MEDICAL LIBRARY ASSOCIATION

ORAL HISTORY COMMITTEE

INTERVIEW

WITH

CARLA J. FUNK, CAE (Ret.), Hon. FCLIP

Interview conducted by Ruth Holst, AHIP, FMLA

September 23-24, 2015

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Consent Form for Oral History Interview (2002 version)

This confirms my understanding and agreement with the Medical Library Association (MLA) concerning my participation in an oral history interview as a part of MLA's Oral History Program.

1. I agree to be interviewed by **Ruth Holst** September 23-24, 2015 . I understand that my interview on will be recorded and that a transcript and edited version of my interview will later be created. I understand that I will be given an opportunity to review and edit the edited transcript before its release.

2. I hereby grant and assign all right, title, and interest to any and all recordings and transcripts of my interview including copyright [and all rights subsumed thereunder] to MLA. I will be given a copy of the edited transcript for my personal use. I understand that the transfer of these rights to MLA confers no obligations on MLA to promote, market, or otherwise make publicly available copies of the interview.

3. One or more edited and/or condensed versions of the interview, approved by me, may be disseminated by MLA, as it deems appropriate.

4. I understand that the original, unedited recording of my interview and the original unedited transcript will be maintained in the MLA archives at the National Library of Medicine, or at such other place as MLA may reasonably designate, and may be made available to researchers who have demonstrated that they have appropriate qualifications. I further understand that the original unedited recording and/or the original unedited transcript will be made available with the following restrictions (Check one):

X No restrictions

The following specified portions of the interview will not be made available to anyone until

Carla J. Funk Name of Interviewee

Date 9-24-15

Accepted by: MLA EXECUTIVE DIRECTOR

Ruth Holst Name of MLA Interviewer(s) Fuch Hales 9-24-15 2/26/16 Signature

Date

Date



Biographical Statement

Carla J. Funk, CAE (Ret.), Hon. FCLIP, made lasting contributions to the Medical Library Association (MLA) during her twenty-three years as executive director of the organization. In addition to managing the association's headquarters, including an eighteen-member staff, she kept a close eye on issues facing the profession, ensured that the association adapted to changes and trends in the industry, and provided strong and steady support to the priorities and initiatives of MLA presidents, the Board of Directors, and association members. With both an MLS and an MBA, Funk became a Certified Association Executive (CAE) as she sought to be the best possible association manager.

A 2004 survey by the American Library Association's *Library Journal* rated MLA as the most collegial large library organization. This rating was due in no small way to Funk's management, expertise, and commitment to the success of those in the health sciences information profession. Her commitment to exemplary member service was reflected in the staff she hired and the high level of member satisfaction with MLA programs and their active participation in the association. Funk quickly became an indispensable and trusted advisor and colleague to incoming presidents and board members, and she was admired for the depth of her knowledge about all aspects of association activities and thoughtful positioning in the library world.

She maintained strong ties over the years with the National Library of Medicine (NLM). She was co-principal investigator for the MLA Health Information Literacy Research Project under contract with the NLM. Funk aided MLA's recruitment efforts as principal investigator for NLM grants to expand minority recruitment and to participate in the Association of Research Libraries (ARL) diversity leadership program. From 2005-2006, Funk served on NLM's Long Range Planning Panel and the Search Committee for Associate Director for Library Operations.

As part of her exemplary forty-seven years of library and association professional experience, she served as president of the Illinois Library Association, presented at library conferences, and authored numerous publications. In 2005, she was co-recipient of the MLA President's Award, which recognized her contributions in the area of scholarly publishing advocacy initiatives. In 2008, Kent A. Smith, FMLA, established the Carla J. Funk Governmental Relations Award in honor of her leadership in governmental relations. In the same year, the 13,000 member U.K. Chartered Institute of Library and Information Professionals (CILIP) took the rare step of conferring honorary fellowship on an American for her contributions to modernizing CILIP governance and other service. In 2009, she was awarded an honorary membership in MLA. Funk believed in developing and maintaining partnerships with other library associations. Her work ensured that MLA's voice is heard on national and international levels. She was very involved with the International Congress on Medical Librarianship as well as the International Federation of Library Associations and Institutions. She fostered communication, bilateral agreements, and development of new programs across international borders, including helping to establish MLA's "Librarians without Borders®" program.

Medical Library Association Interview with Carla J. Funk

[MP3 file 150923_003]

RUTH HOLST: My name is Ruth Holst and I am here with Carla Funk on this first day of fall in her beautiful condo overlooking Lake Michigan in the Lincoln Park neighborhood of Chicago. Today is Wednesday, September 23, 2015, and it's my distinct honor to conduct the Medical Library Association's oral history interview of Carla Funk, who served as the executive director of the Medical Library Association from 1992 until her retirement in January of this year.

Before coming to MLA, Carla worked in the public library arena from 1973 to 1980, then as a library system consultant from 1980 to 1983, and in three leadership positions for the American Medical Association from 1983 to 1992. We will get to more details about those positions shortly.

I have been a member of the Medical Library Association for more than forty years and feel privileged to be conducting this special interview—special because Carla's connection to MLA is different from the majority of MLA's oral history interviewees, who were interviewed as members of the association, while Carla brings the unique perspective of someone who has served as the association's chief executive officer.

Carla, welcome to the interview. Would you like to say anything before we get started with the questions?

CARLA FUNK: Thank you, Ruth, very much. I have enjoyed going over your very excellent questions. It brought back a lot of memories for me and I had to refresh my memory on a lot of things, because in spite of the fact that I've only been retired a few months, I have forgotten most everything already [laughter]. I am delighted that you're doing this oral history as one of our very honored and revered members, so I think we're going to have a lot of fun today.

H: I think so, too.

[MP3 file 150923_004]

H: Carla, tell me about growing up in Ohio and what led you to Chicago and to Northwestern University.

F: I grew up in a suburb of Cleveland, a very small suburb, in the '50s and '60s, and it was really a cottage community. It was right along Lake Erie. I started in third grade and graduated high school from there. My high school class was very small. We had about a hundred people in my graduating class. It was, I think, typical small-town America. My parents were very active in the community. My dad was president of the school board. All kinds of involvement.

H: How did you pick Northwestern?

F: As my father suggested, we got to visit three colleges. That's how we did it. I picked Carleton College up in Minnesota, Wooster in Ohio because I'm an Ohio person, and Northwestern. Because my high school was so small, I think I was attracted to Northwestern because it was larger and there was a lot going on, and it was just so different from the environment that I had grown up in. I also picked it partly because I was going to get away from home. Of course, as soon as I picked it, my father announced that he was being transferred from Cleveland to Chicago for his job [laughter]. So they followed me here, but it was okay.

H: So much for getting away from your family.

F: Exactly.

H: So you went to Northwestern. You selected psychology for your degree. What was it like being a small-town girl going to Northwestern?

F: I think it was a very good experience for me. It was very social. Northwestern was, and still is, a very social university. I joined a sorority. One of the high school cheerleaders from my small class also went to Northwestern and she was in my sorority. That was interesting because I was very nerdy in school. It was a very interesting situation, but fun. And of course it was very different from high school. At first my academics suffered because I was socializing and going out. At Northwestern at that time—they probably still do—there are parties three nights a week: Wednesdays, Fridays, and Saturdays. It was really lively. But after I got my grades after the first quarter, my dad told me, "They better get better or you're not going back." We had a very tough family.

H: But you finished it in four years.

F: I did. Oh, yes. No, the grades weren't that bad. He was just hysterical. But it all worked. I majored in psychology because I always think people are interesting. I really did not have career aspirations. I was not raised that way. I was raised to go to college and meet somebody and get married, and that's exactly what I did. But more on that later [laughter].

H: So, then, what got you into library school and the field of librarianship?

F: My ex-husband went to Indiana University to get his master's degree in mathematics. As the wife, I followed him down there and got a job as a student wife for thirty-five cents an hour working in the university library.

H: I have a feeling, Carla, this is the last time you followed a man anywhere.

F: [Laughter] No, not totally. I was the secretary in the order department [in the library] at Indiana University. I met a lot of great people. I helped them move from the old library to the new library, and that was a lot of fun. I loved that. And lo and behold, as I'm working away, I learn Indiana University has a library school. I thought, "Oh, this would be good. I like this." I came in the fall of '68 and I think I started library school probably in the winter/spring of '69. That was a pretty fast decision. I got an assistantship in the library school library and it was great. This was the Vietnam era and my ex-husband had to go into the service, active duty, for about six months. Then, of course, being who I am, I left Indiana to go with him. More on this later.

H: And where did you live?

F: Oh, we lived for about three or four months in Aberdeen, Maryland—actually, Havre De Grace is where we lived—because he was at Aberdeen Proving Ground. Then we came back to Chicago because he only had to serve active for six months and he got a job in Chicago.

H: Did you have your library degree at that point?

F: No, because I went with him. Not to sound terrible, but it's true. I didn't regret that, actually.

H: How did you get back to finish the degree?

F: Well...let's see. How can I say this gracefully? I did get a job when I came back. I got a job working as a paraprofessional in a high school library first. I helped them move their library, which was in Lake Forest. They built a junior high and we moved the library over there. Then I went to work as a paraprofessional in technical services in a public library. Things in my personal life weren't going so well, and I knew that I had five years to finish my library degree once I started it. I looked at the clock and I thought, "Ah, I better go back." So I went to what was Rosary College and now is Dominican University and took a couple extra courses there and then went back to Indiana University to finish. It was the summer of 1973 when I finished my degree.

H: Oh, the degree is from Indiana.

F: It is.

H: Now, I know that later on you made a decision to get your MBA, but that was while you were working at the American Medical Association.

F: No, I made my decision to get my MBA earlier. I pondered between going to law school, because I had come from a family full of lawyers, or getting an MBA. I made that decision when I was a public library consultant for the Suburban Library System in Illinois. I decided on the MBA, got admitted to the University of Chicago, and began my commute twice a week down to Chicago in the evening, not to Hyde Park. I went to what

they called the 190 Program in Chicago. I began commuting twice a week, taking my courses, driving into the city, and then driving up to Gurnee. I'm glad gas was cheap.

H: And the MBA was finished in what year?

F: In 1985.

H: June of 1985.

F: Yes. I was doing this job, which, I enjoyed—being a public library consultant at Suburban Library System. I also handled job ads. A job ad came through in the midst of all this commuting and everything for a technical services person at the American Medical Association library. It was downtown, and I thought, "Ah." The salary was better, I think, than what I was making. I applied for that job and got it.

H: So that was how you made the switch from public libraries and consulting over to [the health sciences]. Let's step back a minute, though, because I would also like to ask you about your public library experience. Even though it's a different type of library, it would be kind of interesting in terms of where you went later on with your medical library career. Tell us a little bit about working in a public library. Let's start with your first public library.

F: I worked in a library in Libertyville, Illinois, as head of technical services. It was a paraprofessional job because I didn't have my degree. I didn't work there very long— probably about a year or so, something like that. I took a leave and went back to finish my library degree. During that leave, Northbrook Public Library interviewed me and I went for my first professional job and started working there in technical services. That was in the '70s. In that library I moved from technical services to adult services and started doing reference and that kind of thing. I transitioned within the library. I did that for several years.

H: In 1977 it looks like you switched to a different library in a different position.

F: Right. In '77 I became the library director at a small public library in Gurnee, Illinois. It was a district library called Warren-Newport Public Library District. I moved up there and did that job for about three years and really enjoyed it. Part of that job was getting a referendum passed and building a new library, which is what we did. It was really very exciting. I'm often happy because my father was still living at that time and he was, as I say, very active in communities that he moved into. I was able to take him to the site where we were going to build the new library, and he got to see it and was very proud that the referendum had passed because he had been very engaged in these things. That was pretty neat.

H: It strikes me, as I read through your resume, that here you were fairly early on already the director of a public library. You moved into a leadership role pretty early on. Do you

have any thoughts or insights about why you think you ended up being in a leadership position so early?

F: Probably because I like to be in control [laughter]. I'm a control freak. I do a good job, I think. It just keeps your mind going. I don't like to be bored. I like to have things constantly going on. I like to be constantly learning. You can tell that because I have multiple degrees, so I love the whole learning process. I think that's probably why.

H: What motivated you, then, to leave what seems like a nice job—a director position—to be a consultant for a... Was this a multi-type library system?

F: Yes, a multi-type library system, which Illinois still has. They still kind of have library systems but not in the same way. I don't know why I left, because I did enjoy that a lot. I don't know why I decided to move to Suburban Library System (SLS) because that was a long commute by car. I commuted 90 miles a day, which was crazy. But again, it was something different. I don't know why I did that other than that it was interesting and different. In Gurnee I was very involved in many ways, as all the library directors were, as a member in the North Suburban Library System. I got very familiar with system work and what the system did, and that was interesting, obviously, to me. I just made the decision to apply at Suburban and I got that job.

H: I think it just means you were meant to be in a world of multiple libraries.

F: Yes, and that was a great experience. I enjoyed that also.

H: Up to this point you were primarily working with public libraries, even though the multi-type got into more than that. What motivated you to make the transition to the American Medical Association library, which would have been more of what we call a special library?

