB/year	9
		Digital compression: 45 MB/year	2
		Plain text: 4 MB/year	2
Mass-market periodicals (Ulrich's 2000)	80,000	Scanned image (600 dpi): 650 MB/year	52
		Digital compression: 130 MB/year	10
		Plain text: 13 MB/year	1
Newsletters (Oxbridge Directory 1997)	40,000	Scanned image (600 dpi): 20 MB/item	8
		Digital compression: 4 MB/item	2
		Plain text: 4 MB/item	0.2
Archivable, original office documents (National Archives 1998)	7.5 X 10 <sup>8</sup> pages	Scanned image (600 dpi): 130 KB/page	975
		Digital compression: 26 KB/page	195
		Plain text: 2.5 KB/page	19
<b>Totals:</b>			Scanned: 1200 TB Compressed: 240 TB Text: 24 TB

Fig. 1. The amount of data available (UCLA 2000).

where more and more physical documents are being published. One solution here, at least in the academic environment, could be combining the open access publication with a long-time preservation plan: i.e. the organization whether it is a publishing company, a scientific society or a university and its library which is responsible for the publishing also commits to archive the documents published and gives optimally instant open access to the documents. Here the most challenging task is how to ensure funding and business models that at least cover the cost.

**Libraries as gateways to quality information**

The evolution described in the previous chapter has led to a situation where individuals and organizations need different types of information retrieval systems in order to manage the vast amount of documents published. Already, from the initiation of the internet, several search engines have been developed to help organize and access data published via the WWW. Although there has been some development, mainly these services act based on automatic indexing and algorithms developed for this type of indexing.

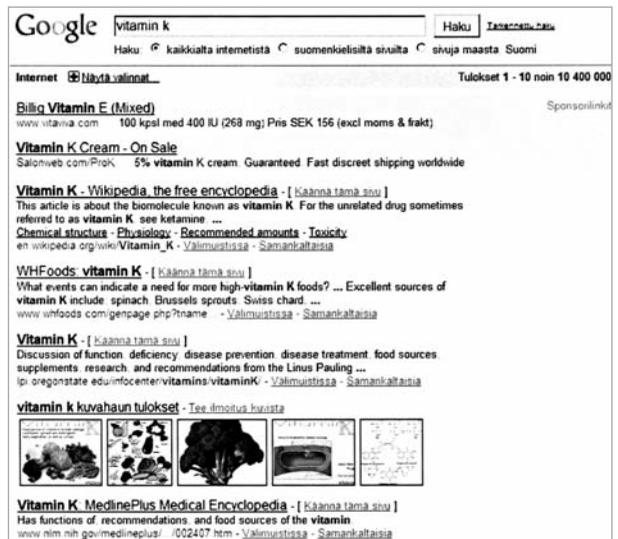


Fig. 2. Google search for “vitamin K” (www.google.fi)

If we compare two searches made on “vitamin K” – the other with Google and the other with PubMed (see *Fig. 2 and 3*) – we can see that the former gives us a vast amount of hits (more than 10 million documents) which are a mixed array of more or less reliable sources if not outright commercials. On the other hand, the latter comprises 13,000 hits that are classified in more detail for the advanced medical user. The reason for this more precise result is the filtering and evaluation done by the cataloguing librarians.

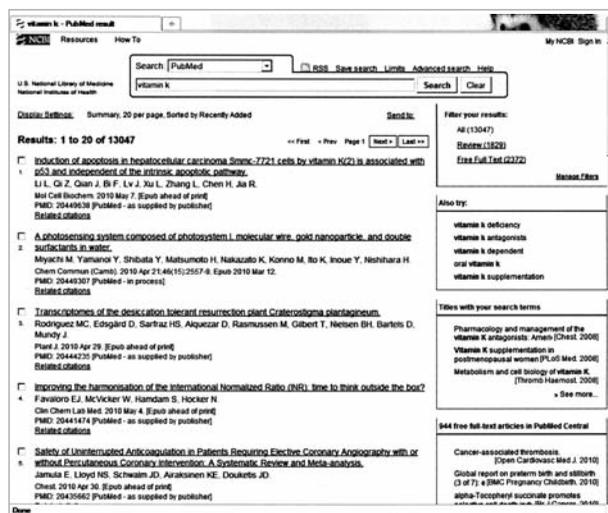


Fig. 3. PubMed search for “vitamin K” (<http://www.ncbi.nlm.nih.gov/PubMed>)

There is some evidence that the students are using library catalogues as their primary search engine second to the net search engines (4). However one clearly sees an on-going shift here to traditional and modern web search–technologies. The libraries’ method of making separated databases for their collections might not be the only solution, e.g. the previously mentioned PubMed database enables linking journal articles to the database thus providing active links in the campus environment where digital journals are subscribed.

Another challenge is the so-called web 2.0 social media technologies with the possibilities to tag and discuss the documents by the users. Here the role of the libraries might be that of the makers of the infrastructure, e.g. creating and implementing thesauruses to learning environments (5). The more the users start to use the non-library search engines, the more important it is for libraries to integrate their services and the know-how.

**Libraries as active members of the community**

The digital environment of document dissemination means that more and more services are outsourced from the library and its physical premises. Only 30 years ago, the libraries still had the monopoly of printed collections. At present due to the fact that more and more documents are digital and at the same time a lot of printed documents are digitized this monopoly has gone. However, at the same time, due to the needs of the information society and its activities which need rapid and up-to-date information services, the need and use for quality library and information services has exploded.

The competition between different information service providers means that the libraries must produce added

value to the users, and the most important, must be able to prove the significance of this. In the academic community, this means that the library must be able to show how it helps the studying and research done within the university. The library must be integrated in these basic university processes and must have the expertise required e.g. in tutoring students in order to give them better information literacy and searching skills and in helping academics produce better research reports even if the library’s information specialist needs to participate in the daily work of the research groups, e.g. in preparing literature reviews good enough to be added to the articles to be published (6).

It is also important that the library rethinks its role as a meeting point of people at the campuses (7). This means more comfortable and versatile library premises that are able to support especially the students’ studying. In addition, this also means an expedition into the virtual environment where students are spending more time and making connections between each other. Thus libraries must start using social media software wisely and integrate the library’s activities to places where people actually spend their time.

This gives libraries completely new possibilities in gathering and offering better access to the important information both in the internet and within the library’s physical premises. Especially this is important within the health sciences, where people’s lives actually depend on the nature of the information that they use in their daily life. Here the librarians should work together with health professionals in order to make better services for citizens (see Fig. 4). It is also important to remember that many people need human help when searching and using information.

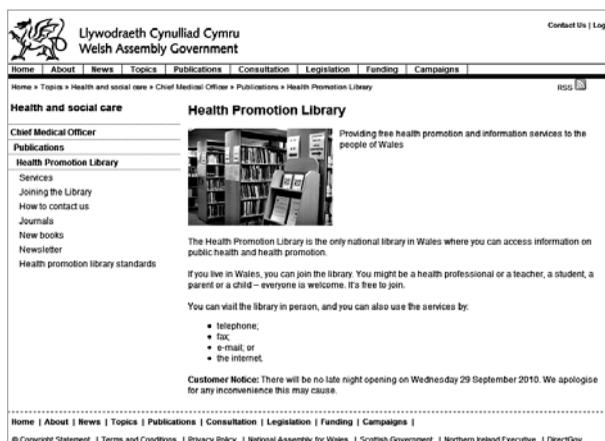


Fig. 3. Health promotion library (<http://wales.gov.uk/topics/health/ocmo/publications/library/?lang=en>)

### **Creating a multicultural library network – libraries as a gateway to cultural diversity**

In the IFLA & UNESCO Universal Declaration on Cultural Diversity it is stressed that (8):

- all people live in an increasingly heterogeneous society;
- there are more than 6,000 different languages in the world;
- the international migration rate is growing every year resulting in an increasing number of people with complex identities;
- globalization, increased migration, faster communication, ease of transportation and other 21st century forces have increased cultural diversity in many nations where it might not have previously existed or has augmented the existing multicultural makeup;
- “Cultural Diversity” or “Multiculturalism” refers to the harmonious co-existence and interaction of different cultures;
- cultural and linguistic diversity is the common heritage of humankind and should be cherished and preserved for the benefit of all;
- as libraries serve diverse interests and communities, they function as learning, cultural, and information centers;
- in addressing cultural and linguistic diversity, library services are driven by their commitment to the principles of fundamental freedoms and equity of access to information and knowledge for all, according to cultural identity and values.

For the libraries, this means great task changes must be initiated and a rethinking of the library networking. Especially within the academic community this global world of learning can be seen in the daily work in every country. Libraries are in essence the builders of the multicultural world when supporting the values of the intellectual freedom and the equity of access.

The previous challenges combined with those rising from the birth of the digital environment where most of the documented information is disseminated in one way or other today, means that libraries must rethink the idea of library networking. The mass of documents published today means that no library can handle it by itself; we need even more developed networking ways of managing library services in the modern world. What is more, we need to be willing and able to share our resources and knowledge with each other even if it means funding some other library in order to get the best possible services for our users.

Libraries must also be active in the internet communities: this means stepping outside and becoming partners with the service providers and the people that are creating the information disseminated via those services. It is probable that within the next ten years most of the information needed within the academic community is shared, disseminated and produced in the digital environment. The only way for the libraries to survive is to be an active part of this process.

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## 200 years of medical information – some landmarks

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### Abstract

*This article celebrates the bicentennial anniversary of the University Library at the Karolinska Institutet. It relates the history of the foundation and development of the library until the present day including its rise to become the largest medical library in Sweden, renowned worldwide.*

*Key words:* libraries, medical; anniversaries and special events; Sweden.

### The beginning

The University Library at the Karolinska Institutet (KI) was established as the result of the war between Sweden and Russia in 1808-1809, which was fought in the then Swedish province of Finland. The Swedish army had only one or two “barber-surgeons” available in the army in Finland, and the number of soldiers who died from disease far outnumbered those killed by the fighting. Sweden eventually lost the war and the sovereignty over Finland but as a consequence, the Swedish King Carl XIII inaugurated the *Kongliga Carolinska Medico-Chirurgiska Institutet* on December 13<sup>th</sup> 1810. KI is the only specialized one-faculty medical university in Sweden, and Karolinska Institutet University Library (KIB) is the largest medical library in Scandinavia.

KIB was formed when book collections from two earlier institutions for the education of barber-surgeons/doctors were merged; the *Theatrum anatomicum* and the *Collegium Medicum*. At that time, there were only two scientific libraries associated with academic institutions in Sweden, which makes KIB the third oldest university library in Sweden, after Lund and Uppsala university libraries. During its initial years, care of the library was the responsibility of the Professor of anatomy.

Throughout the ensuing 200 years, the library had 20 Directors, one woman and 19 men (*Table 1*).

The first woman recorded as being employed by the library was hired in 1897 to oversee the reading room.

**Table 1.** *Library Directors 1810-2010*

Library Directors 1810-2010		
J. J. Berzelius (1810-1821)	E.W. Dahlgren (1887-1903)	T. Tottie (1977)
A.J. Hagströmer (1822-1830)	G.E. Haverman (1903-1920)	H. Baude (1978-1986)
A. Retzius (1830-1840)	A. Holmberg (1920-1950)	Å. Lilliestam (1987-1990)
M. Huss (1840)	R. Eriksson (1950-1961)	T.O. Blom (1990-1996)
J.M. Sieurin (1840-1845)	E. Knudtzon (1961-1968)	P. Olsson (1996-2006)
G. von Düben (1846-1855)	E. Hakulinen (1968-1971)	Christer Björklund (2007- )
J.V. Broberg (1855-1887)	L.E. Sanner (1971-1976)	

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Apart from her, only men are mentioned by name in the historical texts until 1960 when in the memorial text written for the 150<sup>th</sup> anniversary, library records mention five women employed for the development of the library between 1910-1950.

The number of staff in the library grew slowly, from 20 in 1960, of which 14 had “specific library education”, to around 70 staff at the end of the 1990s, before mergers with other libraries occurred (see below). Today, KIB has approximately 110 staff, about half of which are librarians or library assistants. The rest is comprised of information specialists, IT technicians, programmers, web designers, photographers and ICT pedagogues.

KIB is a library where people thrive – and as a result they stay on. We have recently seen a succession of colleagues retiring after some 40 years at KIB. In some cases, one can follow their family history in the annual reports from the 1960s and 70s, where staff maternity leave was systematically noted.

### **The development of the current library through reorganizations and mergers**

The library has grown and developed without major changes to the traditional library activities, until 1997 when a total reorganization was carried out, which included the Medical Information Center (Medicinska Informationscentralen, MIC).

The Biomedical Information Center (BMDC, later MIC) started its work in 1961 as a special research group for biomedical information and documentation at KI. In 1975, BMDC changed its name to MIC, and moved into a new wing of the library building. From 1979, KIB and MIC belonged to the same organization under the name KIBIC (Karolinska Institutets Bibliotek och Informationscentral). Until the 1997 reorganization, KIB and MIC ran parallel operations within the same organization, with little co-operation or communication. In 1997 the two sections merged into one organization, KIB.

In 1998, the Stockholm University College of Health Sciences was nationalized and merged with KI, along with its library, which was combined with KIB. Two years later the next merger occurred. The Swedish

government, together with the county councils, decided to close operations at Sprö; however, the library was not closed but instead merged with KIB. In 2002, when KI formally became a university, the library changed its name again, to Karolinska Institutet University Library, although it is still referred to as KIB.

During later years, the only addition to the library occurred in 2006 when KIB took on the task of running the St Erik Eye Hospital library, with existing KIB staff spending time at St Erik library. In the future one will probably see, if not mergers, increased co-operation between hospital and university libraries. In Sweden, most universities are government funded, while health care is funded by county councils, a fact that is seen as a complicating factor in providing *state of the art* health care. Policy makers are increasing the pressure on both organizations to co-operate, and this will probably affect libraries also.

### **Library collections**

In medicine, the main source of information is journals, and journal holdings are well documented in the library annals. Starting with a mere 28 journals in 1857, the collection grew slowly but steadily. Despite intermittent reports on a lack of funding to purchase the needed materials, a hundred years later the collection held 1296 journal titles. From 1960 until the 1980s, the number of journal titles more than doubled, to 3178. The beginning of the 21st century has seen the transition to electronic format, and as a result, a rapid rise in the number of journal titles that are available, in part due to the purchasing of “big deals” through national consortia. Early on, KIB made the decision not to buy or keep printed journals that were available electronically. Since 2000, the transition from print to electronic journals has been reflected in the number of journal titles available in these two formats. In 2003, the collection held 6240 journal titles, of which 4750 were electronic; today, access to more than 8000 journals is available, and of these, only 260 are printed. The electronic journals are subject to heavy use. In 2009, over 2 million articles were downloaded. This equates to nearly 6500 every day, or 269 an hour, or an amazing 4.5 articles per minute every day of the year.