F: As I said, part of my job at SLS was doing the job ads, and this one came through. I was doing this commute to downtown to get my MBA, driving from Burr Ridge, Illinois, down to the city and then driving up to Gurnee. It was the deadly triangle thing there, and I was doing it twice a week. I liked my job but I was getting tired. This ad came across and I thought, "Oh, I could get this job, hopefully, work downtown and be right there and take the train back and forth." These are not great, earth-shaking reasons. I'm a very practical person. I did apply for it and I got that job, only to find out after I got the job that AMA also provided tuition reimbursement, which was fabulous because I had gotten a loan to get the MBA, and that tuition reimbursement helped.

I met great people and some of the people are still my friends and your friends today. Karen Graves I met there. Ann Weller I met there. So it was great also from that standpoint.

H: Did you start the MBA before you went to AMA and then finished it at the AMA?

F: I did.

H: It's great that they had the tuition reimbursement.

F: Oh, yes.

H: That makes it so easy. Do you want to comment on the environment at the AMA? What was it like to work there? So many of us who've worked in hospital libraries and medical libraries hear things about the American Medical Association, but you were right there in the building. What was it like?

F: I would say that it is probably one of the best training grounds for association work that I have ever experienced. That was the positive. I had a couple of very excellent bosses who taught me how to work in that environment. You're in a medical environment. You're working with pretty intelligent people and there are certain expectations in what you do, even working in the library there. You might have had similar experiences yourself. I'll never forget the day we got the call from the surgeon in the operating room saying, "I saw something in this journal and I can't remember it. I'm in the middle of surgery. Can you go over and look this up for me and read to me what it says?" We had paper at that point.

H: This a surgeon who was a member of the Medical Library Association?

F: No, it was AMA. It didn't matter [where the surgeon worked.] We didn't ask about that.

H: So any member could call up the library at the AMA and get that kind of service?

F: That's right. I will never forget that. I thought, "Wow!" Public libraries are great, but you can only kick so many bad kids out of the public library before that gets a little old. Working at AMA was cool.

H: That sounds to me very similar to the experience I had in a hospital library, where you talk directly with doctors.

F: Exactly. Those were the positives. I also probably had the worst boss I've ever had in my life there. You know this from other people that you have talked to. That bad boss, in a positive way, got me involved in association work outside the library.

H: So that motivated you to move out of the library into another division of the AMA.

F: Exactly. I think what also helped was that during that time I was president of the Illinois Library Association. It was very interesting work to me—the association work and everything that you go through. We went through a lot. We changed the fiscal year and made a lot of other changes when I was president. Just trying to make members get

along and work things out was absolutely fascinating to me. So I had both the AMA positions and the ILA presidency going on together.

H: You were learning about dealing with membership issues in both your position at the AMA and also this professional library organization role that you were playing.

F: Right. I really never regretted leaving the AMA library. I think my next position at AMA was on the Women in Medicine project. They were trying to bring women physicians in at that point. I don't think there was any woman physician on the board of AMA right at that moment in time but it changed very shortly thereafter. And these female physicians were fabulous. I loved working with them; they were great. I also was responsible for the National Leadership Conference that gave me conference planning skills, and I worked with a small staff to put that together for a couple of years. Then I ended up being the director of medical student services, working with the medical students. We had a governing board and they were represented in the AMA House of Delegates. That whole experience of working in the House of Delegates meant working at their meetings, staying up all night writing reports that were going to be read the next day on the House floor. Often a doctor was sleeping in the lobby on the couch in the hotel waiting for your report, and you'd go wake him up and ask, "Okay, how does this sound?" It was quite an experience.

H: It sounds like a lot of what you were doing at the American Medical Association was preparing you to go into association work.

F: Little did I know it was, but I just enjoyed it because you learned. You were working with smart people. You learned how to operate in that environment, which is not easy. AMA is a little crazy sometimes [laughter]. It's a big organization.

H: With lots of members.

F: Yes.

H: Before we leave the AMA let me ask you: AMA is also a publisher as well as a professional association and an advocacy organization for doctors. What did you learn about the publishing business—or did you learn about the publishing business while you were there?

F: Well, Dr. George Lundberg, who was editor of JAMA—and the specialties were under him, too—worked right down the hall from me. The library was under him and AMA's library director reported to Dr. Lundberg. We would meet and talk about things occasionally. We also indexed—I was supervisor for the indexers of JAMA and all the specialty journals—and that was fascinating from the standpoint of meeting deadlines and the process of indexing so many items. He was getting JAMA translated at that point into a variety of languages—they were sending it over to Asia for the translations. They also started to think early on about digitizing it, but the technology wasn't there. They were mostly working with the translation. That was part of my career progress. I remember all the things that he was trying to do to make JAMA more accessible to a wider variety of people.

H: It occurs to me that George Lundberg was on the program for the Medical Library Association annual meeting in about 1991. That would have been just before you became the executive director.

F: Yes.

H: But that had nothing to do with you, though.

F: No, not at that point.

H: That's very interesting, because I remember we also had the editor of *British Medical Journal* [Steven P. Lock] on the program.

F: Oh, dear [laughter].

H: He and Dr. Lundberg were on a panel [for the John P. McGovern Award Lecture].

F: That's right.

H: I think that was the 1991 meeting, if I am not mistaken.

F: Oh, that's interesting.

H: So very, very interesting.

F: You also might have had the *New England Journal of Medicine*. That editor always liked to talk.

H: We might have. I know that [Arnold] Relman spoke at the MLA meeting at one point, but that might have been a different program [the 1985 McGovern lecturer].

F: I moved out of the library in 1987, and I went to work in all these other areas so I had different bosses and duties. The editor for one of the specialties sat right across the hall from me and we'd have a lot of discussions, such as about advertising sales. Dr. Lundberg had gotten himself into trouble with some ads in JAMA. I think they had some cigarette ads or something like that.

H: Oh, yes.

F: Oh, you remember?

H: Yes.

F: And I was working there then. So you learn from controversy, too. You're like, "Wait a minute."

H: Dr. Lundberg also did that big issue on boxing. I think he may have gotten into a little trouble for taking a very aggressive stand against the sport of boxing.

F: Yes, he got into trouble.

H: He was an interesting man.

F: Fascinating. He serves now on the board of the Friends of the National Library of Medicine, as do I, so I see him occasionally when he comes to those meetings. Dr. [Donald] Lindberg always says, "Oh, yes, I forgot you worked with him [laughter]."

H: It sounds like what you were doing at the AMA was sort of preparing you for your next step, which was to apply for the position at the Medical Library Association. How did you come to find out about that position, and were you consciously making a decision at that point to make a change in your career, or had you already fallen into the role of association executive? Was this a huge change, do you think?

F: No, I think because at that point I was director of the Medical Student Section, and that's like being the executive director of a mini-group. We had a little mini house of delegates and a governing board and ran a small meeting right before the big meeting always, as did the resident physicians. They had their own section—the residents did—and the young physicians. So there were at least three groups going. That was association work. You were preparing agenda books; you were getting meetings organized; passing resolutions; forwarding information from the students to the House of Delegates for action—all this kind of thing. A lot of policy work there. I did enjoy it.

Again, I cannot remember what my impetus was to apply for the MLA job. I will say, and probably people don't know this: Before I applied for MLA, though, I applied for the American Association of Law Libraries job. I did not get that, which worked out well. Had I gotten that, I probably wouldn't have come to MLA.

H: I'm delighted, actually, that you did not get that position.

F: Judy Genesen was the person who got it instead of me, and she had been very active in the Special Libraries Association. We had a great relationship. We did a lot when we were traveling for IFLA [International Federation of Library Associations and Institutions], exchanged ideas, and that sort of thing. That all worked out very well.

H: Were you contacted by a headhunter or did you find the ad?

F: I think I must have found the ad or found out about the ad. That I cannot remember either—how that all came to be. But obviously, since I applied for the other job first, I was thinking about that kind of change. And, yes, I think partly because I like to be in charge. I had the best boss I probably ever had, Bill Cohen, when I was working with medical students. He would look at something I'd written and would say, "No—boom, boom, boom!" He started crossing out everything. He said, "This is how you do it because if you want people to really hear what you're saying, this is way too wordy. You know the doctors are only going to read four bullet points, so get it down to that."

H: Isn't that great!

F: He was fabulous.

H: I had a boss like that in my life, too.

F: Oh, my gosh, he was great. I learned more in six months of working with him about what to do and what not to do than from almost anybody else in my career.

H: Did you have any idea or did it occur to you when you took the position at MLA that this would be your final career move or did you just see it as one more step?

F: No. I just thought it was interesting, and I would be working for a board. I've either been on boards or worked for boards almost my whole career, so this wasn't anything different. No, I didn't realize that I would be there so long and that would be the last job that I would have. I was changing jobs about every three years and then I was at AMA for over nine years. That was a little longer because I enjoyed it. I changed jobs within the AMA but stayed there because I just liked it.

Oh, and I also applied ... I almost forgot this one. I can't remember when I did this. A long time ago I applied for executive director of the American Library Association, too. I did not get that job either. I think it was one of ALA's female executive directors who got it instead of me, but I can't remember when I applied for that. So, yes, I was out there applying for various jobs.

H: It sounds like you were looking for an association executive kind of position.

F: Yes.

H: Usually when we interview people for the Medical Library Association histories, we are interviewing people who have been members of the Medical Library Association. But we're going to be taking a little bit different tack with your interview today because you're going to be talking about the Medical Library Association from your perspective as the executive director, and we'll be talking a little bit about your interaction with the members of the association.

What attracted you to the Medical Library Association? You had been working with a medical professional association. Apparently you did not have any reservations about going to work for a library association because it sounds like you had applied for several other jobs.

F: No, I had no reservations. It happened by accident, but I feel incredibly blessed that I ended up in librarianship. I never thought of being a librarian growing up. I think the first library I ever worked in was a summer job in the map library at Northwestern University, which I loved because you had all these treasure hunters and people coming in to find things. That was a riot; I loved that. I never really thought about a library in that way.

But I did like the medical aspect. I loved working for AMA because of the medical twist to it. I found that fascinating. As I said, the health people are usually very service oriented and very intelligent, which I also liked a lot. I found much the same qualities in the Medical Library Association and the membership. When I worked at AMA I did go to the meeting of the Midwest Chapter of MLA in Chicago so I knew a little about the association. I think I was a member of the Special Libraries Association at that time and not yet MLA because SLA was larger.

H: When you took the position as executive director of MLA what were your impressions of the association and what was going on?

F: I was very impressed by how organized things were, and I give Ray Naegele a lot credit for this. Ray was acting executive director after the person before me left. I followed Ray Palmer and he had been gone quite some time before I was hired, but everything was going along well and there was a structure in place. I started work the end of February and the annual meeting was to occur in May, but things were in excellent shape for that meeting.

H: Was Dick Lyders president at that time? I recall being on the search committee that hired you and seem to recall him being in the room, but I can't remember who succeeded him as president.

F: It was Jackie Bastille [who succeeded Lyders]. Lucretia W. McClure preceded Dick. Dick and Jackie were the first two presidents that I worked with. Dick was great and his wife was a librarian who attended ALA so he went to ALA with me for the first time. That was very fun because they used to have all the presidents and executive directors get together to talk, and he was very helpful in that way. Not that I hadn't been to ALA before, but not in the same way.

H: What were some of the major issues confronting either the MLA or the profession at that point?

F: I think there had been some financial issues with MLA, maybe a few years when they hadn't been doing so well for whatever reason. The hospital librarians were very angry about a lot of things. At my first annual meeting Dr. Lindberg and Herb White were on a program together. There was standing room only, and I was sitting on the floor to listen. It was 1992. I will never forget that. They were all angry at Dr. Lindberg because NLM had reached out directly to one of the medical groups.

H: Was this when NLM sent a letter out about Grateful Med and the ability to search the database? It went to hospital administrators and failed to mention the medical library at all. As a hospital librarian at the time, I was very aware this was a big issue among hospital librarians and there was a lot of discussion between 1992 and 1993.

F: Yes, that was part of my introduction to association issues. There were some other little things. I'm not one to come into an organization and get rid of people. I try to look at what's working, what isn't working, what needs to be done. I made some little changes at the beginning. For example, we got the Board [of Directors] meetings sorted out. The full board met twice a year face-to-face but the Executive Committee also met face-to-face once a year. I changed it so the Executive Committee didn't meet like that any longer, but always met prior to the board meeting. It's better to get everyone together when you can. I did other little tweaks at first until I learned where we were going. I did a lot of reading. We didn't have a website yet.

H: Yes, the Internet got going about 1995 so this would have been pre-Internet. I recall most librarians were using email at the time.

F: Yes, we were using LifeNet, which came from NASA, for our listservs. That preceded me. I take no credit; they were already doing that when I came.

H: Were there other challenges as you came in? I do recall that it seemed like the organization became more organized under your direction.

F: Yes, I'm a cataloger [laughter].

H: We had added the Section Council and the Chapter Council. That was in the mid-'80s. That was already in place.

F: That was before I came, right. One thing I did change was in annual reporting, job descriptions and other items we changed to make everything relate directly to the strategic plan. Everything started to relate directly to the strategic plan. That's how people were evaluated. We said, "This is what we want to have happen. What's your role in this?" There was a lot more direction like that.