As medical information ages quickly, older journals are little sought after, and the collection has gradually been

moved to the National Library book storage in Bålsta, west of Stockholm. Document delivery for these journals is quick and easy using an in-house system. Currently, only journals printed since 2002 are kept in the library.

The book collection comprises not only student textbooks, of which we buy a number of each title, but also a collection of specialist books and all doctoral dissertations produced within KI. In recent years, the acquisition policy has changed regarding books, and has made the transition to user driven acquisition, mainly because of the cost in staffing hours for buying and handling books, compared to their low usage. Now, KIB only buys books that are ordered by our users, either as an inter-library loan, or as a suggested purchase.

Another reason for the decreasing size of the book collection is that in 1995, the old book collection from the founding days of KI, together with the books of the Swedish Society of Medicine (Svenska Läkarsällskapet), was organized in the book museum, Hagströmer Library, also at KI. This made it possible for KIB to focus on supplying students, faculty and staff with more current information sources. The Hagströmer Library is accessible by appointment.

### National co-operation

In 1886, the National Library of Sweden began producing a printed union catalogue (Accessionskatalogen, AK). KIB participated in the union catalogue from the start, probably because the part-time librarian at KIB at the time, E.W. Dahlman, was editor of the union catalogue. Consequently, in 1973, KIB was one of the first libraries to add their holdings to the new Swedish online union catalogue, Libris. Participating in the union catalogue constituted the start of an era of intensive interlibrary loan (ILL) activities, culminating at the beginning of the 21st century, where the end user now gets easy access through electronic information sources via the internet.

KIB was already mentioned in 1887 as an ILL library of national importance. In 1960, in the memorial text written for the 150th anniversary, it was noted that the library had developed over a 40 year period, between 1910-1960, from being a library solely for teachers and researchers at KI, into a central medical library for Sweden. The first years of the 21st century saw an

enormous amount of ILL requests (approximately 1000 per day), with a whole library department at KIB dedicated to handling these requests and delivering photocopies. However, in the last 10 years an enormous increase in access to electronic journals through national consortia has been seen, meaning that most medical faculties in Sweden have access to the same materials, decreasing the need for national interlibrary loans in the form of photocopied journal articles, and thus the role for KIB as an ILL provider.

In 1984, KIB became the first national resource library in Sweden. This was a system run by the National Library, whereby one library in each subject area was given increased responsibility for developing library activities and continuing professional development within their specific subject area; however, this system was terminated in December 2008. National resource libraries could apply for additional funding every year from the National Library. During its 24 years of being the national resource library for medicine, KIB worked on a number of development projects, often in co-operation with other medical libraries in Sweden, and also organized a series of national conferences and continuing professional development (CPD) courses for medical librarians. During the last 10 years, some national resource libraries took on the responsibility for negotiating deals with publishers and database providers for consortia, a function that KIB retained after the termination of the national resource library system by the National Library in 2008.



**Fig. 1.** *The façade of the present day library in Solna.*



Fig. 2. Library building on Kungsholmen, 1936.

### Database producer

In 1965, when BMDC became the first Medlars center outside the USA, the responsibility for indexing the Nordic literature for Medline was written into the contract. This task is still performed by KIB today. As the number of Swedish medical journals in Medline is limited, the database Svemed was started in 1982 to provide information about Swedish medical literature not in Medline. The database is available free of charge, and the articles are indexed using Medical Subject Headings (MeSH). In 1988, the Scandinavian medical journals (*Läkartidningen*, *Tidsskrift for den Norske Laegeforening*, *Ugeskrift for Laeger*) were added to Svemed, and in 1994 Danish and Norwegian health and medical journals were added. After the merger with Spril, a selection of articles from Spriline was added to Svemed in 2001, and the database name was changed to SveMed+. In January 2009, SveMed+ celebrated the milestone of containing over 100,000 references.

In 1995, the translation of MeSH terms into Swedish began. The main reason this task was undertaken was because new groups with limited knowledge of English medical terminology started using databases. Having Swedish terminology made Svemed more accessible to this audience. Another user group needing Swedish terminology was KI students. These translations have made it possible to join international projects, such as the Unified Medical Language System (UMLS), and also make it easier for KIB staff to keep up to date with general developments in medical terminology.

When the translation work was started, a client for input, editing and output of Swedish terms was designed in-house. A copy of the National Library of Medicine (NLM) MeSH database was installed on a server at MIC. The client allowed linking between the English and Swedish terms. In this way, an English-Swedish MeSH database was created, and in 1998 the Swedish MeSH was available on the internet. The next step in translating MeSH was taken in 2000, with the translation of MeSH scope notes. When the European Association for Health Information and Libraries (EAHIL) set up the new Special Interest Group on MeSH in 2009, one of the indexers from KIB agreed to function as Co-chair of the group.

### Library buildings

In 1842, the library was moved into the first premises specially adapted for a library, and stayed there for over 100 years. In 1946, a new library building was completed, and the library was moved to the KI campus in Solna where it stayed for nearly 60 years. When the library moved into the new building, the director noted that they would run out of space for their growing collection within a short period of time. In the following years, the library saw several additions to, and the remodeling of, the original library space, with the most revolutionary change being the transition of the library into a learning space for students in the 1990s, when group study rooms and seating were added. The turn of the millennium saw mergers with two other libraries, which almost doubled staff numbers, and resulted in KIB having four branch libraries in 2000, with the main



Fig. 3. Reading room in the old library building, 1942.



**Fig. 4.** *The façade of the present day library in Huddinge.*

library at the Solna campus. Within four years, KIB decreased the number of libraries when two refurbished libraries opened, one in Huddinge in August 2002, and the other in Solna in March 2004. From this point on, KIB is considered to be *one library in two locations*.

### User education

Until the beginning of the 1990s, user education at KIB meant teaching other librarians and faculty to search Medline, something that staff at MIC did both nationally and internationally, but only guided tours of the library were offered to students. New educational methods were implemented, e.g. problem based learning and other student activating methods, which had the effect that



**Fig. 5.** *The Swedish Crown Princess Victoria attends the opening ceremony for the KI Campus in Huddinge in 2002. In the picture is also Lotta Mathiesen (KIB) and the then KI President Hans Wigzell.*

students began coming to the library to search for information, instead of just reading the compulsory course text books. With the increased use of the internet, a huge increase in demand for user education for students was seen, and librarians suddenly found themselves being teachers, although most had no experience of teaching.

In 1998, a pedagogical developer was hired to work with the teacher-librarians to develop user education at KIB, and to increase pedagogical knowledge amongst librarians. Since the 1990s there has been a gradual change in the user education offered, whereby the library is constantly striving to embed information literacy education in the study programs, in co-operation with the academic teachers. In addition to scheduled user education, the library also offers a drop-in lab every weekday, where anyone can come and receive assistance with more complicated questions regarding information searching, evaluation, software questions, or reference handling for example. In 2008, the responsibility for offering Swedish scientific writing support to students was transferred to the library and Språkverkstaden (The Language Workshop), where two Swedish language teachers' are employed.



**Fig. 6.** *Interior view from the present day library in Huddinge.*



Fig. 7. Journals in the library in Solna, 1980's.

In addition to user education for students, KIB currently offers a course aimed at academic teachers called *IT in education*, teaching, for example, the use of podcasting, screen casting, blogs, and wikis in medical education. For PhD students, a course called *Writing science and information literacy* is offered five times a year.

### Technical innovation

Many Swedish librarians would perhaps describe KIB as being at the front edge of technical innovation. In the library annals, some early technical innovations are recorded, such as electrical lighting in the library (1895), the first telephone (1916) and the first photocopying machine (1946). Three things stand out as being truly innovative in KIB's history: firstly, the early adoption of computers and online databases; secondly, the fact that



Fig. 8. The library in Solna 1946 - 2004.

KIB has a large IT department that enables the library to develop in-house technical solutions; and thirdly, that through technology adoption, the first web site for KIB was opened in 1995.

The first computer arrived at Karolinska Institutet in 1961, which was the beginning of BMDC. Shortly after the start of BMDC, the NLM launched the Medlars system (1963), and Sweden ordered a total of 3000 searches during this first year. Only two years later, BMDC became the first Medlars center outside the USA, including the indexing of the Nordic literature for Medline. In 1972, BMDC was the first regional center outside the USA to offer Medline online. By the end of the year, four users were searching online (outside KI), a number that rapidly increased (1976: 35 users; 1986: 700 users; 1991: 1600 online users). More than twenty years later, in 1994-95, the Ovid system was introduced at KIB, and replaced NLM's Elhill system, which was closed down by the NLM in 1996. When PubMed was introduced in 1997, the era of hosting external databases at KIB was over.



Fig. 9. Interior view, present day library in Solna.



Fig. 10. KIB staff, May 2010.

Computer power was a constant problem for BMDC, and later MIC, staff. In the early days, a new computer was on lease for conducting searches, but this was not enough. To be able to share computing power, the programs were rewritten to work on an IBM-machine, a feat the experts in the USA had been unable to complete. In 1975, after many years of lacking the computing capacity to run the Medlars system, KI funded hardware for information storage. KIB continued to rent computer capacity from several organizations to run the searches, and computer tapes were transported all over Stockholm to do the job. Under these circumstances, it could take up to a month to obtain the result of a single search. Finally, in 1989, a mainframe computer was purchased for MIC, and Medline was run for the Nordic countries, as well as East Germany (from 1981) and Poland (from 1974).

The comparatively large IT department at KIB, in part due to the needs of BMDC/MIC, has enabled KIB to develop in-house systems for different library operations. One successful example is SAGA, a system for managing document supply. SAGA is the result of an internal project aimed at improving document supply workflows that was initiated in 1997. SAGA offers automation of many tasks in the document supply workflow. Features offered include tools for locating a library holding a requested item, for handling interlibrary borrowing requests, for communicating with

patrons, for document delivery, and modules for statistics and billing. Transactions performed through the interface are recorded in the system, allowing follow-up of document requests received by the library. The high level of automation makes it possible to offer more efficient and sophisticated document supply services. Initially developed for the needs of KIB, SAGA is now in use at many academic libraries in Sweden.

Since 1995, the KIB web site has seen many changes, including the modification to content management systems in the 21st century. In April 2010, the library released the latest version of the web site, using an open source program with possibilities for users to customize the start page and add comments. For many years a page called *Diseases, Disorders and Related Topics* was the most used page on the KIB web site, with a vast number of international users (<http://blog.lib.uiowa.edu/hardinmd/2010/05/28/tor-ahlenius/>). *Diseases, Disorders and Related Topics* was a MeSH indexed quality controlled list of web sites within medicine, compiled by one of KIB's staff, Tor Ahlenius.

### **KIB in 2010**

In the year of the bicentennial celebrations, KIB offers a wide range of services aimed at students, staff and faculty of Karolinska Institutet. A few of these are perhaps unusual to find in a library, such as the

photographers and video producer that joined KIB staff when KI reorganized their departments in 2002, or the management of student IT affairs, including computer rooms on campus as well as email accounts for students. For some years, KIB offered web consultancy services, both for KI and external customers, through the web bureau Vision, started in 1999. KIB still produces web sites and online tutorials for KI staff, having expertise in 3D animation, web design, and ICT amongst their staff.

In addition to this, KIB is also providing KI's President Harriet Wallberg-Henriksson with bibliometric information for the distribution of research funding within KI. The initiative of a bibliometric project was undertaken by the President in 2005, and to be able to run the necessary calculations, KIB bought the complete database Journal Citation Reports from Thomson ISI.

For more information about the bicentennial celebrations at KI, please visit: [www.ki.se/200](http://www.ki.se/200) and choose the English language version.

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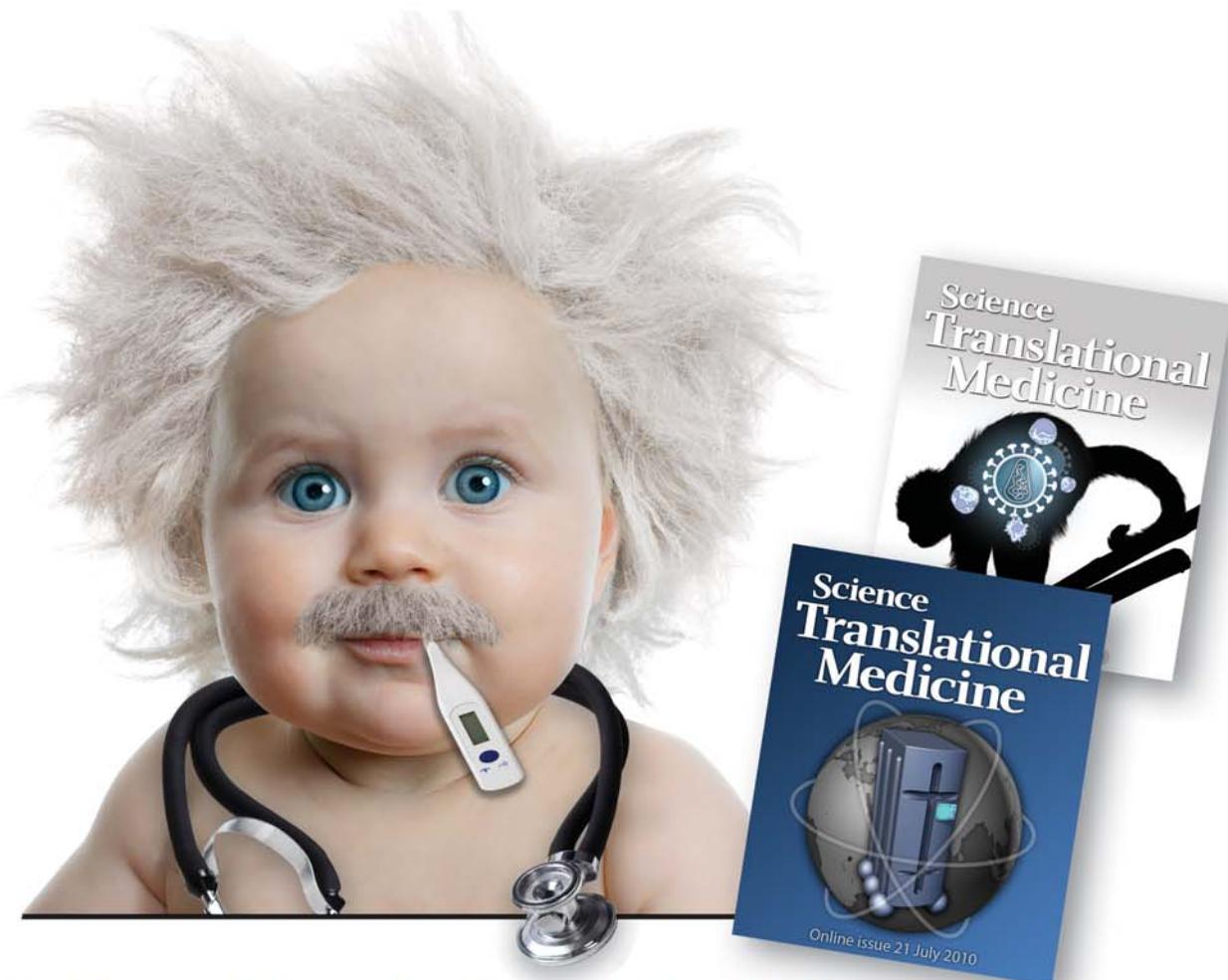
### **HINARI Access to Research in Health Programmes Courses added to the Medical Library Association (USA) Distance Learning Platform**

The 4 credit Medical Library Association (MLA) CE Course titled, *HINARI-Train the Trainers*, now is available as a self-paced distance learning module. This course gives participants the skills for training individuals from HINARI eligible countries who are students at or visitors to their institutions or at the HINARI eligible organizations. The course also discusses the variables necessary for organizing and conducting workshops at the partner organizations.