H: I know I didn't come onto the board until 2001 and I remember being very impressed that what we did throughout the year was always linked to a section of the strategic plan. I always thought that was quite brilliant. I would say you get the credit for linking the goals and the objectives of the association to the strategic plan.

F: Yes, I do [laughter]. I think it just made it easier to see whether we were making any progress and what we may have to change. Really, the association did a pretty good job of that up until the time when we were having a little bit of financial difficulty —like everybody else was. But MLA had a reputation even then for excellent continuing education, lifelong learning, and the whole credentialing program, because we were the

only library association at that time that had certification and then it became a credential. I remember talking to the law library association executive director and they apparently had tried it and had gotten rid of it.

H: And had failed?

F: Yes, and I found that fascinating. People would ask me, "Why does MLA have this?" and I said, "I think one reason is because the people who our members work with, doctors, nurses and others, all have credentials."

H: I worked in a hospital and everyone in the hospital had a license or something for whatever profession they belonged to. I remember thinking that it made a lot of sense for the Medical Library Association to be providing us with a credential so that we could also talk about that when we were meeting with other professions in our institution.

You came in the early '90s and the Internet became the big thing. I recall this because I was in the middle of editing a book for the Medical Library Association, the *MLA Guide to Managing Health Care Libraries*. And we had to redo all of the chapters because it became obvious that the Internet was going to have an impact on everything. What was the impact of the Internet on a professional association such as the Medical Library Association?

F: The Internet, really, impacted almost my whole career at MLA. I went through and read all my annual reports just to refresh my memory for our conversation today. You probably remember in 1993 we named our website MLANET. We had a contest and it was at the Chicago meeting that the name MLANET was chosen. We launched the website in 1995. My simple-minded thinking was, "Oh, good, we'll get this website up. We'll put everything on it about the association. We'll get it done, and then there it will be." Ha!

H: I think we all had sort of a naive view that we could just simply take our written publications, toss them up on the web, and this was somehow going to work. I don't think any of us were quite prepared for the concept of having to totally rethink the way we did our publication programs and our education programs, etc.

F: It keeps changing all the time, too, as more technology arises, different ways that we can use it to the association's advantage. I think, of all the things in my career at MLA, the Internet had the largest impact. Every single year it influenced something about the way we did things. It influenced our budget to a certain extent, but we did it as cheaply as we could do it. We used a lot of free software—all that kind of thing. I will say also, as I look back on things, I almost forgot how helpful some of our members were. The Kansas academic health sciences library did our listservs for us for a while.

H: Kansas, meaning...?

F: ...where Bob Pisciotta was.

H: Oh, he was at the University of Kansas, Kansas City.

F: You're right. They helped for a while with our listservs. That was back in the early '90s. And I think MEDLIB-L, which we did not start but a member started for us, was hosted in...

H: New York somewhere. [Editor's note: MEDLIB-L was founded January 23, 1991, by Nancy Start and hosted at the University of Buffalo until operation was transferred to the University of Vermont in May 2007. Editorial responsibility for the content was transferred to MLA on August 16, 1995.]

F: Yes, New York. Vermont did it for a while after that. It started out in one place— Nancy Start was the librarian who began it. We were on the cutting edge. When I went to a meeting with other associations in 1995 or '96, I'll never forget the person who was doing the seminar asked us all, "Okay, everybody who has a website, raise your hand." Of a hundred people in that room, there were three of us who raised our hands. I think the members drove that because they were very interested and involved in technology. Their work environments were driving it. Even though our members always thought we were behind, with other associations we were always ahead.

H: Because you were an association of librarians.

F: Exactly. That influenced everything, and everything that we did we thought of in that way, the technology, the Internet, other technologies, too. It influenced CE, certainly.

H: Were there any other big things like the Internet that you think changed the association over the twenty-plus years that you were at MLA? Were there any other giant challenges?

F: I think—and we see this still now—it was the changing health care environment, which I wrote about every year in my environmental scan. As the environment changed so did the Internet but also the way that people were receiving health care. People might not be staying in a hospital so long.

H: The delivery of health care started to change in the '90s.

F: Yes, the delivery of health care. That affected our members because people thought maybe that the hospital was going to go away. I remember my dad, in the 1970s, was on some hospital boards because there were lots of hospitals being built, tons of them.

H: And the '70s was a big growth era for hospitals and consequently for hospital librarians.

F: Exactly. But when you started to get into the '90s and health care and its delivery was changing, hospitals began to eliminate libraries as well as other services and hospitals

began closing. That had a big impact and is still having an impact on the Medical Library Association, because we lost the hospital librarians as their jobs went away.

H: The mid-'90s was also the time when clinical pathways were being developed in hospitals. I was in a hospital and I was not only working in my library but working with the team in my hospital that was developing clinical pathways. I recall that being right around 1995. If it was going on in my hospital, it must have been going on in other hospitals around the country.

F: Right.

H: I think that was probably having an impact on many members.

F: I think that's the other big thing that we always were watching—what's changing, what's going on. Our big fights with the Joint Commission on Accreditation of Healthcare Organizations about whether they should require a hospital library—we fought and fought with them and managed to get an information resource requirement. I forget what they watered the sentence down to, and I don't know now if they even have anything at all about that. That being said, the Joint Commission had one of the best libraries. I'd always find this very ironic. We'd go to the Joint Commission for meetings and also meet with Jan Aleccia who was their librarian—we'd always go to their library. Now, they think they should have a great library.

H: But they didn't necessarily...

F: ...think that the hospitals needed this.

H: There was a time, I believe, when it was the Medicare rules that required hospitals to have a library. I think at one time there might have been a federal government rule that you had to have a medical library to get...

F: ...to get Medicare reimbursement.

H: And that was taken away. I think after that it was very hard for hospital librarians to convince the Joint Commission. They took the "library" word out of their requirements and I recall that being a huge issue for hospital librarians. That was probably in the '90s.

F: Yes, it was, and we fought that. We met with them. We did everything. It hung on for a while, but we couldn't hold onto that library requirement, especially as the Internet got more and more robust with more information on it. Although as Johns Hopkins University found out, not all the health research information is on it.

H: No.

F: So there's always that double-edged sword there.

H: It's an interesting issue you bring up. The Hopkins incident involved a patient dying because the literature wasn't searched back far enough to find the key article. I actually had just become a member of the Board of Directors of MLA when that happened, and my recollection is, MLA, in true fashion, set up a committee on expert searching at that point. I do think the members of the Medical Library Association always did react when something new came up and certainly that was a key step that we took.

F: Exactly.

H: It was about the same time as or just shortly after the evidence-based medicine thing was starting to take hold, primarily in the academic medical centers, but I think also in some hospital libraries.

F: Yes. Even before I came, there were hospital librarian issues. But that was the other thing: throughout my whole tenure at MLA, we were always inventing advocacy toolkits and survival resources and trying to get out publicity constantly. I think it helped some people and we had some very good examples of individuals who would get up and speak at chapter meetings about their successes using this or that advocacy resource. Unfortunately, I think not enough people either were able to use it, or sometimes, as we know, administrators don't listen.

H: Yes. The hospital library issues changed somewhat over the forty years that I've been a member, but there's always something about what's going on with hospital libraries that has been an issue for the Medical Library Association. I think in the '70s we had issues of nobody's listening to us! We can't get elected to the board; we can't get to be chairmen of committees, etc.

F: Exactly.

H: When that became better in the '80s and '90s, then the next thing would come along.

F: I know.

H: Yes. Very interesting. Looking back on the twenty-plus years, do you have some thoughts about what your favorite personal achievements in the association were?

F: We can talk about the international activities and establishing Librarians without Borders, which I helped with. I give Michael Homan credit for that with the task force that he chaired, just taking it step by step. I think that was a very good thing because MLA was founded by Canadian and U.S. doctors and librarians, and so we always had an international focus. And the Cunningham fellowship—I don't know, almost forty-five years old— where we bring medical librarians from other countries to study over here. This international work was a focus of the organization, and I think this just continues it. I'm happy we were able to establish the program and we helped a lot of medical professionals and librarians in many countries be able to learn how to access health information. H: I'm going to be asking you some additional questions about our involvement with IFLA and the international community later on, but let me at this point ask you if you have any thoughts on how MLA compares with other professional associations that you're aware of. Are we the same? Are we different?

F: I am a very competitive person, although I'm nicely competitive. Hopefully nobody knows I am. I think we did a fabulous job, and I think one of the highlights of my career also was when *Library Journal* published the article where they had done a survey in 2004, I think. They found that MLA was the most collegial of the large associations (although we really aren't that big). It was voted by the group that took the survey as the most collegial library association.

H: Ah, I had forgotten about that.

F: Yes. That also is a little highlight because it's true. I think that is where it was fabulous. We didn't have any backbiting, any of the unpleasantness that sometimes—and I know I'm being recorded—sometimes hurts the American Library Association, because it's so huge and there's such diversity. I feel sorry for Keith Fiels, executive director at ALA.

H: ALA is so big that I often wonder whether people in the school library division even talk to the people in some other division.

F: Exactly. So many divergent interests. I think we are more service-oriented and don't have such a for-profit mentality. SLA's a little bit more for-profit. I like that personally because that's my personality. Even though I have an MBA, a very good one, I would never have gone to work in the for-profit environment. This is not for me.

H: You had mentioned earlier about when you were at the AMA library, getting the call from the surgeon who was in the operating room. I think that does speak to why many of those of us who work in the health sciences library field like it, because it does seem like what we do has an impact on life-or-death situations, and there is something very intriguing about that. And I do think our members—you and I have talked about this—are very intelligent. Many of them have science backgrounds, but they all have to speak the language of science to work with their customers. Therefore, I do think medical librarians are a very special group of people.

F: They are special. As I said, I've been active in librarianship in many different ways, and I just am so grateful that I ended up where I did with the people that I have worked with. It wasn't always all perfect, but with my personality, it worked out very well.

H: Let's move on to talking more specifically about your interaction with members of the Medical Library Association. Do you have any general thoughts on working with a member-based organization? Are there specific challenges to that? Probably not that

much different than other professional associations that are member-based, but do you have any general thoughts?

F: I think that—and I've said this before—association work is all about people. No matter how you really feel about anything, if someone is a member they're to be treated as a member. They're treated with respect. You answer their questions or give them service. You respond for a selfish reason: you want them to stay members. If you don't do that, they won't stay. Why should they? There's other things they can do. Plus, you should <u>want</u> to help them.

This is not about you; it's about them. That's one thing I will say—which is a good thing and a bad thing—I have a very small ego. When I was taking my MBA classes, they gave us a test in one of the classes to measure self-interest. Most of the people in my class scored in the 90%. I was in the 4% [laughter]. That's a bad thing, too. It goes both ways, but that's what I'm most comfortable with.

And that's what I would say regarding members: You don't think about yourself. You think, okay, how is this going to impact them? How is this going to impact the profession, the association? You make your decisions that way, evidence-based decisions. You don't say, "Oh, no, I myself don't want to do this." (I know I'm being recorded.) No, you don't, because ultimately, at the end of the day, it's the association that matters and not you. It's your members. It's like working with anybody. I did this at AMA and I did it at MLA. You want whoever you're working with to have a great experience. You want them to feel like they achieved something and really have a high satisfaction level. Sometimes you have to do a few little things to make that happen because in the big scheme of things, it helps the association and it helps the profession.

H: That is a great philosophy and I know I've heard from many members and many of the presidents of MLA that you are particularly good at working with the presidents of the association. You obviously worked with probably about twenty-two of them over your career.

F: Yes.

H: Describe how you worked with the presidents and how that changed over those twenty-two years. If you have any stories that illustrate what it's like working with the president, I'd love to hear them.

F: Okay. I'll start out with a story. I give June Fulton a lot of credit in two ways. She was my third president. She suggested that we have weekly phone calls, and you experienced this yourself as president. Before that, I didn't do that. I might call up if something happened. That weekly call, I think, is essential. I thought, "Oh, yes, we can trade ideas." Then I get to know the person pretty fast and can alter my personality or alter my way of looking at things through their eyes so that, as I say, they can achieve what they want to achieve. That call was one thing that I thought was really, really helpful.

H: I think you have a reputation for being very supportive of the president of the association. When I was president-elect, I remember Mark Funk, who was then a past president, telling me that once you step out of the role of president and you're no longer getting the weekly calls from Carla, you sort of feel like you've been cut off. You sort of feel like you're no longer [in the loop.] I think you had a way of making each of us feel so special while we were the president, and you were always giving us a script and you were always giving us an itinerary and making sure we showed up at the right event. I'm sure some of this was selfish on your part because you wanted us to be showing up at the right place at the right time, but it does seem to me that you were very supportive of presidents.

F: Yes. Part of that also comes from my AMA training, because you have to do that with the doctors—more so than with librarians. You want it to go smoothly. I look at this whole thing—that's part of me, too—as a production. You're producing a year, or you're producing a meeting. You want things to go as smoothly from beginning to end as humanly possible. You want some product at the end; you want many people to say, "Yes, yes, I did that," because it helps everybody. That's the way I look at it: okay, if you're going to produce this, how is it going to work?

You want everybody to know everything, first of all, to be very transparent. I think our association is very transparent—another difference in our association from some of the others—because you don't get anywhere if you're not.