The other distance learning option is the *HINARI Short Course*. It is an overview of the key features of HINARI and can be completed in 3-4 hours. This material is geared toward giving users the necessary baseline skills and is included in the *Train the Trainers* course. Upon completion, individuals will have the skills to effectively access and use HINARI's resources.

Participants can either access the various sections of the self-paced courses via the MLANET or download the sections and view them offline. MLA members and non-members can register, complete either course and receive a certificate. If your institution has linkages with HINARI-eligible organizations, please notify your contacts. For more information on the course and HINARI, go to <http://mla.mrooms.org/> and [www.who.int/hinari/en](http://www.who.int/hinari/en). These courses are sponsored by MLA/ Librarians Without Borders® E-Library Training Initiative that is funded by a grant from the Elsevier Foundation.

**Lenny Rhine**  
Coordinator, E-Library Training Initiative  
Librarians without Borders  
Medical Library Association



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## EAHIL 2011 WORKSHOP 5-8 July 2011, ISTANBUL - TURKEY

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### CALL FOR PAPERS AND POSTERS

The EAHIL Workshop will be held in Istanbul at the junction point of Europe and Asia. While the scientific program is expected to create an *interactive* platform for professional development and sharing, the social program promises an unforgettable journey to the heart of Istanbul.

The International Programme Committee invites proposals for *papers and posters*, as well as for *workshops, empowerment sessions and continuing education courses* for the EAHIL Istanbul Workshop.

The Workshop theme is "Active Learning and Research Partners in Health".

The Committee aims at a scientific program comprising presentations of contributed papers and invited speakers, a wide program of workshops, debate or panel sessions and outdoor activities such as walk&talk session.

The Committee encourages innovative proposals for activities in interactive formats on the following topics:

- Active learning: its role in health sciences libraries
- Faculty-librarian instructional partnerships
- Embedded librarians in course management systems
- Digital libraries: trends and opportunities for e-learning
- Active learning in library instruction
- Assessment and evaluation of a learning/teaching device
- Technology enabled active learning
- Learning space design
- Evidence-based library and information practice
- Health informatics
- New roles of health librarians
- Information literacy for health professionals

Abstract submission will be online only at: [http://80.89.233.225/cop\\_index.html](http://80.89.233.225/cop_index.html)

#### Abstract submission instructions :

1. Both EAHIL members and non-members may submit abstracts.  
EAHIL members will login with their ordinary EAHIL Membership Database username and password. Non-members first have to register their personal details to get a username and password.
2. When you login, you arrive at the abstract submission system.  
Click on "Papers". If you already have submitted abstract(s), you will get a list of your abstract(s) and you can update the information by clicking on the title.  
If you want to submit a paper, click on "Add paper".  
For author information, use format: surname, forename; surname, forename.
3. Abstract length should not exceed 2500 characters.
4. Within the abstract submission period 1 September - 31 October, you may update your abstract.

Detailed instructions are made available through EAHIL Workshop web site : <http://eahil2011.ku.edu.tr>

#### Important dates

Abstract submissions begins: 1 September 2010  
Deadline for submissions: 31 October 2010  
Notification of acceptance/rejection: 31 December 2010  
Deadline for confirmation of author participation: 31 January 2011  
Deadline for submission of accepted presentations in full text: 30 April 2011



## Koç University - The Conference Venue

The University was founded in 1993 by the Vehbi Koç Foundation, with the aim of creating a world-class university and stimulating modern research. It sprawls over a sixty-two acre site. The sixty buildings, academic and administrative, laboratories, library, dormitories, faculty residences, social and sports facilities are the product of a meticulous, integrated design.

## Sponsorship & Exhibition

The exhibition will open on 5 July 2011 and continue until 8 July 2011. Companies may make a presentation on new products or products with new features at the Workshop session and in the designated rooms during the coffee breaks.

More information about sponsorship and exhibition can be found at <http://eahil2011.ku.edu.tr>.

## Welcome Dinner – Wednesday, 6 July 2011 Hosted by the Rector of Koç University



## Gala Dinner - Thursday, 7 July 2011 Dinner cruise on the Bosphorus.



## Library Visit. Friday, 8 July 2011: Süleymaniye Manuscript Library

The Süleymaniye Complex, which also houses the library, was built by the chief architect at the royal court, Mimar Sinan for Sultan Süleyman the Magnificent, and was completed in 1549-1557. This complex with its health-related elements and library, contributed to the development and progress of science.

Süleymaniye Manuscript Library was founded as a modern library in 1918. The Süleymaniye has now five affiliate libraries: Atıf Efendi Library, Hacı Selim Ağa Library, Köprülü Library, Nuruosmaniye Library, and Ragıp Paşa Library. It is one of the richest centers in the field of oriental studies as it contains the largest collection of Islamic manuscripts in the world. The library houses nearly 131,000 works, including manuscripts in Ottoman Turkish, Arabic and Persian, printed materials in Ottoman Turkish and modern Turkish, English, French, German and other languages.



## Conference Tours:

### Accompanying Persons Tour - Wednesday, 6 July 2011



Afternoon departure from conference hotels for the Orientation Tour, the Spice Bazaar and the Dolmabahçe Palace. İstanbul, Constantinople, Byzantine, each name an empire and with each empire a culture and an art that has produced some of the world's grandest monuments to human ingenuity and power. In İstanbul, time is measured in centuries and its art and architecture in degrees of splendor. This scenic drive will give you the opportunity to see the European and Asian sides of İstanbul. We will pass sites including the Bosphorus and the Golden Horn, then visit the 17th century Spice Market, where you can find a vast diversity of spices, sacks of henna, many varieties of oil and herbs, and of course the world's very best Turkish delight.

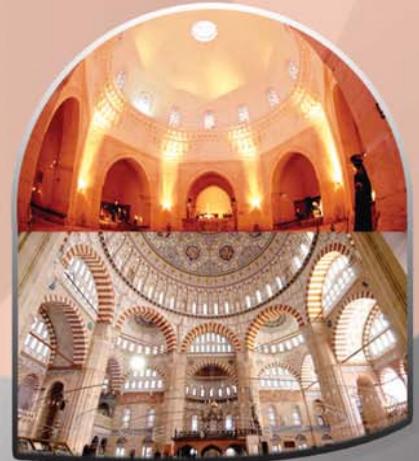
### Saturday Excursion - 9 July 2011 - İSTANBUL

The Eastern and the Western cultures are in the same melting pot! Istanbul is the largest city in Turkey and the fifth largest city proper in the world with a population of 12.8 million. Istanbul is also a megacity, as well as the cultural, economic, and financial centre of Turkey. It extends both on the European (Thrace) and on the Asian (Anatolia) sides of the Bosphorus, and there is no other metropolis in the world that is founded on two continents. Istanbul is a bridge where not only the East and the West, the past and today, but also the antiquity and the modern meet. In its long history, Istanbul has served as the capital city of the Roman Empire, the Eastern Roman (Byzantine) Empire, the Latin Empire, and the Ottoman Empire. The historic areas of Istanbul were added to the UNESCO World Heritage List in 1985. The city was chosen as joint European Capital of Culture for 2010. Once you step in this city, you will be able to experience yourself this historical and natural beauty beyond words can describe.



### Sunday Excursion - 10 July 2011 - EDİRNE

Beautifully located on the banks of the Meriç, Arda and Tunca rivers and adorned with several magnificent mosques, Edirne is like an open-air museum of Ottoman architecture. The tour includes visits to the Eski Cami (Old Mosque), which dates back to 1414, Bedesten Bazaar, which dates from 1418, Üçşerefeli Camii (1447) which has four different minarets, one of them with three balconies, hence the name meaning "Mosque with Three Balconies", Selimiye Mosque, designed by the Grand Architect, a contemporary of Michelangelo, Mimar Sinan for Sultan Selim II, The Health Museum which was awarded Council of Europe Museum Prize for the Year 2004.



### [Collected July - September 2010]



**Benoit Thirion**

Chief Librarian/Coordinator  
CISMef Project  
Rouen University Hospital, Rouen, France  
Contact: Benoit.Thirion@chu-rouen.fr  
Benoit\_Thirion@yahoo.fr

The goal of this section is to have a look at references from non-medical librarian journals, but interesting for medical librarians (for lists and TOC's alerts from medical librarian journals, see: <http://www.chu-rouen.fr/documed/eahil67.html>)

#### Free full text

1. Young C. **Medico-legal research using evidence-based medicine**  
Law Library Journal [Internet]. 2010 [cited 2010 September 2];102(3):450-77  
*Ms. Young provides an introduction for legal researchers to locating and evaluating medical information in the context of evidence-based medicine. Topics covered include defining evidence-based medicine, using and selecting bibliographic databases for medical research, and applying the methods of evidence-based medicine to the process of medical research and evaluating information retrieved.*  
Available from: [http://www.aallnet.org/products/pub\\_llj\\_v102n03/2010-25.pdf](http://www.aallnet.org/products/pub_llj_v102n03/2010-25.pdf)
2. Crummett C *et al.* **Publishing practices of NIH-funded faculty at MIT**  
Issues in Science and Technology Librarianship Librarian [Internet] 2010 [cited 2010 August 26];Summer  
*Faculty and researchers who receive substantial funding from NIH were interviewed about their publication practices. Qualitative data was collected from interviews of eleven faculty members and one researcher representing six academic departments who received NIH funding. Interview responses were analyzed to identify a representative publication workflow and common themes related to the publication process. The goals of this study were to inform librarians about faculty publication practices; to learn how faculty are affected by and responding to NIH publication policy changes; and to inform planning and discussion about new services to support NIH compliance in addition to general faculty publishing. Major themes from the interviews included consistency in publishing workflows, but variety in authorship patterns and in data management practices. Significant points of pain for authors included difficulty finding quality reviewers, frustrating submission processes, and discomfort about the implications of publication agreements. Some authors found the NIH submission requirement to be burdensome, but most assumed their publishers were taking care of this process for them. Implications for library services are considered.*  
Available from: <http://www.istl.org/10-summer/refereed2.html>
3. Shapiro S. **Using Google Calendar as an email alert system for electronic resource renewals**  
Journal of Library Innovation Librarian [Internet] 2010 [cited 2010 August 19];1(1)  
*This article describes an innovative and simple way for libraries to generate email reminders for the renewal and payment of electronic resources using Google Calendar. The advantages of using Google Calendar*

include cost (it's free) and ease of use. Setting up an email alert system using Google Calendar enables librarians to track and manage their electronic resources more effectively.

Available from: <http://www.libraryinnovation.org/article/view/23>

#### Abstracts only

#### 4. Siegel E *et al.* **Defining the next generation journal: The NLM–Elsevier interactive publications experiment**

Information Services and Use [Internet] 2010 [cited 2010 September 23];30(1):17-30

**Objective:** *A unique collaborative project to identify interactive enhancements to conventional-print journal articles, and to evaluate their contribution to readers' learning and satisfaction. Hypothesis: It was hypothesized that (a) the enhanced article would yield more knowledge acquisition than the original article; (b) the interactivity aspects of the enhanced article would measurably contribute to the acquisition of knowledge; and (c) the enhancements to the original article would increase reader acceptance. Methods:* Fifteen SNMA medical students, assumed to have a greater generational familiarity and comfort level with interactive electronic media, reviewed 12 articles published in three Elsevier clinical and basic science journals. They used the Student National Medical Association's asynchronous online discussion forum over a four month period to suggest desired enhancements to improve learning. "Prognostic Factors in Stage T1 Bladder Cancer", published in the journal *Urology* was selected by the investigators as presenting the best opportunity to incorporate many of the students' suggested interactive and presentational enhancements in the limited timeframe available prior to the established test date. Educational, statistical, and medical consultants assisted in designing a test protocol in which 51 second to fourth year medical students were randomly assigned to experimental and control conditions, and were administered either the original or enhanced interactive version of the article on individual computer workstations. Test subjects consisted of 23 participants in the control group (8 males, 15 females) and 28 participants in the experimental group (9 males, 19 females). All subjects completed pre- and post-test instruments which measured their knowledge gain on 30 true-false and multiple-choice questions, along with 7 Likert-type questions measuring acceptance of the articles' format. Time to completion was recorded with the experimental group taking 22 min on average compared to 18 min for the controls; pre- and post-test times were 6 and 7 min, respectively. Statistical comparisons were based on change scores using either the Student t-test or the Two Way Analysis of Variance or Covariance. Significance was set at  $\alpha=0.05$  or better. Results on the dependent measure of knowledge acquisition showed no difference overall on the 30 questions, but learning gain was statistically significant for the subset of 10 questions that measured gain on content that was accessible by the user-invoked interactive features of the enhanced article. Further analyses revealed significant interactions by student year and gender. Second year students (11 in the control group, 8 in the experimental group) were the best performers in terms of knowledge acquisition from both articles. The female medical students received a larger learning gain from journal enhancements and interactivity components than their male counterparts. Acceptance overall was greater for the experimental group who rated the experience more favorably than the controls. Conclusions: Failure to consider human factors such as gender and learning style may obscure underlying differences and their impact on the interactive aspects of scientific publications. Preliminary findings suggest the need for further study to include a heavier focus on interactivity apart from presentational enhancements; a more rigorous treatment of time as a specific variable; and an expanded experimental design that evaluates acquisition, understanding, integration and acceptance as dependent measures.

Available from: <http://iospress.metapress.com/content/f515672412351346/>

#### 5. Hegarty N, Carbery A. **Piloting a dedicated information literacy programme for nursing students at Waterford Institute of Technology libraries**

Library Review [Internet] 2010 [cited 2010 September 21];59(8):606-14

*Purpose* The purpose of this paper is to describe the pilot information literacy programme for undergraduate nursing students as recently developed at Waterford Institute of Technology (WIT) libraries. The paper outlines the background to the programme, discusses its design and delivery and summarises participating students' initial response to it. *Design/methodology/approach* This paper takes a broadly practical, case study approach in terms of recounting experiences of designing and delivering a dedicated information literacy programme for undergraduate nursing students at WIT. *Findings.* Although the project is still at an early or

*pilot stage, the feedback from the undergraduate students who attended training is very positive. The fact that the programme was so well received in its first year of operation is encouraging and inspiring, going forward. Practical implications – the paper should be of interest to anyone involved in developing information literacy programmes or in the supply of information to nursing students. Originality/value. This paper is likely to be of practical interest to academic librarians, who are looking for a fresh approach to information literacy training for undergraduate nursing students at third level institutions of similar scale and size to WIT.*  
Available from: <http://dx.doi.org/10.1108/00242531011073137>

6. García-Pérez MA. **Accuracy and completeness of publication and citation records in the Web of Science, PsycINFO, and Google Scholar: A case study for the computation of h indices in Psychology**  
Journal of the American Society for Information Science and Technology [Internet] 2010 [cited 2010 September 16];61(10):2070-85  
*Hirsch's h index is becoming the standard measure of an individual's research accomplishments. The aggregation of individuals' measures is also the basis for global measures at institutional or national levels. To investigate whether the h index can be reliably computed through alternative sources of citation records, the Web of Science (WoS), PsycINFO and Google Scholar (GS) were used to collect citation records for known publications of four Spanish psychologists. Compared with WoS, PsycINFO included a larger percentage of publication records, whereas GS outperformed WoS and PsycINFO in this respect. Compared with WoS, PsycINFO retrieved a larger number of citations in unique areas of psychology, but it retrieved a smaller number of citations in areas that are close to statistics or the neurosciences, whereas GS retrieved the largest numbers of citations in all cases. Incorrect citations were scarce in WoS (0.3%), more prevalent in PsycINFO (1.1%), and overwhelming in GS (16.5%). All platforms retrieved unique citations, the largest set coming from GS. WoS and PsycINFO cover distinct areas of psychology unevenly, thus applying different penalties on the h index of researches working in different fields. Obtaining fair and accurate h indices required the union of citations retrieved by all three platforms.*  
Available from: <http://onlinelibrary.wiley.com/doi/10.1002/asi.21372/abstract>
7. Chatfield AJ *et al.* **Communicating with faculty, staff, and students using library blogs: results from a survey of academic health sciences libraries**  
Internet Reference Services Quarterly [Internet] 2010 [cited 2010 September 3];15(3):149-68  
*This study investigated use and management of blogs in academic health sciences libraries. Quantitative and qualitative data were collected with a questionnaire distributed to bloggers and administrators representing 22 libraries self-identified as using blogs to publish library newsletters. Perceived barriers to use of blogs included lack of patron awareness and technical issues. Blogs were viewed as easy to use by librarians and blogs are used to promote licensed resources. Blogs do not replace other interactions with librarians, but in the future, could be used to develop a community, provide tools for learning, and increase visibility of the library.*  
Available from: <http://www.informaworld.com/smpp/content~db=all~content=a926547810~frm=abslink>
8. Aminpour F *et al.* **Iranian medical universities in SCIE: evaluation of address variation**  
Scientometrics 2010 [cited 2010 September 2];85(1):53-63  
*Applying different institutional addresses in the scientific production of a same university has underestimated the scientific production of Iranian universities and consequently lowered their position in the international academic rankings for a long time. The present study evaluated the scientific production of Iranian medical universities according to their institutional addresses registered in the papers indexed by Science Citation Index Expanded (SCIE). By conducting a descriptive research we retrieved total SCIE indexed of top Iranian medical universities and their respective hospitals and research centers from the beginning of 1986 to the end of 2007. Then different variations of the institutional addresses of each university in the author affiliation of papers were assessed. Finally the universities were ranked according to observing a uniformed format for more registered addresses in SCIE. The findings showed unexpected diversity in the institutional affiliation of each university in their SCIE indexed papers. Although "Tehran University of Medical Sciences" showed the most variation in registering institutional addresses but ranked first according to observing unification for*

more addresses in the SCIE indexed papers comparing to the other universities. The problem of applying different institutional affiliations in the scientific production of the universities should be valued enough by the whole scientific community. Observing a uniformed format in registering institutional addresses of Iranian medical universities would affect their scientific credibility and international ranks through representing their real scientific productivity.

<http://www.springerlink.com/content/ktj214824455747p/>

9. Pautasso M. **Worsening file-drawer problem in the abstracts of natural, medical and social science databases**

Scientometrics 2010 [cited 2010 September 2];85(1):193-202

*The file-drawer problem is the tendency of journals to preferentially publish studies with statistically significant results. The problem is an old one and has been documented in various fields, but to my best knowledge there has not been attention to how the issue is developing in a quantitative way through time. In the abstracts of various major scholarly databases (Science and Social Science Citation Index (1991–2008), CAB Abstracts and Medline (1970s–2008), the file drawer problem is gradually getting worse, in spite of an increase in (1) the total number of publications and (2) the proportion of publications reporting both the presence and the absence of significant differences. The trend is confirmed for particular natural science topics such as biology, energy and environment but not for papers retrieved with the keywords biodiversity, chemistry, computer, engineering, genetics, psychology and quantum (physics). A worsening file-drawer problem can be detected in various medical fields (infection, immunology, malaria, obesity, oncology and pharmacology), but not for papers indexed with strings such as AIDS/HIV, epidemiology, health and neurology. An increase in the selective publication of some results against some others is worrying because it can lead to enhanced bias in meta-analysis and hence to a distorted picture of the evidence for or against a certain hypothesis. Long-term monitoring of the file-drawer problem is needed to ensure a sustainable and reliable production of (peer-reviewed) scientific knowledge.*

<http://www.springerlink.com/content/t667r062lj765856/>

10. Lewison G Turnbull T. **News in brief and features in New Scientist magazine and the biomedical research papers that they cite, August 2008 to July 2009**

Scientometrics 2010 [cited 2010 September 2];85(1):345-59

*New Scientist is a British weekly magazine that is half-way between a newspaper and a scientific journal. It has many news items, and also longer feature articles, both of which cite biomedical research papers, and thus serve to make them better known to the public and to the scientific community, mainly in the UK but about half overseas. An analysis of these research papers shows (in relation to their presence in the biomedical research literature) a strong bias towards the UK, and also one to the USA, Scandinavia and Ireland. There is a reasonable spread of subject areas, although neuroscience is favoured, and coverage of many journals—not just the leading weeklies. Most of the feature articles (but not the news items) in New Scientist include comments by other researchers, who can put the new results in context. Their opinions appear to be more discriminating than those of commentators on research in the mass media, who usually enthuse over the results while counselling patience before a cure for the disease is widely available.*

<http://www.springerlink.com/content/dx107g5648w73p44/>

11. Vander Harta R *et al.* **Upgrading a coldfusion-based academic medical library staff intranet**

Journal of Web Librarianship 2010 [cited 2010 September 2];4(2&3):129-41

*This article details the process of upgrading and expanding an existing academic medical library intranet to include a wiki, blog, discussion forum, and photo collection manager. The first version of the library's intranet from early 2002 was powered by ColdFusion software and existed primarily to allow staff members to author and store minutes of library team meetings. Other ColdFusion-based applications and functions were subsequently added, as were various other library documents and procedures. As a follow-up to the library's strategic plan, a library Staff Intranet Team was organized in early 2008 to reorganize the content of the intranet and to identify software tools that would allow greater staff participation in maintaining and updating intranet content. Early steps in the process included brainstorming, a card-sorting exercise, product research,*

*a staff survey, and paper prototyping. The team focused on implementing various open-source, ColdFusion-based tools in order to accommodate existing technology, available budget, and time constraints. Challenges in implementing the tools included bypassing or modifying existing authentication systems and applying modifications that led to loss of native functionality. Despite usability testing and staff training, library staff have not universally welcomed or adopted all the new tools. Notwithstanding these challenges, the renovated staff intranet has shown promise in furthering the goals in the library's strategic plan to improve communication and facilitate collaboration among library staff.*

<http://www.informaworld.com/smpp/content~db=all~content=a926499223~frm=abslink>

12. Shaheen Nisar A. **Website evaluation of select Pharma Industries: an evaluation**

International Journal of Library Science 2010 [cited 2010 September 2];special2(A10)

*Technology has expanded the range and ease of information access at the expense of personal contact. The implications for libraries are substantial: a need to more clearly identify groups of users and their different needs. One way of attempting to meet such needs, and one of the most important new elements in the electronic library environment, is the website. Simultaneously, the need for evaluation is felt very keenly in libraries. In times of rapid and profound societal and technological change, evaluation is essential to preserving the viability and the visibility of libraries. This article describes how top ranking Pharma Industries perform, show their information strength. Therefore, their websites are evaluated to indirectly know the emphasis on information. This study has outlined the major aims and methods of select Pharmaceutical Industries websites. It has explored the criteria by which library websites are evaluated and the measures used to assess those criteria. Generally for evaluating websites there are many criteria available in literature. However, certain special criteria depending on the nature of subject and type of organization were found out for evaluation.*

<http://www.ceserp.com/cp-jour/index.php?journal=ijls&page=article&op=view&path%5B%5D=736>

13. Gravett K. **Using online video to promote database searching skills: the creation of a virtual tutorial for Health and Social Care students**

Journal of Information Literacy, 2010 [cited 2010 September 2];4(1)

*In recent years, online tutorials have become well-established tools for the delivery of information literacy training as information professionals continue to seek new and more effective ways to reach audiences. However, the rapid transience of technologies, and the ongoing need to maximise the efficiency of services, mean that the question of how best to exploit the online medium needs further exploration. This paper focuses on a project at the University of Surrey Library to develop a new approach to online instruction. The goals of the project were to explore how the addition of video might create a more engaging user experience, and how the online video tutorial might therefore both improve existing information literacy training as well as offering a 'just in time' point of support. This paper examines the practical challenges involved in creating useful and accessible content and compares different software solutions for producing and editing video, audio, screencasts and subtitles. Further, it also examines the specific issues encountered when using external content, including database modifications and e-copyright issues. Finally, it touches upon the feedback collected so far in order to begin the evaluation of the resource. Using video can maximise the impact of e-learning tools, helping online tutorials to deliver information in a more personal and immediate way. However, when allowing for the time investment in creating and managing such resources, both their role alongside alternative information literacy approaches and their lasting value must be carefully considered.*

<http://ojs.lboro.ac.uk/ojs/index.php/JIL/article/view/LLC-V4-I1-2010-2>

14. Ferrer-Vinenta IJ. **For English, Press 1: international students' language preference at the reference desk**

The Reference Librarian [Internet] 2010 [cited 2010 August 19];51(3);189-201

*Non-native, English-speaking undergraduate and graduate students were directly surveyed about their language preference at an academic reference desk. Most prefer reference transactions initially in English but, if uncertain about the outcome, would like follow-up help in their primary language. Differences by academic level and country of origin were observed*

Available from: <http://www.informaworld.com/smpp/content~db=all~content=a924376239~frm=titlelink>

15. Kargbo JA. **Undergraduate students' problems with citing references**  
The Reference Librarian [Internet] 2010 [cited 2010 August 19];51(3):222-36  
*This study explored the problems undergraduate students are faced with in citing references in their academic work. The study revealed that undergraduate students face difficulties in citing references in their academic work and that they are inconsistent in the way they cite. The article suggests ways in which faculty and library staff can work together to address this problem.*  
Available from: <http://www.informaworld.com/smpp/content~db=all~content=a924375140~frm=titlelink>
16. Colineau N, Parisa C. **Talking about your health to strangers: understanding the use of online social networks by patients**  
New Review of Hypermedia and Multimedia [Internet] 2010 [cited 2010 August 6];16(1):141-60  
*The internet has become a participatory place where everyone can contribute and interact with others. In health in particular, social media have changed traditional patient-physician relationships. Patients are organising themselves in groups, sharing observations and helping each other, although there is still little evidence of the effectiveness of these online communities on people's health. To understand why and how people use health-related sites, we studied these sites and identified three dimensions characterising most of them: informational/supportive; general/focused; and new relationships/existing ones. We conducted an online survey about the use of health-related social networking (SN) sites and learnt that, consistent with previous research, most patients were seeking information about their medical condition online, while, at the same time, still interacting with health professionals to talk about sensitive information and complex issues. We also found that, while people's natural social network played an important role for emotional support, sometimes, people chose to not involve their family, but instead interact with peers online because of their perceived support and ability to understand someone's experience, and also to maintain a comfortable emotional distance. Finally, our results show that people using general SN sites do not necessarily use health-related sites and vice versa.*  
Available from: <http://www.informaworld.com/smpp/content~db=all~content=a925192542~frm=titlelink>
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Available from: <http://www.informaworld.com/smpp/content~db=all~content=a923472664~frm=titlelink>

### iPad lending project: first results



**Oliver Obst**

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In the last issue I mentioned the plans of my library to lend out iPads “preloaded with a plethora of learning tools”. Now I would like to share our first experiences with you (because I know that many of you are curious about the project and its outcome).

#### **Back to the future**

We may laugh at the hype about the iPad (1), but tomorrow’s world is just not imaginable without ubiquitous and comfortable access to the Internet and sophisticated applications, which not only facilitate our life but have become a part of it. The iPad is not the absolutely perfect device, but it is a significant step towards one. A successor or competitor with half the size and double the power may come close to the magical capabilities of the all-knowing personal librarian “Mister D.”, which Morgan had described in a visionary essay (2).