H: Do the other associations have detailed scripts? That's one of the things that always impressed me. If you were on the Board of Directors and you got to the annual meeting, somebody handed you a script so that you didn't have to think that hard about remembering to thank the vendors, for example. You didn't necessarily have to always remember all of those details because it was in the script.

F: You know, I honestly don't know that, especially ALA because that's so complicated. I don't know what SLA does because I haven't been to too many of their business meetings. But we found it helpful and I think the members found it helpful. Part of it is trying to make everything go as smoothly as possible, and still get some content and value out of it so that people learn.

H: How does MLA work with its members to determine the mission and goals of the association, and how does the Board of Directors fit into this process?

F: What we did, and we did this several times, is gather information from member surveys and, occasionally, non-member surveys. We've had, as you know, open forums. Then every year I always did an environmental scan within the profession and externally to see what was happening in the bigger world. I would find out what challenges we were going to be facing and if we could do anything about them. You gather all of that data. You get input from members. I think one of the most valuable things I did was go to chapter meetings and sit. Maybe executive directors don't think that's a good use of

time, but I would sit at the exhibit booth and, gee, people would come up and talk to me. I got more ideas and got a sense of what was going on by going to those meetings, because at the big meeting I don't have as much time to listen. I could a little [at the annual meeting] but not like [what I could do at the chapter meetings.] That was great.

H: You're not scripting the chapter meetings so you have time to talk to members.

F: No. I get to hear what they have to say. I'm good at recognizing a good idea. I've got a good filter for that. Somebody could come and say something to me and I'd realize, "Oh, yes, that would work, or just do it this way." I found that input really helpful.

As far as the strategic plan is concerned, we gather information and the board ideally would look at it every year. You know from your board experience that we did that. Early on we made a lot of changes to the plan and kept changing it, and then all of our goals and objectives were aligned with it and it went pretty well.

That was one of the years that you were president [2010/11]—when we got into the "challenging years," I will call them. 2009 was not much of a surprise because we knew we were meeting in Hawaii; we knew the finances weren't going to be that great. But 2010 and 2011 were difficult during the recession. I think people were worried about the recession. We were looking at some other factors; kind of looking at the plan but not so much. We were just thinking, "Okay, what can we do?" And then it started to get better. 2012 and 2013 were very good years. It just depends on the year.

Including the strategic plan as part of the board agenda is another way we got feedback from the board. Depending on how the board feels, if they come out with ideas for changes, you can go back to the membership and say, "Okay, this is what we want to do."

H: How do you see the role of the Board of Directors in a membership association?

F: They are the policy setters. They should not be operational because that leads to nothing but trouble.

H: Yes, I can well imagine.

F: They know what's going on in the profession. I'm not working in the profession. I don't know. I'm not in a library. They bring that experience of what is going to be a problem. Then we can do some research on what to watch out for. I used to give a talk about this: Running things requires a partnership and there are different levels. The board is the policy arm and they represent the members and they make decisions about how the association is going to move forward. They don't get involved in the nitty-gritty.

H: I think that philosophy that they're advisory and not getting into operational is an important point, because my first observations of the MLA board were in the '80s when they were doing hands-on strategic planning, and there was a lot going on. I remember when June Fulton was the Section Council chair. She was on the strategic planning

committee and she told me that she spent forty days outside of her library doing MLA work. That was my impression of what the board did and why for many years I refused to even consider running for the board because as a hospital librarian I didn't think I could do that. It became possible for me after you came in with the concept of the board not doing the work but rather reading the important documents and thinking and using their brains to bring their best ideas forward, really an important concept.

F: Exactly. I learned that at AMA. We did all the writing. We wrote the policy statements. We did all the drafts of everything. We didn't have the doctors do it. We would give it to them and then they would do all their editing.

But you look at the background of the issue. That's why we developed a policy compendium when I came, so that I could see what decisions had been made and where we stood. That again is my training, to know the history of issues, which I think is important, because you don't want to make the same mistakes twice. Then you have the discussion, providing as much information to a board as humanly possible—evidence-based. Ideally, they will make the good decision and then we can move forward.

H: Yes, there's nothing worse than being part of an organization, getting into a meeting, and saying, "Well, let's do this," and somebody asks, "Didn't we do that three years ago?" or "Does anybody have the minutes from...?" and having this very chaotic situation where you can't remember what policy or decision you made. You have to have the policies organized in a way where you can reach out and look up what decisions have been made.

F: That's the way I see strategic planning. I don't know if you were on the board when on occasion we brought in outside consultants to work with the board.

H: I don't recall that being part of either of the times that I was on the board, but I think I was aware of that as a member. How does MLA determine when the association needs a new program? We've started new programs over the years. We've had a lot of programs. The education program and other things have been carried on. But from time to time new needs emerge, such as the member website. When the Internet became important, it was clear that the organization had to have a website. How does the organization determine when it's time for a new program and how do you go about creating one?

F: You look at your environment. Sometimes ideas come from chapters. Sometimes they come from the board. It becomes evident, "We've got to do this." You mentioned when expert searching was articulated as a role, for example. You look around and you ask, "What's going on, what can we do?" Under various presidents we've explored new roles. You look out there and see that people in traditional roles are losing their jobs, but this person is playing a new role and they're qualified to do it because of their training. They're calling themselves something different; they're doing something else [and our other members could as well]. Then you say, "Okay, great, we're going to have a program, we need to promote this role." Maybe you target a JMLA [*Journal of the Medical Library Association*] issue dedicated to exploring new roles, what people are

doing now. This is where, as I say, the board is on top of things, chapter people are on top of it, because they know what's going on.

H: Yes, that should be the primary role of the board because they've been elected to represent some group within the association and that is their role—to bring ideas. MLA also has a variety of long- and short-term working groups. We have sections and chapters and standing committees that are always there, but we've also had a variety of different task forces that advance the work of the association. What are your thoughts on how these various units contribute?

F: I think the task forces—I'll start with them—are incredibly important. A lot of our initiatives in revising programs or policies, such as the research imperative or the competencies document, are things we don't have a standing committee for. Task forces can revise these documents or explore new ideas. Task forces do our value studies and issue-related things. This is incredibly important. It's usually not so important from the programmatic area; it's more important for policy. They develop the ideas and reports for action and then they're disbanded. Sometimes if people think it's of lasting importance, the task force becomes a standing committee.

H: How about the standing committees and sections? How do they contribute?

F: I'll talk about the standing committees first. They really are program-based for the most part, Credentialing, Continuing Education, Membership, and so forth, that either keeps the association moving along or gives input and helps with the various services and programs that the association provides for the members. That is the committee role as I see it, and usually they're all linked to something programmatic. For example, for internal operations, we have a Bylaws Committee. Grants and Scholarships are professional development in a way, but also professional recognition. Continuing Education is essential.

The sections are a great way for people with like interests to come together and exchange ideas. If you're working in a hospital library, you can come and talk to other people face-to-face or talk to them on a listserv or other social media. There are a million ways people are communicating now. That's what I see with sections. People are either working in like institutions or similar subject areas where they want to know more and talk to somebody or communicate. Sections bring those interest groups together. The special interest groups are a very similar idea, just smaller groups of people who want to get together and explore something. The chapters, of course, give the regional focus and serve people who maybe feel they can't afford to be involved in MLA.

H: The chapters tend to be more like mini-MLAs in that they do a little education, advocacy and various things.

F: Exactly.

H: It always strikes me that each of the chapters has their own character. My observation would be that some of them are really into fundraising, or have particularly good educational programs. It always seems that whatever the regional group decides is important to their members.

F: Yes, they all have different characters. They are all a lot of fun. Of course, I've been to each chapter meeting at least once through my career. I just found it fascinating to see each one and what they were like. If two that were very dissimilar tried to do a joint meeting, it always was very interesting.

H: But these joint meetings have been very popular.

F: Oh, yes. And it's smart because they know they can get more money, more revenues, usually, if they do it well together. They can get more exhibitors because exhibitors have a bigger attendance base.

H: I think the exchange of ideas between the program committees can be good, too, because you don't have the same people planning the meetings over and over again from a particular group.

F: Exactly.

H: It brings new ideas.

F: Yes, I think they've actually worked pretty well. I never really felt the MLA annual meeting and its attendance were threatened by these because they're at a different time of year.

H: You, as the executive director, have served as a staff liaison to a lot of MLA projects, and you have other people among the headquarters staff who serve as liaisons to groups. How do you decide which groups your staff should be assigned to? I'm curious to know how you have picked the ones that you have chosen to be the liaison to over the years.

F: Generally, if the president has something that they are trying to get done and it's a task force, I would be a part of that. But it depends. If it really is focused on, let's say, revising the competencies document, then instead of me (although I participated in some of those) we probably would have the staff liaison to the CE committee be part of that. Or, Ray Naegele, for example, in his role would be the staff liaison to the National Program Committee because he does a lot with the annual meeting and a lot with the exhibitors. For the first half of my career at MLA I was the staff liaison to the NPC. But I thought, "Wait a minute. Ray's getting more and more into helping plan the annual meeting and it would seem more logical for him to be the NPC staff liaison."

H: The financial aspects of the annual meeting are such a key part of your budget.

F: They are. I think Ray enjoyed it. He brought a lot to it. He made the meetings what they are today starting with getting them audiotaped. Now they are not taped anymore but digitized so that we could have an e-conference registration. He was the mover and shaker behind that and explored other things. When he came to the association, Ray had a computer background and he was, I think, selling computer products to the association or something related. My predecessor hired him because Ray's also a CPA, so he's got that background as well.

I think that right at the beginning I was the staff liaison to the Governmental Relations Committee and the Legislative Task Force. Within the first year I reconfigured a little bit of headquarters staffing and gave Mary Langman, who's an excellent writer and a very intelligent person, more opportunity. I said, "Why don't you, who loves to connect with people, why don't you do this?"

H: It's clear that the members appreciated her work for them because ultimately she received the Cornerstone Award from the Association of Academic Health Sciences Libraries for the work that she did in the legislative arena.

F: Yes.

H: Having come from the Regional Medical Library Program myself, I'm aware that because there is so much training going on within the Regional Medical Libraries, the RML coordinators all work very closely with Debra Cavanaugh and Kathleen Combs in the CE office, because coordinating what the Regional Medical Library Program does with MLA has been a really crucial thing, at least in the last decade or so. I don't know if it was always that way, but certainly in my time in the RML it has been.

F: Yes. I made another change. Before I came, I think the executive director was always on the Awards and Grants and Scholarships committees. I purposely did not want to be on those. I took myself off of them right away and had the staff person who did the work of getting the awards together, the support work, take over because I wanted nothing to do with choosing anybody for anything.

H: I think that's very wise. You don't want to ever be in the position of having people think, "Oh, well, Carla likes somebody better than somebody else."

F: No, no. I did not participate in any selections. The only thing I still did was the Leiter Lecture that we share with National Library of Medicine. Because it's a speaker, and generally doesn't come from the membership, I felt more comfortable and able to contribute something.

H: You've talked a little bit about changing some of these liaison relationships. Is there anything else about the way the headquarters staff is structured that changed in your tenure?

F: We did a bit of downsizing because of economics, and we collapsed some things. I did make some changes to my assistant's job, in part because of technology. It's not as hard to do some things my assistant used to do. You have a full-time person and you're thinking, "Hmm, it's not quite the same job as it was." So we consolidated a little bit, and she took on the Grants and Scholarships and Awards committees liaison work, for example, and we removed that position. Besides the need to downsize due to operating budget concerns, another reason for eliminating the position was that I determined we had the potential of giving away \$60,000 a year in grants and scholarships and awards, and we have a \$1.2 million dollar endowment for that. And I thought, "Let's put that in the executive director's office because we may want to do something a little differently and increase oversight over this program." That's a lot of money to give away every year and I'm glad that we were able to do that.

I just kept looking at how things were done. We stopped doing some things in publications that we did when I came because they just simply weren't worth it, and really focused on adding value. We got *MLA Focus* started; I started that. As time went on, of course, we had to focus more on the social media aspects. And that's something that is not, as you well know, my favorite thing to do [laughter]. I always used to justify avoiding social media because at least one library association executive director got fired because of her social media activities, which was not very smart. Another one used to blog all the time, but then they stopped that. Although you always know more about the association than the president does, you never want to make that obvious. That's your job and that's what you should know, but you don't want to steal the president's thunder. You always want to make them the star, and you can't do that if you're telling vital things over a blog every five seconds.

H: I think *MLA Focus* was a great addition because it allows you to announce some things that happen between the newsletters, which is the other way that people would find out about what's new. But you have to plan newsletters several weeks and months out, and being able to do the *Focus* allowed you to announce election results or talk about a new program or remind people that a deadline for something was coming up. I think that's a great feature.

You've talked about headquarters staff working with members. Were there ever times when members made a decision to go in this direction and the staff really wanted to go in that direction? And did you find yourself being in the middle or having to figure out, how do we balance differences?

F: Yes, that happened. I've stated my philosophy when ALA invited me over to give a little orientation to their division presidents.

H: Oh, now, that's interesting.