When I first heard the rumour about this new gadget from Apple, I was not only fascinated but electrified by the news of a tablet PC with such extraordinary features. A gadget like this could completely change the way we handle information and the methodology of reading books and how we attract the media! The iPad may well foster the transition from a printed to a digital learning environment and, if so, will have a great impact on libraries.

#### **Back to practice**

With my naïve enthusiasm, I applied for 24 iPads from tuition fees, but was turned down - fortunately (obviously we could not handle that much at that time). After some phone calls, three iPads were sponsored to start with. In August, we began lending them out for a period of one week to researchers and physicians.

With the iPad, it is pretty much the same as lending out Personal Digital Assistants (PDA) (3). The devices are lent out and withdrawn by a single, appointed staff member, and the lender has to sign a loan contract in advance (4). In the beginning, only faculty members, not students, were allowed to put their hand on an iPad.

Lending is a great way to whet the appetite for a new way of using library resources. Our underlying strategy works like this: “the library will bring the user to the iPad and the iPad will bring the user to the library”. Let me explain this in a little bit more detail.

The core of building sustainable customer relationships is to tie the clients in some way to the library. Usually this can be achieved by a good book collection, kind and supportive staff, expertise in searching, etc. In the Web 2.0 age

this is backed up by promoting services via interactive social media such as Twitter. Another way to attract users is by lending out cool gadgets such as Personal Digital Assistants. But essential for the success of this service is that the library does not only lend out these items, but also provides users with applications and the ability to build an expertise around these devices with the result that the library gains the expertise and therefore can support the user. Our PDA project from 2004 to 2008 proved this: the lending part was not our greatest success but in fact the support part of the project was, where we distributed an impressive number of 1,013 apps to 382 clients. I think the iPad project will evolve in similar ways.

### What will be our next steps?

1. Lending iPads to students too, but using a slightly different approach, only for one day, as a reference book of the non-lending collection. Librarians do not like to take risks and one never knows how students will handle “iPads to go”. Our slogan will be: “if this printed book is not available at the moment, you can use it on this iPad”. Once they use an iPad, they will notice these wonderful interactive multimedia apps for anatomy or pharmacology or whatever. As a great media device, the iPad is a perfect companion for the great content libraries have to offer. This combination is supposed to do an excellent job helping students to pass their exams. For this purpose 15 additional iPads will be provided.
2. We shall build a strong base of support for the growing iPad community in our faculty, including newsfeeds of new iPad apps (5), classification of apps according to the NLM (6), promotion of apps at our library blog, writing wiki entries on *how to make the most out of your iPad*, etc.
3. A group of iPad faculty members has been founded, which work professionally with iPads, and which lend iPads to students, patients, physicians. There are 35 iPads in use for endodontic learning classes, 18 in the library, 15 in the study hospital, and some more for patients to fill out questionnaires. This iPad group is especially useful for getting first hand information, support, and knowledge. It has enhanced significantly the library’s embedding and networking within the faculty.

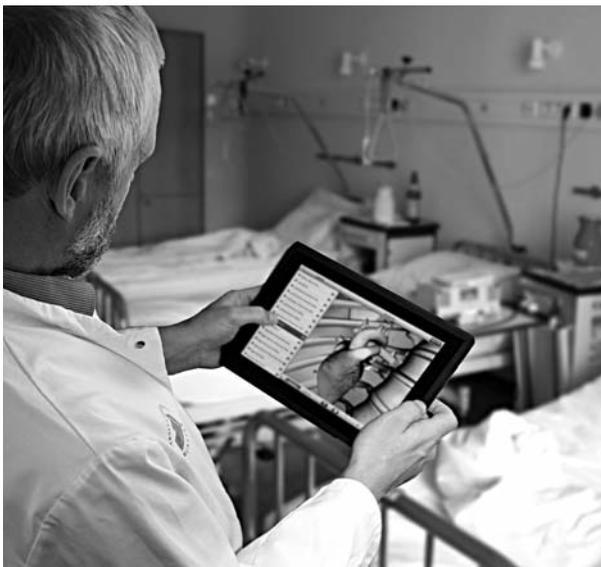


Fig. 1. *The iPad.*

### Preliminary results

We had a wonderful start in the first 2 months with people virtually jumping on iPads as bears to honey and the feedback has been remarkably positive (7). All users were clinicians; departments ranged from cardiology, ethics, gynecology, neurosurgery to pediatrics. Among them were the usual “early adopters” but also newbies. All in all they were quite technophile as more than 80% had smartphones or PDAs already. The service was propagated by word of mouth very well: anybody using this gadget was asked: *where did you get that from?*

For about 60% of the lenders, iPads proved to be very useful, but for 40% not at all. The reasons why the iPad did not stand the test for almost half of the lenders has to be examined in detail. The lenders used the iPad and its apps for a great variety of purposes: most often E-Books were used, followed by literature search, literature management, lectures, lecture videos, and games. Patient education, diagnostics, or music were not used so often and podcasts or movies rarely.

Magazines and journals, such as Macworld, MedPage, Nature News, NEJM, and PLoS were used more often than communication tools such as newsreader, social networks, and chat apps. Half of the lenders used E-book-readers such as GoodReader or iBooks quite frequently, while the other half did not use them at all. Lecture videos from iTunes University, which we had synced with the iPads, were used only a few times.

From the 75 medical apps preinstalled on the iPads, the well-known literature management app *Papers* was the most used, followed by UpToDate (as a app-icon on the home screen), German pharmacopeiae, The Elements, DDx Differentials, PediSafe, and ColorTest.

Overall, more than 80% were satisfied or very satisfied with the opportunity of being able to borrow an iPad from the library.

### Conclusion

Providing mobile access to library resources is a top trend in academic libraries (8). Mobile phones are the communications technology of the future (9). Digital natives expect every information (and person) to be immediately available, e.g. mobile. The iPad is an important step in the direction of an all-mobile world. By lending out iPads, the library can increase their reputation and networking among faculties and clinics. This is an invaluable and easy to achieve opportunity. Building a solid base of expertise around this cool gadget will put a “coolness factor” on the library itself and make it a light house. Hi-tech users accept librarians as peers on the same level and our participation in pioneering projects, such as e-lecturing with iPads or accessing electronic patient records on iPads, has been highly appreciated.

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## **Expert Conference on “Open Access – Open Data“**

From December 13 – 14, 2010, the “Open Access – Open Data” Conference will be taking place in Cologne. It is an international expert conference that will look closely on how the Open Access movement has developed within the last five years and what is going to happen within the next five to ten years. Additionally, the "Open Data Movement" that is gaining more and more importance will be under consideration. While “Open Access” has become daily routine for scientists from many disciplines, access to research data has only recently been put on the agendas of libraries, data centres and research institutions. Discussions will therefore also concentrate on the different challenges that research data will pose in the future. Several projects in this context are already on their way and organisational structures like for example DataCite are being built up.

The conference is organized by Goportis, the Leibniz Library Network for Research Information. Open Access is one of the fields of competence of Goportis.

Goportis is the name of the Leibniz Library Network for Research Information. Partners in Goportis are the three German National Libraries TIB (German National Library of Science and Technology, Hanover), ZB MED (German National Library of Medicine, Cologne/Bonn) and ZBW (German National Library of Economics – Leibniz Information Centre for Economics, Kiel/Hamburg). Goportis is the expert partner in Germany for the following competence fields: Full text service, licences, non-textual materials, long-term preservation and Open Access.

More information:

[www.oaod2010.de](http://www.oaod2010.de)

[www.goportis.de/en](http://www.goportis.de/en)

[www.datacite.org](http://www.datacite.org)



OPEN ACCESS AND  
OPEN DATA

## **„Open Access – Open Data 2010“: Registration now open!**

The German National Library of Medicine (ZB MED) is pleased to announce that registration for the 2010 International Expert Conference "Open Access – Open Data" is open now.

The Early Bird registration discount will be available for those who register by October 31, 2010. Registration and full pricing details are available online at: [www.oaad2010.de](http://www.oaad2010.de).

### **Location**

The conference will be hosted at the Hyatt Regency, a city hotel by the river Rhine in Cologne, Germany, December 13-14, 2010.

### **Conference Theme**

The international expert conference "Open Access – Open Data" is organized by Goportis, the Leibniz Library Network for Research Information and will look closely on how the Open Access movement has developed within the last five years and what is going to happen within the next five to ten years. Additionally, the "Open Data Movement" that is gaining more and more importance will be under consideration. While "Open Access" has become daily routine for scientists from many disciplines, access to research data has only recently been put on the agendas of libraries, data centres and research institutions. Discussions will therefore also concentrate on the different challenges that research data will pose in the future. Several projects in this context are already on their way and organisational structures like for example DataCite are being built up.

### **About Goportis**

Goportis is the name of the Leibniz Library Network for Research Information. Partners in Goportis are the three German National Libraries TIB (German National Library of Science and Technology, Hanover), ZB MED (German National Library of Medicine, Cologne/Bonn) and ZBW (German National Library of Economics – Leibniz Information Centre for Economics, Kiel/Hamburg). Goportis is the expert partner in Germany for the following competence fields: Full text service, licences, non-textual materials, long-term preservation and Open Access.

[Detailed programme and further information:](#)

[www.goportis.de/en](http://www.goportis.de/en)  
[www.oaad2010.de](http://www.oaad2010.de)  
[www.datacite.org](http://www.datacite.org)

### Letter from the President



**Suzanne Bakker**

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Dear Colleagues,

On the 1<sup>st</sup> of January 2011, my second term of two years in office as the President will come to an end. These past four years have been very interesting and it was a pleasure to serve EAHIL in this position. The duties of the EAHIL President bring responsibilities, especially during the workshops and conferences, where the President is expected to welcome delegates and officials, to chair business meetings and the General Assembly and must have an open eye and ear for all involved in the hard work of organizing the events, for all who participate in the many discussions, present their opinions and proposals or who seek some advice.

Many friends and colleagues said to me during these years, “you must be very busy being the President” or, “stepping down will give you a lot more free time”. Actually, the Presidency does not take much time. Because we were lucky to have a very good team with the Board and the organizing committees, most of the work is done by others. The Past President is the one to represent EAHIL and attend the MLA meetings. The Treasurer takes care of the bills and the budget and prepares the reports to the General Assembly, based on the data provided by our secretariat. The Honorary Secretary takes the minutes and prepares the agenda with all the attachments for the meetings. The glassware for the annual EAHIL awards is ordered and transported by our colleague from Czech Republic to each workshop/conference. The Webmaster takes care of the web pages. The Chief Editor runs our *Journal* with the support of the Editorial Board. The main task for the President is keeping up with all these activities.

The EAHIL President has a standing invitation to attend the meetings of the International Programme Committees. It was my pleasure to have been able to visit Helsinki, Dublin, Lisbon and Istanbul in advance of their conferences and workshops. Working for one or two days with IPC members has the advantage of getting to know so many colleagues. I am impressed by the quality of ideas and I appreciate the enthusiasm they bring to their work for our Association. The core of the Association’s activities consists of the annual meetings and we all are very grateful to the Chairs of the local organizing committees who have taken on a huge amount of work and responsibility for the events over the years.



It is with pleasure that I hand over the Presidency to Peter Morgan. Peter has been an EAHIL member since the early years. He was very much involved in organizing the ICML + EAHIL conference in London in 2000. For more than 20 years of his membership, he has been a Council member and attended most of our conferences and workshops. But, as important as his experience and his professional qualities, is the fact that he is a very nice colleague to work with and to have a talk with over a drink. Together with Peter, I welcome Tuulevi Ovaska and Karen Buset, who are new to the Board, and Marshall Dozier now as an elected

member. Helena Bouzkova, Manuela Colombi, Lotta Haglund and Ivana Truccolo continue their Board membership and I am convinced we will form a strong team.

During my Presidency, actually during the whole period of serving on the Board since 1999, I have worked closely with my predecessor Arne Jakobsson. In one way or another Arne and I have been working together on several programme committees, starting in 1991 in Montpellier. There was an official thank you and farewell to Arne during the General Assembly in June 2010, but the real moment of goodbye is approaching fast (at the time of writing); when this issue is published, Arne will be travelling in his beloved South East Asia. I am convinced that our friendship that grew out of our working for EAHIL will last for the rest of our lives. Arne, on behalf of EAHIL Board and members, thank you very much for your dedication to EAHIL and your role in establishing a strong and healthy infrastructure and organization.



Pirjo Rajakiili is leaving after having served on the Board since 2007. This period counts double, since she was in charge of the conference in 2008 in Helsinki. Pirjo, thank you for the elegant and effective way you have combined hospitality and professionalism in your contributions to EAHIL. You will leave the profession in the coming months due to retirement, but we hope to meet you in Istanbul and/or Brussels, at least during the social events of these meetings.

Benoit Thirion is leaving the Board earlier than expected because he needs time to take care of close family. For the same reason we missed him in Lisbon/Estoril. Benoit, we are very happy that you are willing to stay on to take care of the EAHIL webpages. Your dedication to EAHIL is much appreciated.

Other Board members I have worked with during my Presidency were Meile Kretaviciene, Enrica Veronesi and Tony McSeán. Thank you! It was my pleasure working with you.

The day of Elisabeth Husem's retirement will have passed when this issue is published. The Honorary membership awarded to Elisabeth in 2010 is well-deserved, and her contributions to EAHIL and to establishing international relationships, especially the Nordic-Baltic cooperation, will not only be remembered but shall prove to be of lasting impact.

Stepping down as the President will bring me new opportunities, not the least will be the attendance of the MLA meetings in 2011 (Minneapolis) and 2012 (Seattle). Separate and distinguished from the actual Board membership is my involvement with the EAHIL Secretariat. EAHIL is registered as a Dutch association and the Secretariat and finances are taken care of by Nicole Regoort and her staff member Gerben van den Bosch. For reasons of communication and legal representation to Dutch authorities, I will stay on for a couple of more years as the Supervisor of the Secretariat.

An important part of the infrastructure of our association consists of the website, the discussion lists and the membership database. The discussion lists have now moved to the UK, to a paid-for listserv and hosting service of the Science and Technology Facilities Council of the Rutherford Appleton Laboratory. The new platform offers even more features than we had from Surfnet in the Netherlands. The web database is now hosted in the Netherlands. The designer and programmer of this system is no longer available for further development, but we expect the system to serve us for a couple of years more. In the meantime, we will investigate how further development can be made possible. We all know from personal experiences either in our own institutes or other library associations that transition from one system to another is not always easy. The EAHIL Webtools' Taskforce is investigating available options, and will report and advise the Board. A stable and easily managed system to support the running of the Association and to facilitate the organization of our activities is a *conditio sine qua non*.

Professional development, transfer of knowledge, exchange of experience, improvement of skills, bringing research into practice and optimal usage of medical information sources: those are the benefits of joining EAHIL. I wish you all the joy and pleasure of sharing EAHIL's professional and personal impact.

### News from the Special Interest group on MeSH MeSH terms – how do they mirror the situation in the world?



**Marie Monik**

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Stockholm, Sweden

Is there a connection between MeSH terminology and development in the society? A comparison between a list of terms included in MeSH during the period 2000-2010 and a list of events of world importance for health and medicine from the same period shows that such a connection does exist. Not only the current medical research and publishing but also events in the surrounding world have an impact on medical terminology and MeSH updating. The turbulence and often depressing reality of the last decade with its environmental and climatic problems, natural disasters, wars and terrorism, financial crisis, social issues and minority problems are clearly mirrored in MeSH. Take a look at the examples!

#### 2000-2005

##### What happened?

Turn of the century  
Anthrax attacks

Alternative therapies

Animal experiments debate  
Cooperation between NIH and  
Kennedy Institute of Ethics  
Twin tower attack, 9/11  
Wars

##### New term in MeSH

History, 21<sup>st</sup> Century  
Anthrax Vaccines  
Bioterrorism  
Phytotherapy  
Plant Preparations  
Animal Use Alternatives  
Bioethical Issues and subheading /ethics  
  
September 11 Terrorist Attacks  
Iraq War, 2003-

#### 2006-2010

Influenza epidemics  
Environmental disasters

Climatic problems

Socioeconomic issues

Social media, Internet

Influenza A Virus, H1N1 subtype  
Disaster Medicine  
Ecotoxicology  
Climatic Processes  
Extreme Heat  
Health Status Disparities  
Minority Health  
Economic Recession  
Blogging  
Webcasts as Topic  
Data Mining

## Enhancing public access to health information – notes on the Health and Biosciences Libraries programme, IFLA Gothenburg, August 2010



**Päivi Pekkarinen**

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It is a challenging time for public health: there is a continuing threat of pandemics, natural disasters, environmental accidents, man-made hazards... the list is endless. In situations like these, timely and reliable health information is critical but it is not always available; and if it is available it may not be accessible.

The IFLA Health and Biosciences Libraries Section Standing Committee organized and sponsored a session *Health Information for All – New Challenges – New solutions* at the IFLA Conference in Gothenburg, Sweden, 12<sup>th</sup> August 2010 (<http://www.ifla.org/en/ifla76/>). The theme was inspired by IFLA President's theme *Libraries Driving Access to Knowledge* and grew out of the Annual Conference theme *Open Access to Knowledge - Promoting Sustainable Progress*.

The theme turned out to be very popular: our call for papers received nearly fifty responses, of which we selected five papers, and invited the authors of two. So, we had seven papers for the session representing a variety of views across the world concerned with the idea of enhancing public access to health information and addressing issues such as:

- how partnerships and collaborations can support free access to health information;
- how the role of health libraries and health information professionals in promoting open and equitable access can be strengthened;
- how health information can be disseminated to the general public;
- how evidence based information is incorporated into freely available health information;
- how consumers prefer to access health information, e.g. via mobile devices, magazines, newspapers.

The session was well received: it was attended by nearly one hundred participants, and the six lively talks - the speakers from Uganda were unable to join us - were followed by a few lively questions and answers.

### **Enhancing public access to health information: promise of the new context**

In his keynote speech *The Global Health Library - Opportunities for mobility*, **Ian Roberts**, World Health Organization Geneva, Switzerland, highlighted The Global Health Library (GHL) and its new development phase. First he briefly featured the GHL project, started in 2005/6 and led by the World Health Organization (WHO):

- it aims to provide points of access to reliable health information in paper form as well as a one stop access to similar information in electronic format to those who need it;
- it is a project of multiple partners in the fields of health, development and information

- technology - including recently the Medical Library Associations Librarians Without Borders (MLA LWB) and the EAHIL Public Health Special Interest Group (PHIG);
- it strives to provide a virtual platform containing assessed multilingual health information resources in multiple formats and offering more visibility to health information produced in developing countries;
- it comprises component programmes and projects such as Global Index Medicus, HINARI (Health Access to Research Programme), the Blue Trunk Library and the Global Institutional Repository.

Then he described the new evolving environment of “pervasive mobility” and “digital ambience” and analyzed the factors creating new opportunities for developing the Global Health Library and enhancing availability of and access to health information in terms of increasingly innovative devices, increasing digital content, increasing social user habits, and increasing multiple players/partners in the field of mobile connectivity worldwide.

He also reminded the audience of the challenges the Global Health Library faces:

*Yet, while internet penetration rates are increasing, many countries in the developing world still lack access to computers and to the world wide web. Large populations in the poorest areas across the globe have, at best, scarce and slow Internet access, at worst, no access at all... there are simple solutions, and they are not applied. The result is huge health inequalities such as high levels of child and maternal mortality, high incidence of infectious disease, particularly in remote and rural areas.*

Bearing this in mind, he carried on listing solutions, such as solar powered e-readers, multimedia tablets, smart phones, coupling mobile phones containing or receiving large quantities of health related information with sufficient storage space to printing devices, utilizing device synergy.

In developing countries, in urban areas, universities and research institutions, due to enhanced connectivity, can benefit from the availability of scientific journals provided e.g. by HINARI, whereas in rural areas where health centres often have poor connectivity, Blue Trunk Libraries with their basic medical and public health print collections have been a great success. But, he continued, applying a digital & mobile approach, a new version of the Blue Trunk Library could be developed with digital content to provide continuous access to up-to-date basic health resources in multiple formats in multiple languages. In this context, recalling the number of successful partnerships HINARI is based on – including profit and non-profit organizations, commercial and non-commercial publishers – many of the multiple players now in the field of information technology and health information, building the digital future, may find WHO and its Global Health Library beneficial to collaborate with, to advance their market value in low income countries as well as to enhance access to health information where it is most needed, Ian envisioned.

### **Enhancing public access to health information: power of partnerships**

Partnerships and collaborations enhancing availability of and access to health information were explored by three papers: a paper on the activities of the Medical Library Association’s Librarians Without Borders® (MLA/LWB), a paper on the Partnerships in Health Information (PHI), a UK based philanthropic organization, and its association with FAIFE, IFLA’s core programme Free Access to Information and Freedom of Expression, and a paper on a WHO study evaluating the impact of HINARI built on successful partnerships within nine years.

**Carla J. Funk**, Executive Director, Medical Library Association, USA, and **J. Michael Homan**, Director of Libraries, Mayo Clinic Libraries, Assistant Professor of Medical Informatics, Mayo Clinic College of Medicine, Rochester, Minnesota, USA, in their invited presentation *Partnerships, collaboration, promotion: role of the Medical Library Association’s Librarians Without Borders® in ensuring quality information for improved health*, gave inspiring insights into the international commitments of the Medical Library Association (MLA) since its inception 1898 and the Association’s renewed commitment through the Librarians Without Borders® LWB initiative since 2005.

Recalling the original international spirit of MLA articulated by MLA President Eileen Cuningham in her presidential address in 1948 - “Our association has always been a very internationally minded group. Years ago, we discussed

the idea of adding the word “American” to the name. We decided against it because membership was not then, and is not now limited to one country” – they talked with enthusiasm about the global commitment of MLA through the years culminating in Librarians Without Borders®. All the international activities and services of the Association have been integrated under the Librarians Without Borders® programme, The new international strategic statement of MLA underscores the importance of partnerships to achieve international outreach, to enhance access to quality information worldwide, to build in-country research capacity by librarian training programmes, by distance education programmes, by mobilization of volunteers.

They listed a number of successful partnerships initiated by Librarians Without Borders®, including collaborations with key players in the health information field: the World Health Organization and its regional offices around the world as well as the Pan American Health Organization for capacity building and e-library activities, promoting the HINARI Programme; collaboration in Africa with the African Training Outreach Centre for Africa for e-library training programme activities and for training the trainers activities; collaboration with national health organizations for disaster relief activities with hurricanes in the USA, earthquakes in China and in Haiti.

Also, MLA collaborates closely with other medical and health library associations: it is an active member of the IFLA Health and Biosciences Library Section; it has bilateral agreements with associations based in Africa, Asia, Europe: Association for Health Information and Libraries in Africa AHILA, Canadian Health Libraries Association / Association des Bibliothèques de la Santé du Canada CHLA/ABSC, European Association for Health Information and Libraries EAHIL, the German Medical Library Association AGMB, the Korean Medical Librarians Association KMLA; it collaborates with the UK based Partnerships in Health Information PHI; it has created a valuable Sister Libraries Programme which tries to link medical libraries in developed countries with those in developing countries.

The power of partnerships resides in the commitment and expertise of the partners sharing similar goals. *MLA brings a sense of historic altruism and volunteerism to the table and promotes association international efforts as “mission enhancements” and complementary to the activities of like-minded associations and organizations in a true collaborative effort*, Carla reflected at the close of their talk.

In their presentation *Public access to health information: how partnerships can strengthen the role of librarians in developing health*, based on a report jointly authored with **Paul Sturges**, Professor Emeritus, Loughborough University, UK, and former FAIFE Chair, **Shane Godbolt**, Director, Partnerships in Health and **Emma Stanley** described the crucial role of partnerships in developing health in Africa.

IFLA’s core programme FAIFE, Free Access to Information and Freedom of Expression, has kept the issue of public access to health information on the agenda. For this purpose FAIFE has set up several health information material development and training projects and invited health information experts from a variety of organizations to collaborate, including of the IFLA Health and Biosciences Section. For evaluating some of these materials, FAIFE invited Partnerships in Health Information PHI, a UK-based charity, with a wide contact network in East Africa to conduct “train the trainers” workshops to test and refine the materials in East African countries in August 2009. The project was led by Professor Paul Sturges and involved the most extensive partnership working ever undertaken by FAIFE or PHI. Its success was dependent on working closely with local partners to host, plan and deliver each of the workshops in Ethiopia, Kenya, Tanzania, Uganda.

The commitment of all partners in Africa and the UK demonstrates the power partnerships can have in strengthening the role of librarians in developing health, Shane and Emma explained vividly and with great appreciation to their African partners, e.g. the Kenyan and Ugandan Chapters of the Association of Health Information and Libraries in Africa and the Tanzania Library Services Board. Their conclusions were that, in their experience, partnerships depend on individuals and their commitment and enthusiasm but their sustainability and roll out depend on networks.

**Kimberly Parker**, HINARI Programme Manager, WHO, Geneva, in her talk *Outcomes from a free access partnership: HINARI impact after nine years* gave a most interesting view into assessing the impact of a free

partnership by revealing the complexity of the picture and the need to combine several factors in evaluating the impact of the HINARI programme.

First she described the development of this programme within the past nine years:

*HINARI, Health Access to Research programme, was conceived in early 2001 to offer developing country institutions free or nominal-cost access to the world's biomedical literature. Initially, HINARI was a partnership of six major commercial publishers and the World Health Organization. Eight years later, HINARI is one of three sister programs of the Research4Life umbrella, and the partnership has grown to include three United Nations agencies/programmes, Yale and Cornell universities, more than 180 publishers of all varieties and scale, the International Association of STM Publishers, Microsoft Corporation, Ex Libris, and innumerable individuals and institutions who have become champions and ambassadors of the concept.*

To examine literature impact indicators, the following research questions can be formulated:

- are researchers/authors in the Research4Life countries publishing more articles in international scientific journals now than before the programmes were available;
- are researchers/authors citing more articles published in the journals available in the programmes than before;
- are the citations used by researchers/authors in Research4Life countries more now than before;
- to what degree are other international researchers/authors citing works published in Research4Life programme.
- However, to draw a more true picture of the impact, the four research questions should be looked at in relation to three areas: 1) country 2) increase in currency 3) journals cited, Kimberly demonstrated.

Even then it may be difficult to know which journals assessed are “HINARI journals”. But this is not so important – what is important is the enhanced access to relevant health information and the partnerships and collaborations contributing to achieve this goal, she concluded.

### **Enhancing public access to health information: reaching out**

Reaching out the general public and special population groups, building awareness of health information availability were explored by three papers: by a report on a library response to a national health programme in Wales, by a comparative survey on students awareness of national health programmes in India and Bangladesh, and by a research report on HIV/ AIDS information in Uganda.

**Sue Thomas**, Health promotion librarian, Welsh Assembly Government, Health Promotion Library, Cardiff, Wales, UK, in her talk *Small steps to a healthier nation: providing and delivering health information across Wales* illustrated through an initiative of her library how a small public health library can play an important nationwide role in reaching out to the general public, in building health information awareness by responding to the challenges of a national health programme, such as Health Challenge Wales, with “small” but concerted efforts and partnering with public libraries. The involvement of the Health Promotion Library with the Health Challenge Wales programme was stimulated by the idea of health being a “shared responsibility of organizations and individuals”, formulated in a national policy document *Our Healthy Future*. As a result, the *Health Challenge Wales leaflet order-line 0845 606 4050* service was created in 2004. The demand for the leaflets has grown year by year: within the first half of the current year more than 188,309 leaflets were supplied to 501 organization and individuals across Wales. Managing such a service successfully requires special quality standards, performance measures, and evidence of its usefulness for individual customers and for the organizations. The *Health Challenge Wales leaflet order-line 0845 606 4050* proved to be a success in building health awareness: the Library was given an award by Customer Service Excellence last December.

As a contrast to successful ways of reaching out the general public in a small European bilingual country such as Wales with some 3 million people, in large Asian multilingual, multicultural countries such as India with some 118 billion and Bangladesh with some 156 million people, it is a growing challenge to reach out the general public in building health awareness with national public health programmes.

An interesting comparative survey *Student awareness of health information initiatives of the Governments of India and Bangladesh: a study of Punjabi University, Patiala and East West University, Dhaka*, conducted by **Jagtar Singh**, Professor and Head, Department of Library and Information Science, Punjabi University, Patiala, India, and **Dilara Begum**, Librarian, Head of Library, East West University, Dhaka, Bangladesh, reveals that in both countries the main modes of acquiring health information among students are the same: TV, newspapers, radio, bill boards, the Internet, family members, and friends. But in Bangladesh, in East West University in Dhaka, students are more aware of the government health programmes than in Punjabi University in Patiala, India. Consequently, the authors concluded their talk with a call for more concerted efforts and more extensive research to reach out to special population groups as well as the general public in India and Bangladesh.