F: Yes, I did that last year or the year before, for other executive directors and presidents of ALA divisions. My mantra is like Marshall Field's motto: the customer or member in this case is always right. Even if they aren't right, they are right. My job, the way I saw

it, was to take a not-good idea and make it into a good idea by suggesting a few small changes. Sometimes that would work. I would intercede and ask, "Did you think of this or did you do that?" Sometimes staff was wrong. That philosophy usually worked pretty well so that everybody kept face. It actually did work in the end.

Now, occasionally, not very often, I told staff we couldn't do things one way because the president or other person was rejecting it. And I said, "We have to see how we can do this. We will provide support because that is frankly what you are paid to do at the end of the day. We have to see if there are any little changes that can be made as we work through it. Maybe the person will finally see that it's not going to work as they thought. Then you are gracious and you suggest a better plan instead." As I say, it's all about people and making people feel good and valued. You don't want to get into a situation where you're calling somebody names.

H: Or setting up barriers.

F: No, no, no. That's not how you get anything done. Sometimes decisions are made and things are done and they don't work. Okay. The advantage, of course, is that your board changes over all the time. You get new people in, they see something doesn't work, time passes, and then you can change it.

H: Sometimes it's a little bit like working with a teenager who wants to do something. If you give them a little leeway and they find out what a bad idea it was on their own, it ends up being better in the long run. I'm sure there have been times when members have thought they had a great idea but that maybe wasn't such a great idea, yet allowing them to find out on their own might actually have been the right way to do it.

F: Right. Sometimes I was wrong. Staff, me included, must keep an open mind. Watch, because we may be learning something that we didn't know. We can think it's going to go one way, but you never know because there's something else that might happen to influence it, and then an idea does work. Or if that exact thing doesn't work, there's another little thing you can do, and at the end of the day it does work. You've got to be flexible and you've got to be open and willing to change. I know that I was criticized, especially in the later years, by a few people for doing things the same way all the time. That was totally untrue because we changed all the time, particularly during some of those years when we didn't have as much money.

H: You didn't have the resources to be doing all the extra things that people might have wanted.

F: We didn't have the resources, right. You just have to kind of go with the flow. But at the end of the day, you must look at how and what the association is doing. What did we do? What is something outstanding that we did this year, or what is a program we started? That's really what you've got to look at, and try to keep the personalities out of it.

H: Let me go in a slightly different direction here. Having been a member of the board twice, one of the things that's obvious once you are on the board and you see the budget, the board does have the fiduciary responsibility and we do have to approve the budget. You see how much the annual meeting is such a main part of the budget, which I don't think the members always realize. Do you want to comment on the role of the annual meeting, its importance, and how it's changed over your tenure?

F: It is incredibly important to the budget. It brings in about 40-42% of the revenues of the association. That is primarily not through annual meeting registration, but through advertising and exhibitors. They are crucial to the success of the annual conference. So financially, the annual meeting is critical. Now, what we have done through the years, as I had talked about a little bit before, is to make it more virtual. Ray Naegele has done a great job with this. Posters are online now. A few years before I retired we added the e-conference registration. We started that so that people didn't have to come. They could still view everything electronically.

H: I think that's great because one of the most difficult things with a member organization are the people who can't afford to come to the annual meeting and sometimes they have a resentment for what appears to be such a major focus on that one event of the year. All of the things the organization has done to make some of that available online has been good.

F: Right. We had to do it. It was a good thing to do it. We can reach many more people. People in other countries can e-register and view some of the programs, which I think is great. That's pretty critical. It hasn't cut down too much on the face-to-face in most years, I would say, because it's hard to have a drink together virtually, and you don't have the same kind of interaction. In our association people actually like each other and they want to come together. They have their annual dinner together with friends, all of these little rituals that people do. Even the younger generation actually likes to see each other face-to-face.

H: Despite the fact that they're on Facebook and Twitter and Instagram all the time, I think nothing really replaces that face-to-face interaction.

F: The association industry is still going strong, so from that perspective we know that people still have a desire to come together.

H: We're seven years now past the recession, so looking at those trends makes sense and we can learn that associations will survive.

F: Right. The 2013 joint meeting that we did with ICML [International Congress on Medical Librarianship], the International Clinical Librarian Conference [ICLC], and the veterinary librarians was so successful. I think it was the fifth largest annual meeting in MLA history. I started looking more at who else could we bring into the mix of an annual meeting. I don't know if they still think that way. I know Toronto next year [2016] is going to be a little challenging, but there are ways to get around it. Hopefully

they will think of those and do it. That meeting is going to be with the Canadian Health Libraries Association and the International Clinical Librarian Conference. ICLC is going to meet with us again because they enjoyed meeting with us so much in 2013. So again we're in Canada, which I know has its own plusses and minuses. But I started thinking: How many groups can you have come together, partner with? They get a cut of any profit, but all together it ends up well and it makes the exhibitors happy. I think that is something that really has to be strongly considered in the future.

H: You just mentioned exhibitors. It occurs to me that the joint chapter meetings always were very appealing to the exhibitors. I've actually been part of a chapter that perhaps was holding a meeting that was around the same time as some quad chapter meeting in another city.

F: Right.

H: And the vendors don't come to the smaller meeting when they can go to the one that's got three or four chapters coming together.

F: That's right.

H: It changes when the chapters compete a little bit.

F: This is interesting to me, because I always considered the exhibits an educational part of the meeting, because they have a new product. It might help the people you serve or work for. Can that updating be done virtually, or do you have to have a face-to-face, one-on-one session from Elsevier or others?

H: We haven't done virtual exhibits, but I think that's a good idea and we should write that down and pass it on to someone else.

F: The annual meeting has been crucial to the success of the association, just thinking of different ways to do it, different ways to approach it. You can cut costs sometimes. We've changed things a little bit, as everybody has in their conferences. But for many, many reasons—educationally, too—the member is most important.

H: Before we leave this general subject of interacting with the members, do you have any final comments on the joys and challenges of working with members? Or if someone asked you to set up the Medical Library Association as a new organization, is there anything that you would do differently about working with the members or structuring the organization?

F: I don't think so. Everybody has their own ideas about this. Today you have to always think virtual, and you have to consider: how can I provide my products and services virtually? Because that is the consumer expectation.

H: The Amazon approach, or Google.

F: Exactly. Good point. That's exactly right. Always, always, always you have to keep exploring the benefits. What do the members want and what are they not getting, and how can we make that happen?

H: It does seem to me that you've been very successful in looking ahead and putting yourself in the place of members of the association, trying to see from their point of view what people really want out of a professional association.

F: Right. It does have to be dynamic, in spite of the fact that it's virtual and there's always got to be a lot of social media, which will continually change, as we know. Different things will become popular. It has to also be structured in such a way so that things get done, and there just isn't endless talk on a blog about issues.

At the end of the day a decision has to be made and something has to happen. Whatever the structure is, it still has to allow that decision-making capability. It can't be like the Roman Colosseum, where everyone was sitting in the stands when they brought in the people. It was an emotional decision process there, either thumbs up or thumbs down. Today you have to have a more evidence-based, critical way of looking at things, while incorporating all the other things that virtual communication, a virtual association, can bring to you. You can certainly get a lot more ideas a lot more quickly. You just have to be more clever about filtering all the information that you're getting.

[MP3 file 150924_002]

H: We're back doing part two of Carla Funk's MLA oral history. This is Ruth Holst, and it is Thursday, September 24, 2015. In part one we covered her education and early career and some highlights of her time at the Medical Library Association. Now I would like to move on to other areas, including how you interacted with other organizations in your role as executive director of MLA. Carla, obviously the Medical Library Association works very closely with the National Library of Medicine. Do you have some general thoughts on the relationship between MLA and the National Library of Medicine over your twenty-plus years in working for MLA?

F: Yes, I would love to comment on that. As we talked about yesterday, when I came to MLA in 1992, the relationship started off a little rocky because NLM had been marketing their services directly to the physician through their associations and excluding the hospital librarian, amongst other people. That was my first experience with NLM as an MLA member. Now, when I worked at American Medical Association we had a little bit of interaction with the National Library of Medicine. When Dr. Lindberg was hired, I think probably in the '80s—

H: 1984.

F: Eighty-four. That was a little controversial even in our little AMA library, because he wasn't a librarian. Anyway, I come to MLA and at the first annual meeting I went to

there was a debate between Don Lindberg and Herb White, who I believe was the dean of the Indiana University library school at that point.

H: Yes.

F: Back and forth, back and forth they went with standing room only. I was sitting on the floor. Unbelievable. The hospital librarians were enraged about what they perceived he had done. Well, I'm happy to say, after that things got a bit better. I was on the NLM Education and Training Panel in 1993[-1994]. I served on it and got to know people better. That was an interesting experience.

H: You're speaking of a panel that the National Library of Medicine had.

F: Yes, it was a very diverse group of people. There were physicians, nurses, librarians, and it was a great discussion about health sciences librarians' education. I got more accustomed to the environment. I had been to NLM when I worked at AMA in the 1980s, and Martha Fishel actually gave me training on the databases. That's when I first met Martha. That was really a great experience. I met her dad when other members and I were going out to dinner and he was very funny.

H: We should point out that her dad is Andy Rooney.

F: Yes, the late Andy Rooney, the CBS news commentator. I remember we happened to walk into the same restaurant when she and he were walking in, and Martha very nicely introduced us to Andy Rooney, her father. I said something like, "Oh, I work for the American Medical Association," and he said, "Well, I guess somebody has to [laughter]." It was so funny. Later on, as you know, for the MLA centennial he was kind enough to do a Centennial Moment for us, so that was pretty cool.

We started working with NLM in a couple of ways. One way was we would go to either NLM directly or to the National Network of Libraries of Medicine for grants. The first grant that we got when I was there was to publish our history of MLA for the centennial, and then we got a publication grant from them.

The biggest—because I'm not going to go into absolutely all of these—but the greatest relationship we had with them was trying to recruit minorities into the profession. NLM partnered with us, and we worked with the American Library Association on the Spectrum Scholars Program, bringing minority groups into the library profession.

H: How did that come about—that you decided to work with the program that was already in place in the American Library Association?

F: They had established it maybe in the 1990s. All the executive directors of library associations met regularly, and we started talking about this program. We knew of Spectrum because MLA has had a minority scholarship for many, many years that preceded this, and we were doing our bit. We knew we didn't have the capability to do it

on the scale that the American Library Association was doing it and so the idea came about that maybe we could sponsor one person. I think we had to give them \$5,000 to sponsor one person—something like that. We got to talking more. Becky Lyon was the person from National Library of Medicine who we worked with on this. She said, "We'll work as partners because we think this is important, too. We will give you a grant and then you will pass that on." We were able, in that way, to sponsor scholars. We started sponsoring two every other year. ALA's pledge to us was that they would select someone who wanted to be a medical librarian. This went on. We got hundreds of thousands of dollars from the National Library of Medicine to keep doing this and we still participate in the program today.

Also during this time the Association of Research Libraries started a minority recruitment program—more for mid-career librarians—and we also contributed to that for a while until they disbanded that program. A few years ago NLM wanted to know what the result was. So I went back through all of the records.

H: You looked back.

F: Yes, and reported on where the scholars were now. It had been quite successful. They gave us more money which was very exciting. That was incredibly strong. We attended ALA every other year for this program and had a booth at the Spectrum Leadership Institute. The RML also had a booth there.

H: I think I remember attending at least one or two of those. I was at the Spectrum booth at an ALA meeting, but being there as a representative of the Medical Library Association.

F: I think that was a fabulous program. It fits into what I personally feel is important, and I'm glad we had such a great working relationship.

H: I know that several of our members over the years, of course, participated on a lot of different NLM panels. When the National Library of Medicine did their long-range planning panels, I know there were many members of MLA that were part of that. But I don't know whether MLA was on any.

F: I was on one of the long-range planning panels. But, yes, our members obviously would be involved in lots of ways. One of our members, Gail Yokote, is the chair of the Board of Regents for NLM.

H: I think she's the latest. Over the years there have been quite a few medical librarians who have been the Board of Regents chair.

F: Going on from there, the association decided we wanted to be have our journal be open access. NLM did us a tremendous favor. They digitized our BMLA/JMLA [*Bulletin of the Medical Library Association/Journal of the Medical Library Association*] back to when it first started in the early 1900s, and made it all available for free on the

web. That was a fantastic service and we recognized them for that with the MLA President's Award. That was fabulous. We were helping them, too, in a way, because they got to experiment with putting a journal online.

H: As a result of that was MLA, then, the first library association to have an open access journal?

F: I did do a little research on this, and I believe that we were. What we did was also politically brilliant because MLA supported open access and this was a very dramatic way of showing this.

H: And you were supporting PubMed Central with the National Library of Medicine.

F: Oh, yes, of course. The other side to this was that if you did a membership survey, getting JMLA was one of the top reasons people joined the Medical Library Association. So this was a double-edged sword. We must be true to what we believe is important, but what's going to happen with the membership? We probably lost revenue in 2000 or 2001 because JMLA was online at NLM. They digitized before that, but then we continued on with the newer issues of the journal. We've lost probably \$270,000 with this move over the years in subscriptions, but we thought of other ways to make up that revenue.

H: I'm assuming that you got advertising revenue when you set up the website. Did the advertising that you got for the website balance off, at least to some extent, what you lost in the JMLA?

F: On PubMed they don't have any advertising, and that's the only place our journal is electronically available. So there's no advertising revenue there. Also, we discovered that for those kinds of things, advertisers don't like the format.

H: Don't like the...?

F: Don't like to advertise in electronic journals. It doesn't work for them. What we started doing was putting more advertising on *MLA Focus*. We also started doing email blasts for advertisers for a fee. Always, the members can opt out of receiving this advertising. That started to pump up the revenue stream a little more because with the print JMLA we still had advertising. Before I left, we were looking very seriously at not publishing the print JMLA anymore. We always ask members and members always want it, so it's hard to drop it. Fortunately it's not my choice to make now, but we were getting to the point of it costing us more to produce than it was bringing in.

H: Was the association still getting some subscriptions for the print?

F: Yes.

H: From people who were not members of MLA? Outside subscriptions?

CARLA J. FUNK

F: Yes, because subscriptions were generating between \$30 and \$40,000 annually.

H: So someone was still paying for it.

F: We got international subscriptions that weren't from members.

H: The decision to work with PubMed Central was an example of something that had an impact on the Medical Library Association. Were there other things that happened over the years?

F: Yes. Another example of collaboration involved specializations. MLA, as you know, is very involved in professional development, continuing education, and credentialing. NLM helped us with a consumer health specialization with a conference in DC in 2001.

H: Yes, I remember because I attended that.

F: Exactly. That was the preamble to setting up the consumer health specialization, which many people, especially public librarians but also our membership, have taken advantage of. NLM supported that very much, and also setting up the disaster information specialization grant.

H: Which I am intimately familiar with.

F: Yes, you are.

H: That happened during the year that I was president of MLA.

F: Yes, exactly. That's another whole category. We also—which you are very intimately familiar with—created the Continuing Education Institutes, of which the Greater Midwest Region funded two.

H: Right.

F: That is to train people to develop online courses, and that was pretty successful too.

H: That's an interesting situation because I believe that the RMLs had asked the National Library of Medicine to fund a program like that directly. Or, no, the Medical Library Association had asked the National Library of Medicine to fund a program like that directly and I think they had declined.

F: That's right.

H: Going through the Greater Midwest Region of the National Network of Libraries of Medicine was actually a little bit of a back door approach that you and I and Kathleen Combs worked out as a way to accomplish the same thing without perhaps the bigger budget that the association was originally going to spend on it.

F: That is true.

H: But that was very successful, as I recall.

F: It was very successful. Other ways: NLM funded the Informationist Conference with collaboration in 2002. We got a \$50,000 grant to run that. That was very successful. Also a health information literacy grant, which was several hundred thousand dollars, which funded a very useful health information literacy study.

H: Which happened around the time Jean Shipman was president of MLA, as I recall.

F: Yes, that was Jean Shipman's effort. We got that grant in maybe 2006, '07, or '08. We worked on it and then we published a special symposium in JMLA about it. It was fascinating, I thought. We partnered on webcasts. In 1992 or 1993 we also cosponsored with NLM a satellite broadcast, as we called it, on the role of information services on hospital quality.

H: Oh!

F: I found that as I looked back.

H: Oh, gosh.

F: That was one of the first things we did with NLM, and I think that was in response partly to the anger that the hospital librarians felt toward NLM at that time which we talked about before.

H: It was a way to do something for the hospital librarians?

F: Exactly.

H: I had forgotten about that.

F: It was interesting. You can see, though, through the years, how strong and close the relationship got.

H: I think that actually was strengthened under your leadership. I don't remember, perhaps, because I was a little bit more isolated as a hospital librarian. I don't remember those kinds of partnerships before you got to MLA. I think that's a legacy of your tenure with the association.

F: Thank you. I would like to think so, because it ended up as a great relationship. Of course, the other thing that we worked very hard with them on—and we'll talk about that, I think, later—is the legislative efforts to support the National Library of Medicine and its

funding, which was a really major focus of our legislative effort. But I think you have another question.

H: Why do you think it's important for the association to maintain strong governmental relations?

F: I think it is important just to sustain the National Library of Medicine, which was always under threat of having funding cut. Our members use those services and helped build them, in some cases, to help people have a better quality of life and better health care. I mean, it's pretty simple. If you cut the funding and you don't have all of these things, where are people going to find this? Certainly just the web itself is not the best place to look. I don't know what it was like before I came as far as governmental relations was concerned. That's one reason I gave the role to someone else on staff so we could build the governmental relations program. Under 501(c)(3) rules, you can devote staff and spend money as long as it doesn't take up more than 20% percent of your budget. It's vital to support the chief tool, one of the chief tools that our members use in finding health information for the people they serve. It's pretty simple, really. Under Dr. Lindberg, it kept evolving and evolving, and more things were available, and we had these special databases and clinical trials and on and on, and it just got bigger and bigger. But NLM is crucial. It's a crucial resource, I felt.

H: Certainly the availability of PubMed being freely accessible through the Internet in the late '90s had a major impact on libraries, because before that I remember as a hospital librarian you had to budget for searching various databases. Once PubMed became free, that really made a big change and certainly was a good thing for hospital librarians in the country.

F: I also remember this came up in '93 at the NLM Education and Training meeting. We were wondering why PubMed wasn't free at that point. We were sitting there saying, "Why isn't it free? Our tax dollars are paying for it."

H: Exactly.

F: It was a pretty funny conversation. Kent Smith was in there and other people. I was very gratified to see, several years later, that it was free because it should have been free.

H: That's interesting. It would have been fun to be a mouse in the room and listen to that discussion.

F: I thought it should have been free because I came from a public library background, where tax dollars were paying for library services. At that point we didn't have all the databases in the public library. Coming from that background, it was like, "Why do you charge?"

H: You know what's interesting about that: Not long after PubMed became freely available, the National Library of Medicine began to look at the data on who was using it

and discovered that 50% of the use of the MEDLINE database was people who were not health professionals but rather the general public. It was a real pivotal point at which the National Library of Medicine then decided to begin working on consumer health issues, which is something that medical librarians had been asking them to do for years before that. It's interesting that suddenly they got religion, so to speak.

F: Right.

H: I think it was in 1998 that they even funded a consumer health position in each of the regional medical libraries.

F: That's right. I had forgotten that.

H: Because they had found that going directly to the public was becoming such an important focus for the database.

F: It's perfect because it's a great selling point. When we talked to all the congressmen we asked, "Do you know that people in your district use this tremendous source of free health information? And it's reliable." It was brilliant and showed me that Don or staff at NLM could learn and look and act to work in new ways.

H: Yes. In a way it's a circular thing. By you being able to go to your legislative meetings and talk about this, it meant that the National Library of Medicine's director, Dr. Lindberg, could get support when he would go before Congress and say, "you need to fund us because we're doing all of this for your constituents."

F: As I say, I've just given a few examples of the ways we've worked together.

H: Did you feel the consumer health movement had a major impact on the Medical Library Association as well?

F: I think it had a positive impact on us because we put, finally, a consumer tab on MLANET. That tab gets more hits, almost, than our regular members' website. So there's a need out there. People do not think or do not know about the National Library of Medicine. But if they're looking up 'medical library,' they will come to us. If they come to us, then they see that tab and they click on it. It's one of the most popular sites on our website.

H: Were you able to distinguish between who was actually accessing things on your web page? For example, could you have looked to see if the person selecting that tab was a member versus a non-member?

F: We could tell that in a general way, yes, because we know we had a lot of people who were the public who were using our website.

H: Okay, so you knew that it was public use.

F: Yes. We couldn't go look in more detail or we didn't go down further. I don't know if we could have or not. But, yes, I think it just made a difference.

H: You mentioned the national network. Pretty much all of the RML (I shouldn't use acronyms), the Regional Medical Library, staff are members of MLA, and most of the members of the National Network of Libraries of Medicine are also members of MLA. Did you see any changes in the relationship between MLA and the Regional Medical Library Program over the years? It certainly seemed to me, after I had begun working for the National Network of Libraries of Medicine, that there was a lot of interaction going on between MLA and those people. But maybe that was happening before I was there. Do you have any sense of that?

F: Yes, I think we got more and more involved, especially since some of the Spectrum awards came from an RML. It depended on what year it was and what projects were going on. I think it also helped that we were actively exhibiting at the chapter meetings. MLA had always done this, but MLA staff didn't always participate in the exhibit. I changed that and always had staff at the MLA exhibit booth at the chapter meetings and at other meetings so we could get feedback. We were frequently positioned next to the NLM/RML booth. That was a lot of fun and very helpful because then you could actually talk to RML staff who happened to be there one-on-one, and the relationships grew. We'd say, "Ah, what are you doing here? What are you doing there?" It was a very informal information exchange.

H: Even in the twelve years that I worked with the network, it did seem like we were partnering more or we were looking more toward the Medical Library Association as a partner for things that we did in the RML network.

F: Yes. As I said, the original partnership was through the legislative program, because our members needed that resource so much. But then it just expanded from there, because the environment was changing and they helped us to change with it in lots of different ways—lots and lots of different ways.

H: Before we leave the topic of the National Library of Medicine, were there any other major initiatives from either the National Library of Medicine or NIH [National Institutes of Health] as a whole that you can think of that might have affected MLA? Offhand, I can't think of anything outside the National Library of Medicine, but you might be aware of something.

F: I can't really, either. We did occasionally get included in meetings with NIH. But really —and I'm probably forgetting something—for the most part we really focused on NLM and as NLM was related to NIH. We would support funding for NIH as well in our governmental relations program. That's part of our legislative work—we always included that in as part of it because NIH is the mother ship.

H: Well, I think medical librarians have certainly always been the envy of our colleagues in other types of libraries for the relationship we have with the National Library of Medicine. Having our own national library was really a very important thing, I think, for medical librarians.

F: Yes, and it's interesting to me, because there is a national law library, but I think it's integrated with the Library of Congress and it's not the same. I'm so thankful that there is such a thing as the NLM.

H: I don't think the relationship between the American Library Association and the Library of Congress is nearly the same relationship.

F: It's different. I know also, which I think is a little humorous looking back on it, that at one point NLM reached out to American Library Association to have them lobby on their behalf because ALA certainly has a large legislative arm, but ALA refused to do it.

H: Oh, that's very interesting.

F: Yes, I always found that fascinating. That was very early on in the 1990s.

H: We should point out that the one program they have done successfully with the American Library Association is their traveling exhibit program.

F: Oh, yes. Good point.

H: I'm not sure why, but for whatever reason NLM chose to do it. Maybe it's because they expected public libraries to be the primary place that would want to set up these traveling exhibits, but they have done well over the years. NLM just launched their Native Voices exhibit. It will be launched through the American Library Association.

F: I think that's great, because speaking as a former public librarian, that's exactly what you would want. It's perfect. People will have a lot of interest in this. I think that is a very good move.

H: Well, let's move on to a new topic, somewhat related, in that as MLA's executive director you were often the association's representative to other professional library associations. What was it like working with the executive directors of ALA and SLA and the law library group? Which associations did you work with most closely?

F: I think in the beginning of my tenure at MLA our relationships with the other associations were strengthened. I would go to the ALA conference twice a year, both the annual and the midwinter. All the executive directors and presidents, if they were there, would meet together to share information. That was very helpful.

H: That was in place at the time that you became the executive director.

F: It must have been.

H: And that has continued over the years.

F: Yes, and they have continued. It used to be a much more collaborative meeting, but it got a little less so, I would say, as time went on. But the other thing that happened early on was that the U.S. associations (and all the major ones were members of IFLA at that time—which is the International Federation of Library Associations and Institutions) got the idea mostly from Duane Webster, who was executive director of the Association of Research Libraries, to bid to have an IFLA meeting in the United States. I was a volunteer at the last one held in the U.S. in 1985 in Chicago, and Robert Wedgeworth, who was executive director of the American Library Association, was very involved in it. I was a volunteer sitting out on Huron Street, letting people into a party [laughter]. The U.S. executive directors also all got together at IFLA for dinner, because almost all of us would go. And so Duane got this great idea, and that really brought us together. All of us started meeting quarterly to bring another U.S. sponsored IFLA meeting together and we started five or so years out.

H: What year were you planning for?

F: For 2001 to be held in Boston. It was a fabulous meeting. We made over \$300,000 on it. I was the treasurer for the meeting. And Tovah Reis, one of our very active MLA members, was head of local arrangements. She did a fabulous job.

H: Do you think this brought the association directors together because they had to work on a common project?

F: Yes. Another idea that came from Duane, but other people followed, was to start taking vacations together after the IFLA meeting was over. We did a wonderful group trip to China that David Bender organized. He was the executive director of the Special Libraries Association back then in 1996. My sister-in-law, thankfully, went with me, so that all worked very well. The association directors had that very informal kind of relationship, which built other kinds of relationships.

H: Did that continue on through your tenure?

F: Well, not my whole tenure. Duane retired. Roger Parent, who was executive director of American Association of Law Libraries, retired. We got new ALA people. I think what really impacted us was that times started to get tough in 2007, 2008 and onward. The library profession started to lose members, fewer people going into the profession. And the Internet impact.

H: Professional organizations began to lose members as well.

F: Yes, exactly. That's very true. So it became a little more competitive. The Special Libraries Association always wanted to take us over, or ALA thought it would be great to

partner on Librarians without Borders. But I had witnessed other partnerships like that with ALA and suddenly the other group was pushed out of it, so we didn't do that.