How to reach out to people threatened by HIV or living with HIV/AIDS is a driving question for those working in the AIDS Information Centre, in Uganda, a country with 2.6 million people infected with HIV, 1.6 million deaths, 1 million living with the disease since the first cases of the epidemic were diagnosed in 1982. This centre, a pioneer non-governmental organization in Sub Saharan Africa to provide HIV counseling and testing services, has been at the forefront of interventions aimed at increasing the percentage of people with knowledge about their HIV status and similarly providing them with HIV and AIDS related information, **Robert Ntalaka and Fred Baruga**, AIDS Information Centre, Uganda, explain in their research paper *Sources of information for clients seeking HIV counselling and testing services at the AIDS Information Centre (AIC) Uganda 2004-2008*. [The authors were unable to participate the IFLA conference, therefore I have summarized their paper based on their text on the IFLA website].

The study was conducted to promote HIV/AIDS awareness and to assess various methods through which clients received information about HIV Counseling and Testing services at the AIDS Information Centre Uganda and to find out the most effective channels to reach special population groups and the general public through eight AIDS Information Regional Centres in Uganda. It consisted of extensive data, those of 235,235 clients above 12 years voluntarily using counseling and or testing services during five years (2004-2008). Interestingly, the results reveal interpersonal communication to be the most effective mode: nearly one third received the information from their relatives and friends; women received information more often from their partners/spouses than men. The second most effective medium was the radio: nearly one fourth received the information from the radio, which seemed to be almost equally frequently used in rural as in urban areas but more frequently by under 36 years old than by those over that age. One tenth received the information from sign posts. TV as a mode of HIV information dissemination was minimal (1%). Newspapers served as a source of HIV information nearly seven times more often in urban areas than in rural areas. However, even if the study proves that oral communication media are most efficient in the rural areas, the authors emphasize no single medium is efficient enough. A combination of media is the most effective way of reaching out, building awareness, involving special population groups as well as the general public with relevant health information - empowering them with their right to their health.

[All the papers are available on the IFLA website: <http://www.ifla.org/en/conferences-session-day/2010-08-12.>]

### Medical Library Association report for EAHIL



**Bruce Madge**

MLA representative to EAHIL  
London Upright MRI Center, London, UK  
Contact: Bruce.Madge@uprightmri.co.uk

#### **MLA '11: Call for Papers and Posters**

The 2011 National Program Committee invites you to submit a paper or poster abstract for MLA '11, May 13–18, Minneapolis, MN. By the time this reaches you it may be too late to submit but the deadline is midnight (PDT) on November 1. I would urge you to consider attending the event next year as it is such a worthwhile experience and Minneapolis has plenty to keep you entertained.

#### **Convenient, Affordable Online Continuing Education**

Interested in taking one of the new online leadership and management continuing education (CE) courses but missed the deadlines this summer? “Everyday leadership,” “Influence,” “Change management,” and “Supervision without micromanagement” will be offered again beginning October 2010. These practical, self-paced courses take just two hours per week. New to online classes? MLA’s friendly support team will help you have the best possible experience, and material is accessible from both work and home. The courses are led by well-known MLA CE instructor Pat Wagner. Contact her for more information. P.S. Classes are more interesting (and fun) when you take them with a colleague.

#### **National Medical Librarians month!**

Traditionally October is National Medical Librarians Month (NMLM) in the States, an idea which should be tried out on this side of the Atlantic. You can see some ideas for promotion on the updated NMLM site where there is new poster art, samples, and marketing tips. This year’s theme is “Better outcomes through health literacy.” You can now post a video of your NMLM celebration or a promotional video you have created to the NMLM 2010 submissions site on MLA’s YouTube Channel. See the NMLM site for more details.

Celebrate by encouraging your library patrons to “Honor your medical librarian” by joining MLA as affiliate members. A new brochure on MLA affiliate membership can be distributed to those who may be interested. Physicians, veterinarians, pharmacists, public health workers – anyone who uses your library – may wish to honor their favorite medical librarians in this way. Affiliate membership is only \$100 per year and offers great benefits.

Awards Applications and Nominations are due on November 1st and those most relevant to EAHIL have been circulated on the EAHIL mailing list – I urge you to apply for these prestigious awards

#### **2010 Librarians without Borders® Grant Awarded**

The University of Zimbabwe College of Health Sciences Library has been awarded MLA’s 2010 Librarians without Borders® Grant, which will support information literacy training.

### **NLM announces 2010/11 Associate Fellows**

The National Library of Medicine (NLM) has named its 2010/11 associate fellows. The Associate Fellows Program is a one-year fellowship at the National Library of Medicine. For more information, visit the NLM website.

- Julie Adamo, University of North Carolina–Chapel Hill,
- Kristen Burgess, University of North Texas
- Kristen Greenland, University of Washington
- Stephen Kiyoi, University of California–Los Angeles
- Caitlin Sticco, University of Wisconsin at Madison
- Salima M'seffar, L'Ecole des Sciences de l'Information

### **National Institutes of Health (NIH) Public Access Slide Show Updated**

The Ad Hoc Committee for Advocating Scholarly Communications has updated its slide show “NIH Public Access Policy: Overview for Librarians.” New slides describe the 2010 My NCBI/My Bibliography function. The slide show is available in portable document format (PDF) and as a PowerPoint files on MLANET.

### **MLA in the News**

#### **Librarians' role in support of Quality Health Care recognized**

The *Journal of Healthcare Quality* (JHQ) recently interviewed Health Research and Educational Trust President and *JHQ* editor, Maulik S. Joshi. In the interview, Joshi addresses the Institute of Medicine's definition of health care quality and the role of librarians in improving health care. He also discusses the role of technology and the balance between clinical and applied research. Watch a video of the interview. Medical Librarianship Featured in AMA Health Care Careers E-newsletter.

The American Medical Association's (AMA's) Health Care Careers e-Letter for September 2010 featured medical librarianship as the profession of the month.

### **New on MLANET**

Hot Quotes has been updated through summer 2010. Hot Quotes is a list of pro-library and pro-librarian quotes. These quotes and citations can help you defend and promote your library's value.

### **Publications**

The July issue of the *Journal of the Medical Library Association* is now online at PubMed Central. The September issue of *MLA News* is also now online.

### **Join MLA on Facebook**

Visit MLA's page on Facebook to connect with colleagues and share information. Click the “Discussions” tab to add a link to your Facebook page.

## Publications and new products

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**Giovanna F. Miranda**

Scientific Information & Library Services  
Sanofi-Aventis, Milan, Italy  
Contact: giovanna.miranda@sanofi-aventis.com

Dear Colleagues,

With the cuts of the library budget, establishing “Value and ROI” has become a subject even more under scrutiny. Springer has published two white papers designed to help libraries determine return on investment (ROI) and assess usage measurements, and Elsevier has funded a study conducted by eight academic libraries in USA. Also scientists are worried about how library cuts will affect research and are putting pressure on their administration to increase resources. Moreover the University of California and Nature Publishing Group met to discuss the organization of current licensing challenges and the larger issues of scholarly communication sustainability. The two organizations have agreed to work together in the coming months to address their mutual short- and long-term challenges, including an exploration of potential new approaches and evolving publishing models.

The British library has released a report asking if there is a need to redefine copyright in the digital age: “copyright is a help or a hindrance?”

Hard times for authors and journals regarding the plagiarism policy. Eighty three publishers, including Elsevier and Springer, are set to roll out software across their journals that will scan submitted papers for identical or paraphrased chunks of text that appear in previously published articles (Nature 2010;466:167).

**Giovanna F. Miranda**

### Journal issues

Since the *JEAHIL* of August 2010, the following journal issue of *Health Information and Libraries Journal* has been received:

#### Volume 27 Issue 3

**Grant MJ. Key words and their role in information retrieval. Editorial.** p. 173-175

The Health Information and Libraries Journal (HILJ) has recently updated and expanded the HILJ keyword list. Based on the content of reviews and original articles published in HILJ over the past 4 years, the keyword list will be used by submitting authors to represent the content of the manuscripts and enable more accurate matching of manuscript to HILJ referees.

**Golder S, Loke YK. Sources of information on adverse effects: a systematic review.** p. 176-109.

The aim of this study was to identify and summarize studies that have evaluated sources of information on adverse effects.

**Addison J, Glover SW, Thornton C. The impact of information skills training on independent literature searching activity and requests for mediated literature searches.** p. 191-197.

This paper analyses the impact of two services routinely offered by the NHS library: mediated searches and

## Publications and new products

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information skills training sessions, on the amount of literature searching demonstrated by users of hospital-based library services in the north-west of England.

**Booth A, Beecroft C. The SPECTRAL project: a training needs analysis for providers of clinical question answering services.** p. 198-207.

The purpose of the paper was to characterise the training needs of those providing clinical question answering services.

**Peterson-Clark G, Aslani P, Williams KA. Pharmacists' online information literacy: an assessment of their use of Internet-based medicines information.** p. 208-216.

The objectives of this study was to develop and use a research instrument to measure pharmacists' Internet knowledge, search skills, evaluation of and opinions about using Internet based medicines information.

**San José Montano B, Carretero RG, Entrecanales MV, Pozuelo, PM. Integrating the hospital library with patient care, teaching and research: model and Web 2.0 tools to create a social and collaborative community of clinical research in a hospital setting.** p. 217-226.

The aim of this paper was to gather a community of researchers involved in the development of a network of learning and investigation resources in a hospital setting.

**Radut DS, Sanz-Valero J. Developing and testing of search filters for the new European Union Member States' research.** p. 227-234.

The aim of this study was to develop and apply geographical filters for new Member States of the EU after the 2004 and 2007 enlargement, and to determine their scientific output characteristics after 2000, globally and in the field of PH.

**Kim S, Lamkin S, Duncan P. Caption-based topical descriptors for microscopic images as published in academic papers.** p. 235-243.

The objective of this study was to assess caption-based topical descriptors for microscopic images of breast neoplasm, as published in academic papers retrieved through the PubMed Central database.

### Books review

**Fundamentals of library supervision.** 2<sup>nd</sup> Edition. Eds. J. Giesecke and B. McNeil. American Library Association, Chicago, IL, 2010; ISBN-13: 978-0-8389-1016-0, \$70.00 soft cover, 189 p. This revised edition focuses on daily real-world practices including teamwork dynamics, policies and the legal environment, training, budget, project and career management and many other topics.

**Introduction to modern information retrieval.** 3<sup>rd</sup> Edition. Ed. G. G. Chowdhury.

Facet Publishing, London, UK, 2010; ISBN: 978-1-85604-694-7, £44.95 (£35.96 to CILIP members) paperback, 598 p. The book has been thoroughly updated to incorporate major changes in the field since the second edition in 2004. It covers the whole spectrum of information storage and retrieval including database technology, subject analysis and representation, automatic indexing and file organization, vocabulary control, abstracts and indexing, searching and retrieval, information seeking and retrieval models, user interfaces, and many other topics.

### Papers review

**University investment in the library, Phase II: an international study of the library's value to the grants process.**

C. Tenopir et al. Center for Information and Communication Studies  
University of Tennessee.

<http://libraryconnect.elsevier.com/whitepapers/roi2/2010-06-whitepaper-roi2.pdf>

**Library cuts threaten research.**

Scudellari M. The Scientist 28th September 2010.

<http://www.the-scientist.com/news/display/57728/>

**The 'big deal' approach to acquiring e-books: a usage-based study.**

Bucknell T. *The Journal for the Serials Community* 2010;23(2):126

**Journal set up plagiarism policy.**

Butler D. *Nature* 2010;466:167

**Free journals grow amid ongoing debate.**

Kaiser J. *Science* 2010;329:896

**Driving UK research. Is copyright a help or a hindrance? A perspective from the research community.**

<http://www.bl.uk/ip/pdf/drivingukresearch.pdf>

**Inadequate post-publication review of medical research.**

Schriger DL, Altman D G *BMJ* 2010; 341:c3803.

**A review of online evidence-based practice point-of-care information summary providers.**

Banzi R, Liberati A, Moschetti I, Tagliabue L, Moja LJ *Med Internet Res* 2010;12(3):e26

<http://www.jmir.org/2010/3/e26/>

**An easy way to boost a paper's citations.**

Corbyn Z. *Nature* 13 August 2010; <http://www.nature.com/news/2010/100813/full/news.2010.406.html>

**News**

**LiquidPublication** is an EU-financed research project which seeks to revolutionise how scientists share their work and evaluate the contributions of their peers. Scientists spend too much of their time publishing papers and ploughing through the mountains of papers produced by their colleagues, and not enough time doing science. This project advocates replacing papers and peer reviews with a new process inspired by the social Web.

<http://cordis.europa.eu/ictresults/index.cfm?section=news&tpl=article&BrowsingType=Features&ID=91404>

<http://project.liquidpub.org>

**New records for Corexit 9500, Corexit 9527, and Crude Oil added to the Hazardous Substances Data Bank (HSDB).**

In response to information inquiries following the 2010 Deep Water Horizon oil spill, the HSDB development team along with members of the Scientific Review Panel (SRP) began compiling and reviewing data to create records for crude oil, Corexit 9500 and Corexit 9527. Although many dispersants exist, the two selected were most widely used during recent oil cleanup efforts in the U.S. Gulf, and are on the U.S. Environmental Protection Agency (EPA) list of authorized dispersants for use on the National Contingency Plan (NCP) Product Schedule. The records contain data on human health effects, animal toxicity studies, environmental fate and exposure, hazard information and more.

<http://sis.nlm.nih.gov/news.html>

**Statement from the University of California and Nature Publishing Group.** Representatives from the University of California and Nature Publishing Group met on August 17, 2010 to discuss the organization of current licensing challenges and the larger issues of scholarly communication sustainability. The two organizations have agreed to work together in the coming months to address their mutual short- and long-term challenges, including an exploration of potential new approaches and evolving publishing models. They are aware that many in the library, publishing, and academic communities are interested in the outcome of these discussions, and they will provide further updates on the progress.

[http://osc.universityofcalifornia.edu/npg/statement\\_092510.html](http://osc.universityofcalifornia.edu/npg/statement_092510.html)

**The Lancet.** To track the dynamic changes in health and health care in China and to encourage integration of the top-quality work being done in China with global health sciences, starting in 2011, The Lancet plan to publish a special issue about China annually.