H: You chose not to do that.

F: Yes. Things got a little more competitive because of the times, primarily. Not that we didn't have good relations and we still would meet on a regular basis, but it was not the same kind of relationship. For example, back in the mid-'90s, I think for one of our first satellite conferences that MLA did, we partnered with the Special Libraries Association and the American Association of Law Libraries to do that. It was great, but I don't think we ever did it again, though, because, as I say, it was too competitive.

H: It was complicated.

F: Yes. But at an earlier point we did do things like that and it was great.

H: Well, you mentioned IFLA a minute ago. I know you've been active in IFLA. Do you think it's important for the Medical Library Association to be part of that, and what is the impact of that on our members? Why belong to an international group like that?

F: We do have members who are actively involved in the section of IFLA that deals with health sciences libraries. It does let you know that people in the Norwegian medical libraries have the same problems you do. They're expressed in a different way, but it's the same kind of idea, which always fascinated me. I thought, "Oh, that's happening to you, too? But you're in Norway!" And just the cross-fertilization of ideas, learning about things like use of databases. Of course, they all use National Library of Medicine's databases.

H: Of course.

F: And that was a big deal. In fact, before the government got so strict about travel, a National Library of Medicine representative was always at IFLA. Lois Ann Colaianni was very involved; Becky Lyon was very involved; Eve-Marie Lacroix was very involved, because everybody—not only medical libraries but a lot of other groups—were using the databases. I think NLM might have exhibited also, but then, of course, times changed.

H: You also initiated some joint agreements with other international library associations.

F: We did. We had bilateral agreements before I came, but not too many. We had a couple of them, with the German Working Group and with EAHIL, which is the European Association for Health Information and Libraries. We added to that quite substantially with the Japanese, the South Koreans, the Taiwanese, and the Australians. That was, I think, the last one I was involved with. So we have quite a few now, reaching across the ocean.

H: What are the benefits for the members?

F: The other groups get to send a representative to our meeting. It's complimentary registration for the annual meeting and vice versa. We have a member who serves as a rep; that person attends and learns from the meeting of an allied group, and that person reports back. We find out what different medical library groups are doing. They get our journal and we get their journal for free.

H: Would the members of those associations get member rates at our meeting?

F: Yes, they do. If they want to come to our meeting, they get a member rate. The Taiwanese have taken a lot of advantage of that. They usually send five to seven people to our meeting, which I think is kind of amazing. That's just another way that we reach out internationally. I think it provides a lot of plusses and very few minuses.

The dues for IFLA are very expensive. They used to be very cheap, because all the U.S. associations went in with ALA and we paid about \$1,000 a year. That stopped in the early 2000s because IFLA needed more money. And so MLA began to pay about \$12,000 a year.

H: Just the Medical Library Association.

F: Yes.

H: Would that be the same rate that ALA would pay?

F: No.

H: Would they pay even more because of the size?

F: Oh, yes, they paid \$40,000, I think.

H: Wow.

F: It's just a matter of balancing this out. IFLA works on the international stage as far as copyright, open access to information, and freedom of information is concerned. They work with the United Nations on issues. They have gotten increasingly active in this area, which is good. This was started back in the '90s, originally, by Bob Wedgeworth, who was the president of IFLA during his tenure as executive director of American Library Association. He introduced two of these programs to them. Now, though, these topics have been nurtured and nurtured and they've really taken off, and they have actual policy people at IFLA.

So it's different; it's different than it was when I started. I think that the Medical Library Association was doing a study recently about whether they should be involved internationally. And it seemed that maybe they decided that, yes, MLA should, because,

as we were talking before, we were founded collaboratively by Canadians and U.S. people.

H: In that sense, the Medical Library Association has always been an international organization.

F: Always, always. For over forty years we've had the Cunningham International Fellowship, inviting people to come to this country to learn something about medical librarianship in a subject that they choose to study. I just think that especially in this day and age, when everything is so global anyway and we're so connected, it's even more vital now to reach out because you can get good ideas from people.

H: Yes. I personally have attended three IFLA meetings now, and have thoroughly enjoyed getting to meet librarians from other parts of the world, so I'm a big advocate of that. I'm glad that MLA continues to be involved.

F: We were talking about what we did with the other library associations. We were very active with the other groups as far as legislation as well. We did a lot of joint letters to congressional leaders about issues because mostly we agreed. If MLA didn't agree with the others on a particular issue, then we wouldn't sign on to the letter. We worked very actively with ALA and ARL and AALL on issues like copyright that we were very, very concerned with, and that was a good partnership. It went a little crazy; got a little overboard. We backed away from some of the things as they became less necessary, let's say, because those things had already been decided and there was no reason to stay involved. We still invite them occasionally to our Legislative Task Force meetings that we hold in Washington, DC, and then they can enlighten us on certain topics.

H: By "them," you mean representatives of ALA and SLA?

F: Yes—ALA, ARL, occasionally AALL. We still had that partnership when I retired. It wasn't quite the same but it was a good one. That's another way that we relate to the other library groups.

H: One last health science group that I wanted to ask you about was the Association of Academic Health Sciences Libraries, the mission of which always strikes me as overlapping fairly heavily with MLA's mission. How would you characterize the working relationship between the two groups?

F: I think at the beginning of my tenure the relationship was a little tense. I don't know why exactly. I know that they wanted to have more emphasis on the academic health sciences libraries than MLA was giving them, which is why AAHSL was founded. But I think working together on legislative issues and meeting frequently helped a lot. Also, very frequently a president of MLA who I had worked with then became the president of AAHSL, and that was easy. Then we could do lots of cooperative things.

H: My sense is that one of the reasons they formed that group was also to have a group equivalent to some of the other sections of the AAMC organization.

F: That's right.

H: I think it gave them a little bit more stature with AAMC to have the directors of the academic health sciences libraries work together.

F: It did. That's why I thought it really was such a good idea. They have a voice in AAMC. With all the accrediting standards and the standards that AAMC developed, that was pretty crucial.

H: We should point out that AAMC is the Association of American Medical Colleges.

F: I think to have that relationship with AAMC is very crucial. However, in the last year or two AAMC is cutting back just like everybody else and they're not letting so many extraneous groups meet when they're meeting because of meeting space and other reasons.

H: That's becoming challenging for that group.

F: Yes. It's fascinating to watch this change occur because I find it a commentary on associations. I was talking to a friend of mine who worked at the American Medical Association (I actually took her job there when I transferred to another position within AMA). She said before they moved out of the building, which I had worked in, there were floors that had no employees on them, they were empty.

H: Oh, really?

F: All dark, nobody there.

H: Is this a reflection of the American Medical Association cutting back on their employees?

F: Yes. I think probably they have, just like all the associations that I have talked to, seen a decrease in membership for whatever reason. This is kind of a trend now. So they moved into a smaller space.

H: Having worked in a hospital library for more than thirty years, I can remember physicians telling me that they didn't bother to belong to the American Medical Association because they really didn't feel that it was helping them, especially if they were part of a specialty group like the American College of Physicians or Surgeons.

F: Exactly.

H: They felt it was an extraneous thing.

F: Yes, but I think it's a commentary on what's happening to a lot of associations in general today. There is a big challenge.

H: How about some of the other non-library associations? You had interaction with AMIA (the American Medical Informatics Association) and I believe you also interacted with the Joint Commission on Accreditation of Healthcare Organizations.

F: I'll talk about the Joint Commission first. The Joint Commission had an affiliates meeting every year, and I always attended with our member representative. In the beginning it was great; it was free. They would have breakouts about standards, which is why we went, so we could give input to them about the standards. There were hundreds of people at these meetings. As time went on, however, they started charging a registration fee, and fewer and fewer affiliates came.

H: They charged just to attend a meeting?

F: Oh, yes. You got a little lunch. Fewer and fewer and fewer people came. When I went the last time, there were maybe thirty people there and not the same mix at all. We worked very hard in the beginning to keep some mention of access to information, when possible, in the hospital standards. We were successful until the late '90s, and then it got very amorphous. They recommended that someone working in the hospital have twenty-four-hour access to information, but they didn't say how. It just got more and more vague. Later hospitals did not have to have Joint Commission accreditation anymore to get reimbursed for Medicare. Other groups started coming in. The Joint Commission started losing money. In later years you'd go to the meetings and they would tell you about the products that they were selling and very little talk about standards.

H: So the emphasis changed from setting standards to selling products.

F: Oh, yes, very dramatically. I was reminded of this because I took a trip over to Taiwan to meet with the Taiwanese medical library group and did some visits. One of the things we went to was the Joint Commission office in Taiwan.

H: Oh, my.

F: Oh, yes. That was like "back to the future." They were still in Taiwan because they don't have any competitors. There they were still doing the things that they had always done.

H: The main accrediting agency.

F: Yes. I found it fascinating. It just reminded me of how much it has changed over the years. They have a huge international arm. It grew and grew and grew and grew.

H: Interesting.

F: I think it was good for MLA to be involved in the Joint Commission back then. Now we still have a liaison to it. I'm not so sure of the value.

H: I think the chances of them bringing back any mention of requiring a library in the hospital is probably pretty slim. Some of our members think that we haven't tried hard enough over the years.

F: Oh, we tried hard.

H: I think what I've seen from the people who've represented us at the Joint Commission meetings is that they've done everything they can to try and talk them into the need for libraries.

F: They were great. Margaret Bandy was a wonderful Joint Commission rep because she would just get up and say, "You know..." and then she'd start to reel off arguments and they'd be sitting there listening.

H: And she'd give them some evidence.

F: Yes. It was great. We had other good ones, too, but I remember Margaret very well.

As far as AMIA (the American Medical Informatics Association) is concerned, they were smaller than we were. They had fewer members and their members tended to be doctors and nurses involved in computers and medicine. In the early 2000s when I looked at it, they had about 300 medical librarians who were members. We tried to do some cooperative things with them. We had back-to-back conferences a couple of times that I worked on with Betsy Humphreys. Don Lindberg was an early president of AMIA, which I had forgotten.

H: Betsy was very active in AMIA as well.

F: Oh, yes, very. Other NLM staff were very active in AMIA as well. We tried that. It wasn't a bad thing, but we could never get any energy going between us to be more collaborative because they are just very different. They look at things in a very different way.

H: I always had a sense of them not looking at us as equals.

F: Oh, yes.

H: I always had the sense that they would love to have librarians become members so they could get the dues revenue from them, but not as many of their members would have been interested in joining the Medical Library Association.

F: I remember when Naomi Broering was MLA president and we had a joint breakfast meeting with the AMIA board. You were exactly right in your analysis. They're very nice people but they basically ran the whole thing.

H: They were really trying to see how they could get you to support their mission.

F: Yes. Now, what we did do was negotiate for a few things, like reciprocity. If one of our members wanted to attend their meeting they would get AMIA member rates and vice versa.

H: I think I took advantage of that one year.

F: We did little things like that that might help our members, but we were never really successful in forging a close relationship because they're just too different.

H: I know that Nancy Lorenzi was president of AMIA the same year I was president of MLA, and she actually contacted me. I remember we set up a phone call with you and... was it Donald Detmer? I can't remember who the other person was.

F: I don't know if Don was still there.

H: There was a fourth person on the phone call, another person from AMIA. We really couldn't settle on anything that we could do together.

F: I know. Because they came at things in a different way. That's great because then they can represent one alternative. When we had the Informationist Conference in DC, AMIA was engaged in that a little bit with NLM funding.

H: Well, that's good.

F: That was probably the only joint thing we've done. They've changed executive directors a few times in a few years, so they've had some organizational issues. I think their latest director started in November.

H: Well, maybe in the future. Did you ever play an active part as a member in a professional association? For example, I know you are a member of the American Society of Association Executives (ASAE).

F: Yes. One activity I did through ASAE and Association Forum was a lot of continuing education. Thanks to June Fulton's encouragement, I eventually got my Certified Association Executive recognition in 2000, finally.

H: So that was their credential.

F: Yes. It's really a certification because you have to take a test. Then we have to take courses, attend programs and conferences. You receive points like you do for AHIP

[Academy of Health Information Professionals]. It's the same setup except that for ASAE you have to renew your certification every three years. I did do that and I did at points mentor some new members. I also participated in focus groups if they were interested in learning member views. For example, they wanted to know about their journal and how it should be delivered, so I participated in a focus group about that. I gave several presentations about issues such as demand-driven associations, health information literacy, and disaster recovery to small breakout groups and on a couple of webinars. But I was not really active-active and did not serve on committees or hold any offices. Occasionally one of the other library association executive directors would be at a session. Kate Hagen from the American Association of Law Libraries would go and I would see her at some of those. One thing that I did was to take MLA presidents to a training session about exceptional leadership. We did that almost every year, and that was great. They had a consultant give a talk about leadership and associations.

H: Did being a member of that association have any influence on how you viewed being the executive director?

F: That's a good question. I think it probably did, and it helped to be with other executive directors—not library-related ones; just people from other professions. There's the trade association group, which we don't have a lot in common with, and then there's the professional group. It was always very interesting because the AMA staff were there and many medical specialties staff people were there. The law librarians were occasionally active along with some of the American Library Association divisions, such as ACRL (the Association of College & Research Libraries). I also wrote a few articles for their publications and journals.