*Lancet*, 2010, 376, 217

## Publications and new products

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### Information sources... web based

**Crude Oil Spills and Health.** The National Library of Medicine has created the Disaster Information Management Research Center (<http://disasterinfo.nlm.nih.gov>) to help with national emergency preparedness and response efforts. Recently another topic has been added: the Crude Oil Spills and Health. <http://disasterinfo.nlm.nih.gov/dimrc/oilspills.html#a2>

**NowRelevant.com** is the link to The Internet Time Machine's backend search engine that finds information about a subject for the past 14 days. It monitors millions of sources and feeds and includes the latest running media information from blogs, news resources etc. Contemporary Search Engines including Google, Yahoo!, AskJeeves and BING. <http://www.nowrelevant.com/nrbeta>

**Sci-Vox.** "Scientific Voice" is an up-to-date, current news source providing users with the latest science stories from around the world. The main aim of Sci-Vox is to help connect professionals within the science community who want to share current and breaking news and their thoughts on key items of interest for the community. The site is open to everyone. <http://www.sci-vox.com>

### News from publishers

**Springer** has published two white papers designed to help libraries determine Return on Investment (ROI) and assess usage measurements. The first paper, Usage Measurements for Digital Content discusses the complexity in measuring usage of electronic assets and looks closely at some of the emerging methods for evaluating value and the usefulness of electronic library resources. Establishing Value and ROI: Investing in STM e-journals and e-books examines various approaches to measuring ROI and the metrics that Libraries should consider when making decisions about renewals or determining specific value measures such as time and cost saved. The surveys for this paper were conducted with respondents from 3 large corporate libraries and one government library, providing a perspective from a non-academic viewpoint. Both papers can be downloaded from the Library Resources section of Springer's website. As part of its acquisition of the 2010 Springer e-book collections, University of Liverpool Library agreed to partner with Springer to study how e-books were being used and received, through a three-part project: analysis of usage reports, an extensive online user survey, and through focus groups (T. Bucknell The 'big deal' approach to acquiring ebooks: a usage-based study). <http://www.springer.com>

**Adis.** All content published in **Drugs in R&D**, an international, peer reviewed, online only journal, from 2010 onwards is open access and is freely available for anyone to access and use according to the terms of this Creative Commons Public License. The aim of Drugs in R&D is to provide timely information emerging drug classes and new treatments for specific disorders. Original research and reviews from all phases of clinical development are included, with a strong link to clinical practice. <http://adisonline.com/drugsrd/>

**Ovid**, part of Wolters Kluwer Health, announced that it has expanded its publishing relationship with Wiley-Blackwell to add ebooks and ebook collections in medicine, nursing, and behavioral sciences to the Wiley-Blackwell full-text offerings that are currently available through OvidSP. [http://www.ovid.com/site/about/press\\_release\\_080510\\_WB.jsp?top=42&mid=52](http://www.ovid.com/site/about/press_release_080510_WB.jsp?top=42&mid=52)

**John Wiley & Sons**, the scientific, technical and medical (STM) journals and scholarly books publisher has launched Wiley Online Library, the digital resource that will connect the global scholarly community to one of the world's most extensive multidisciplinary collections of online resources. <http://eu.wiley.com/WileyCDA/PressRelease/pressReleaseId-79857.html>

## Forthcoming events

**28 October 2010, London, UK**

**Cilip's Digital Information Conference 2010**

For further information: <http://www.cilip.org.uk/digitalinfo2010>

**6-8 November 2010, St. Gallen, Switzerland**

**8th International Conference on the Book.**

For further information: <http://booksandpublishing.com/conference-2010>

**8-10 November 2010, Seville, Spain**

**Pharma-Bio-Med 2010**

For further information: <http://www.pharma-bio-med.com/>

**3-5 November 2010 Montréal, Canada**

**Congrès des milieux documentaires du Québec**

**Imaginer de nouveaux partenariats**

For further information: <https://www.milieuxdoc.ca/congres-milieux-documentaire-coporatif.php?id=7>

**10-11 November 2010, Nairobi, Kenya**

**Open access Africa**

For further information: [events@biomedcentral.com](mailto:events@biomedcentral.com)

**30 November-2 December 2010, London UK**

**Online Information 2010**

For further information: <http://www.online-information.co.uk/index.html>

**13-14 December 2010, Cologne, Germany**

**Expert Conference on "Open Access and Open Data"**

For further information: [www.oaod2010.de](http://www.oaod2010.de)

**11-13 January 2011, Kolkata, India**

**ICDLM**

**International Conference on Digital Library Management**

**Extending Benefits of Modern Technology to Public, Academic and Special Libraries**

For further information: <http://www.teriin.org/events/icdlm/>

**21-23 March, 2011, Washington DC, USA**

**Computers in Libraries 2011**

For further information: <http://www.infotoday.com/CIL2011/>

**17-20 April, 2011, Trento, Italy**

**ACM International Conference on Multimedia Retrieval (ICMR 2011)**

For further information: <http://www.icmr2011.org/>

## Council Elections for 2011-2014

The EAHIL Nomination Committee comprising Patricia Flor (North); Margarida Meira (South); Ronald Van Dieen (West) and Sally Wood-Lamont, Chair (East) has been in touch with representatives from each country in order to facilitate the nomination of new EAHIL Councillors for the period 2011-2014. There were three categories to this election:

1. Councillors who had served only their first term (2007-2010) and were therefore eligible to serve a second term (2011-2014);
2. Councillors who had served both terms and were therefore ineligible to stand again. In this case new candidates were sought for in the respective countries;
3. Councillors who were standing down for specific reasons.

In category 1 the Nomination Committee got in touch with each individual and asked them if they were willing to stay on. In the table below these are marked “**agreed to continue**”.

In category 2 and 3 the Nomination Committee made contact with EAHIL members in the respective countries and asked them to choose candidates to stand in the election. If there was only one candidate put forward by the country or exactly the number of councillors required, then these were automatically nominated and are marked “**nominated**” in the table below.

In the case of Spain and Sweden more candidates than places were nominated (3 and 5 respectively) and therefore an election will take place for these 8 EAHIL members. Some information about each of the candidates follows in the next pages.

The candidates for Spain are:

- Veronica Quillis
- Mar Gonzalez

And for Sweden:

- Colm Doyle
- Sofia Perner
- Petra Wallgren Bjork
- Eva Sofia Svensson
- Janet Wamby

The period of election will be online at <http://www.eahil.net> from the 1-30<sup>th</sup> November 2010. To be able to participate in the Council election, please make sure that you have your userid and password for the membership database.

As you will see there are still some vacancies in other countries but as there was no response from these countries until the 5 October the places will remain vacant until the next election.

I would like to thank Margarida, Patricia and Ronald for their hard work in the last six weeks.

**Sally Wood-Lamont**  
(Chair, Nomination Committee)

## EAHIL Council Elections

### Councillors elected for the period 2011-2014

No. of Councillors	To elect for 2011-2014	Council member	Country	Vacancies/candidates in Council elections 2010
1	1	<b>Helmut Dollfuss</b>	<b>Austria</b>	<b>Nominated</b>
2	2	<b>Vinciane de Bergeyck</b> 2007-2010 1 <sup>st</sup> term	<b>Belgium</b>	<b>Agreed to continue</b>
		Vacancy	<b>Belgium</b>	
2	2	<b>Hanne Christensen</b> 2007-2010 1 <sup>st</sup> term	<b>Denmark</b>	<b>Agreed to continue</b>
		Vacancy	<b>Denmark</b>	
3	1	<b>Katri Larmo</b> 2007-2010 1 <sup>st</sup> term	<b>Finland</b>	<b>Agreed to continue</b>
		<b>Jouni Leinonen</b> 2007-2010 1 <sup>st</sup> term	<b>Finland</b>	<b>Agreed to continue</b>
		<b>Liikala Minna</b>	<b>Finland</b>	<b>Nominated</b>
3	2	<b>Guillemette Utard-Wlerick</b> 2007-2010 1 <sup>st</sup> term	<b>France</b>	<b>Agreed to continue</b>
		<b>Hélène Vaillant</b> 2007-2010 1 <sup>st</sup> term	<b>France</b>	<b>Agreed to continue</b>
2	2	<b>Oliver Obst</b> 2007-2010 1 <sup>st</sup> term	<b>Germany</b>	<b>Agreed to continue</b>
		Vacancy	<b>Germany</b>	
1	1	(vacancy)	<b>Iceland</b>	
3	2	<b>Paul Murphy</b>	<b>Ireland</b>	<b>Nominated</b>
		<b>Anne M. Obyrne</b> 2007-2010 1 <sup>st</sup> term	<b>Ireland</b>	<b>Agreed to continue</b>
1	1	<b>Maurella della Seta</b>	<b>Italy</b>	<b>Nominated</b>
	1	<b>Velta Poznaka</b> 2007-2010 1 <sup>st</sup> term	<b>Latvia</b>	<b>Agreed to continue</b>
1	1	<b>Jurate Stukiene</b> 2007-2010 1 <sup>st</sup> term	<b>Lithuania</b>	<b>Agreed to continue</b>
1	1	<b>Silvia Ciubrei</b> 2007-2010 1 <sup>st</sup> term	<b>Moldavia</b>	<b>Agreed to continue</b>
3	1	<b>Ronald van Dieën</b> 2007-2010 1 <sup>st</sup> term	<b>Netherlands</b>	<b>Agreed to continue</b>
3	3	<b>Regina Kufner Lein</b>	<b>Norway</b>	<b>Nominated</b>
		<b>Liv Vikan</b>	<b>Norway</b>	<b>Nominated</b>

## EAHIL Council Elections

No. of Councillors	To elect for 2011-2014	Council member	Country	Vacancies/candidates in Council elections 2008
		<b>Hanne Dybvik</b>	<b>Norway</b>	<b>Nominated</b>
<b>2</b>	<b>1</b>	<b>Silvia Lopez</b>	<b>Portugal</b>	<b>Nominated</b>
<b>1</b>	<b>1</b>	<b>Ioana Robu</b> 2007-2010 1 <sup>st</sup> term	<b>Romania</b>	<b>Agreed to continue</b>
		<b>Viorica Scutariu</b> 2007-2010 1 <sup>st</sup> term	<b>Romania</b>	<b>Agreed to continue</b>
<b>1</b>	<b>1</b>	<b>Larisa Zhmykhova</b> 2007-2010 1 <sup>st</sup> term	<b>Russian Federation</b>	<b>Agreed to continue</b>
<b>1</b>	<b>1</b>	Vacancy	<b>Serbia</b>	
<b>1</b>	<b>1</b>	Vacancy	<b>Slovak Republic</b>	
<b>1</b>	<b>1</b>	<b>Matjaz Musek</b> 2007-2010 1 <sup>st</sup> term	<b>Slovenia</b>	<b>Agreed to continue</b>
<b>2</b>	<b>2</b>	<b>Juan de la Camara</b> 2007-2010 1 <sup>st</sup> term	<b>Spain</b>	<b>Agreed to continue</b>
<b>1</b>	<b>1</b>	<b>Gussun Gunes</b> 2007-2010 1 <sup>st</sup> term	<b>Turkey</b>	<b>Agreed to continue</b>
<b>3</b>	<b>3</b>	<b>Janet Harrison</b>	<b>UK</b>	<b>Nominated</b>
		<b>Carol Lefebvre</b> 2007-2010 1 <sup>st</sup> term	<b>UK</b>	<b>Agreed to continue</b>
		<b>Michelle Wake</b> 2007-2010 1 <sup>st</sup> term	<b>UK</b>	<b>Agreed to continue</b>

## Vote now for your EAHIL Councillors

### SPAIN



**Veronica Juan Quillis** is Director of the Andalusian Public Health System Virtual Library. She has been working in medical libraries since 1986, when she began working in the Medicine Faculty of the University of Alicante. From 1994 to 2005 she worked as the Director of the Technical School Library (University of Alicante). In 2005 she was designated as the Director of the Andalusian Public Health System Virtual Library Director. Veronica intends to be a representative of a Health Virtual Library Model for one of the 17 Spanish Regions, with 95.000 users.



**Maria del Mar Gonzalez Cantalejo** is Chief Librarian at the medical library of the Miguel Servet University Hospital, in Zaragoza, Spain where she has been working for five years. As a candidate for the EAHIL Council she would like to contribute to the knowledge of this professional association, promoting its work, news and cooperation plans.

### SWEDEN



**Petra Wallgreen Bjork** is manager of the Medical Library at Danderyd Hospital, an emergency hospital in the northern area of Stockholm. Before that she was employed at Karolinska Institute University Library for almost 10 years. Petra would like to be a Member of the Council because it is important to work to make our profession better, stronger and more professional. As a member of the EAHIL Council, she would hope to make a difference to how the workshops and conference are planned, helping to reach out to old and new members and pointing out the importance of working together to become more educated and experienced. One of the main tasks EAHIL has is to promote training, education and mobility of librarians in our area of expertise; health and medicine. Petra believes that EAHIL can do even more in this area and could put to good use her experience from other library associations.



**Colm Doyle** is the Library and ICT manager at the Faculty of Medicine, Lund University since 2003. Prior to working for the medical faculty, he worked as project manager and later Head of Department for the Digital Library development department at Lund University. He has been working with a strong service development and integration profile within the Hospital/Faculty and Library/ICT/Pedagogy areas for a number of years now and he would like to contribute to discussions on development trends and their implications with colleagues on a European level.



**Sofia Perner** is a Medical Librarian at the Umeå University Library and has worked in medical libraries for 4 years. She sees working as an EAHIL Councillor as an important part of her professional role to participate in a European organization for libraries. New contacts can be made and one can gain a lot of experience from other librarians that can be taken home with you.



**Eva Sofia Svensson** is a senior librarian and Head of the Health Sciences Library, a branch library at Linköping University library where she has been since 1983. "EAHIL has played an important role in my professional life as a medical librarian for almost 30 years. I have attended conferences both as a delegate and a presenter. I would like to collaborate, contribute and participate more in the development of our profession and one way of doing that could be as a member of the EAHIL Council".



**Janet Wamby** has been working at the Biomedical Library, Gothenburg University Library since 2008 and is currently team leader for the Education Team there. She is very interested in international work and networking, both within Europe and worldwide. In the team she is busy at the moment with the integration of information literacy in various university programs at the institutional level. This also includes learning objects and other forms of technology to improve both pedagogy and collegial development areas.



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