H: You took advantage of the benefits that they had to offer.

F: Yes, I did. There is also a Chicago group, Association Forum, and I did similar things with them as I do with ASAE and usually was able to attend their meetings. They had a wonderful legal symposium, which I went to every year, usually in Chicago. You got a lot of great tips. I found that incredibly worthwhile.

H: I can well imagine. Let's move to the issue of honors and awards. You've received a number of honors from the Medical Library Association during your tenure with the association. In particular Kent Smith, the former deputy director of the National Library of Medicine, established the MLA Carla Funk Governmental Relations Award in your honor. What was your reaction to that honor, specifically? And in general, how did winning honors from the Medical Library Association make you feel?

F: I was stunned when Kent did that. That came from nowhere. I will be forever grateful to him for a couple of reasons. In library associations occasionally—not in medical associations, but library associations—you have trouble getting people interested in governmental relations. There's a small group that is intensely interested in this. What this award did was highlight the lobbying role that people could play in the association.

He's a very clever man. That was quite clever on his part. As I say, I'm stunned that he used my name on it, but very gratified.

H: But I think he sincerely admired the way you approached governmental relations and your relationship with the National Library of Medicine. I think he sincerely felt that you had done an exceptional job of working with the National Library of Medicine in that area.

F: I think it's good award and I hope that we can get more nominees. I do donate to the award fund myself. Kent started it off, and I told him after he did that that I would reply in kind and I have. So it's got an endowment associated with it. I just hope they can keep people interested in this, because it is important and it helps.

H: It is really the first time we've rewarded people for being involved in legislative activities, so that's a good thing.

F: Exactly. Other things: I was very gratified to receive the President's Award in 2005. Pat Thibodeau, Linda Watson, and I received it for our work on open access issues.

H: Who was the president who gave you the President's Award?

F: Joanne Marshall. Then in 2009 I received an MLA honorary membership from MLA president Mary Ryan. This was a great honor, but I appreciate it even more now that I'm retired.

H: Because you are now a member.

F: Yes, and I can look up things and still connect with the members.

H: You get all the same member publications that we get.

F: Yes. And I can keep track of what's going on. That has been absolutely wonderful. The other award I received is an honorary fellowship in CILIP, the Chartered Institute of Library and Information Professionals, which is the library association in the U.K. I received this because I did some consulting with them to help them reorganize the association. That also was astonishing to me, but also wonderful because I get their journal and I can read and see what's going on. It also fits in with the international work that I did and that the association represented.

H: You were so involved with international groups that I'm not surprised.

F: As you know, we had several very active international members, Bruce Madge being one, Tony McSean being another. I'm still in contact with Tony and when I was over there I saw him.

H: These are people who live in Europe but continue to be members of the Medical Library Association.

F: Or they're just friends now. Now we're all retired and we just exchange information.

H: It gives you a location to travel to in Europe [laughter].

F: That is very true. So I think those honors were kind of stunning to me and I'm just very gratified that people thought enough of me to give me awards, which is always very nice.

H: It's a good feeling, isn't it?

F: It is a good feeling. Well, you've won awards. You know.

H: I think yours are more impressive, though [laughter]. Let's finish the interview with some general reflections about what's happening in our profession and things going on around us. What would you say, looking back, were some of the big environmental changes that took place during your twenty-plus years at MLA, that had the biggest impact on the Medical Library Association or perhaps on professional associations in general?

F: As I read my reports every year to get prepared for this interview, it was clear the biggest impact was, without question, the Internet. I mean, there is nothing like it. Beginning in 1993 every single report I wrote revolved around what we were doing with MLANET, what to name it, what we had to do with it. We revised it probably four times during my tenure, and it kept changing because the technology kept changing, and we kept thinking of new ways to do things. We got the AHIP information on the website. People could finally apply for the academy electronically. It was just all of this conversion. When you work for a small association with a limited budget and you know you have to keep up, that really consumes a lot of our time.

H: The Internet obviously had major impact on the members of the association.

F: Oh, yes.

H: It certainly changed the way we did everything. I suspect that the content of the continuing education courses would have changed as a result of that also.

F: They did. We talked before about getting online courses, getting things posted, doing things in a different way as far as the web is concerned. I would say technology in general was key, for example for us to be able to easily have virtual board meetings or virtual committee meetings. It used to be years ago we'd bring the Membership Committee in, we'd bring the CE Committee in, and we'd bring the board in to Chicago for meetings. Well, we got to the point where we realized, "Oh, no, I think we can do this virtually and it's a lot cheaper." So we began to do that.

Other technologies and the website were just all-consuming. Usually when we'd make a change members would be happy for about a week, and then they're on to something else. I know MLA just changed it again, and probably in a year or two it will be changed again. Initially I thought, "Okay, we get it set up. Great. It's going to have the desired content. We'll just do updates like you do in other things." Oh, no, this is very different.

H: Different animal.

F: I would say that is the biggest impact both on the profession itself and how people operated—how librarians operated within their libraries and how people thought, "Oh, everything's on the Internet so I don't need my librarian anymore."

H: Certainly, courses on database searching became very popular over the years.

F: Oh, yes, there was that. The other thing we talked about earlier is health care reform. I think it made the hospitals in some ways have less money, and so therefore they were looking to cut. They cut the libraries because of the Internet. It meant the closing of some hospitals as well. Also, different health care options arose. Not so many hospital stays, but new ways of health care delivery. That influenced the medical library profession as well.

H: We've seen a lot of discussion about the roles of medical librarians evolving as a result of the changes in health care delivery and the whole health care environment.

F: It is very difficult to keep up with the changing needs of people who go into the medical environment. The graduate library schools and now the informatics schools do some of this. A lot of what librarians learn is either on the job or through their association or other groups now. There is a ton of distance education, tons of courses being offered over the web by everybody. I get them on my computer every day.

H: Although I have to say that I've been impressed with some of the young people coming out of library schools, really good information schools, who really understand metadata and using social media intuitively. The millennials are now taking jobs in libraries and they really do have a different knowledge base and a different approach to doing librarianship.

F: They have to, because it's changed so much. They have to or else there won't be anything for them to do. So that's a good thing. I think those things are what I saw as drivers for the association, and for the members as well, to try to stay ahead, to keep up, to play different roles. We talked about that a little bit yesterday too. Unbelievable.

H: We've mentioned a few names of people over the interview yesterday and today. Is there anyone we missed? Or is there someone whom you would say influenced your career, who had a major impact? I don't necessarily mean just members of the Medical Library Association; this could be someone who's not a librarian.

F: As I said already, one of my bosses at AMA, Bill Cohen, had a great influence on how to make me a better association executive. He taught me a lot. As far as anyone influencing me to go into different things, I don't think that happened exactly, because I went off in different directions on my own.

H: Well, you got into librarianship the way many of us did...

F: Yes [laughter].

H: ...by working in a library and saying to yourself, that's an interesting profession. I could do this.

F: I know. I know. I got ideas and directions from a lot of people I worked with without me probably even realizing it.

H: Is there any one MLA member who had any particular influence?

F: I would say June Fulton had a lot of influence because she was MLA president early on in my time at MLA. She gave me some tips. She wanted me to get my CAE. She encouraged me in that. I asked, "Oh, June, why do I have to do this? I have an MBA from the University of Chicago. Do I really need this?" In retrospect I'm very grateful because, yes, it's a different way of looking at things, and it was very, very helpful.

I would also include you in this list of people, Ruth. When I co-authored papers with people and we really studied some of the issues that fulfilled another part of what I needed. We really got into some intellectual things. I did that with you and also with...

H: Jean Shipman.

F: ...Jean Shipman, Pat Thibodeau, Fred Roper, and Michael Homan.

H: We didn't talk about your publications. Is there any one that stands out as something you really enjoyed because as you worked on it, you learned something new? Now, I don't want you to have to pick out one of us as a better co-author than the other, but...

F: Well, I liked our expert searching one. That was good. When Pat and I updated Eloise Foster's hospital library survey, it was fascinating to me to see the changes that had occurred. And we were able to compare it. Eloise was even interested in that a little bit, I think. That was very enlightening because of what was going on in hospital libraries. Eloise did her study in the early '90s, like '90-'91. It was published in '93 or thereabouts. That was interesting. The other one I really worked hard on was the health information literacy paper with Jean Shipman, and the lady we hired as our consultant for that project.

H: Some of those things I think you even translated into papers that you gave at international meetings, which is a nice way to spread what you're learning to other associations.

F: Exactly. Michael and I gave at least one presentation at IFLA on Librarians without Borders, which was fascinating because we had a huge audience there for this. One of the people in the audience—I forget what country she was from—asked, "Why did you trademark that name?" and I said, "We only trademarked it in the United States. We wanted to brand it and we wanted to be able to get funding, which we did." I said, "If you want to start a Librarians without Borders in your country, you go for it. The Canadians have done that." I talked to them, because they were at ALA a couple of times and we just exchanged ideas. Their emphasis is a little different than ours.

H: Where did the idea come from? I know there's a Doctors without Borders group. It actually started in France, didn't it?

F: It did.

H: But how did it come about that you did that?

F: In 2004 or 2005 Michael Homan was the chair of the Global Initiatives Task Force. Based upon a report from them we concocted this idea, thinking this would be a good way to reach out to other countries, because that's what we do. That is all thanks to Lenny Rhine that we got to begin it. We received an \$80,000 grant from the Elsevier Foundation thanks to Tony McSean who worked for Elsevier then and Lenny Rhine who has always been engaged in international activities, and they keep funding it because they are incredibly involved in a lot of the international activities giving free access to publications to developing countries.

H: Free to the developing countries, but probably paid for by U.S. library budgets.

F: I was very happy we were able to trademark the Librarians without Borders name, and I hope the association keeps doing it.

H: It seems to me a brilliant idea to use that name, because Librarians without Borders just gives you such a feeling of going across borders and helping people in other countries.

F: Right. We debated saying Medical Librarians without Borders, and I said, "Michael, that's too long. Maybe other people might want to do this, too."

H: I'll bet the American Library Association would love to get their hands on it.

F: Yes, ALA did want to get its hands on it and wanted to partner with us. Based upon things that had previously happened with other associations, I was cautious, but receptive, but then nothing ever came of it as soon as we trademarked the name. That's

okay, because what we're doing is really focusing on health care information, and I really feel that's what people in those countries need. We have doctors take the courses we offer as well as librarians. That's what makes a difference over there.

I would say there are probably other people who influenced me. M. J. Tooey and her Vital Pathways Project, also an excellent study, a great initiative that focused on hospital librarians and libraries. That's always needed. There are probably others, but those are people who come to mind.

H: Carla, you have a reputation for getting things done behind the scenes. I've observed from personal experience that you tended to do lots of things for the Medical Library Association without taking credit for it. It seems you did a lot of things behind the scenes. In fact, as I was thinking about this this morning, the term ' leadership' came to mind. I looked it up in Wikipedia to see if I was on the right track. It is a leadership style of someone who, rather than building power, sees leadership as something where you share with the members, or leadership that benefits the group of people you're working with.

F: I would say that is a very good description.

H: That seems to be your style.

F: Yes. We talked about this a little bit yesterday, but I really don't have a big ego. I really don't care. I like to see things get done in a good way. As I said yesterday, it's like a production to me. You start, and you want it to have an ending that you want to have.

H: So you're the behind-the-scenes director.

F: Yes. I'm sort of the Wizard of Oz person behind the curtain. I have gotten a lot from the people I've worked with, too. Although sometimes I can't think of the ideas, one of my skills is when someone else presents an idea, I can tell whether it's good or not.

H: And you're good at taking an idea and actually going through the process to make it succeed.

F: Mm-hmm. As I said yesterday, this is a membership organization so I believe that staff and members partner. It's a partnership that you have and each fulfills a role there. You certainly want the member to feel good about being a part of this group, and you want them to feel like they've accomplished something, that perhaps they've learned something, too. It's forwarding their career perhaps, whatever they hope to get out of the association. What you work on is to make sure that that happens, if at all possible. Usually you can be successful, but occasionally not. That's life.

H: I would say that you have been very successful at doing that. I speak on behalf of the members when I say that you've done a fantastic job.

F: Well, thank you.

H: Are there any major issues that you see as confronting the library profession, and particularly the medical library profession, looking forward? Related to that, what advice would you give to anyone who was thinking about joining the library profession?

F: I would say that you have to have, as we know, a very strong technological background. Not to give everything over to informatics and computing, but you have to have that. What I always felt the library community brought to that was the human part. They could relate technology to people. It wasn't, "I'm just sitting at a computer doing this." No. You take what you learn or what you can do and you can relate to other people—you're able to help them find the information they need using the technology. That's the difference, I think, between an informatics person and a librarian. It's that human part.

H: Librarians have always played a gateway role.

F: Exactly. Thank you.

H: I think that's a good point: that we continue to do that even using the technology.

F: Yes. They also have to be flexible, look at the environment they find themselves in and adapt. If you see that someone needs something that you can do, even though it doesn't seem like it's a traditional library task...

H: Or it's not in your job description.

F: Exactly. Do it, because very frequently it leads to something else which is good. Librarians have a ton of skills. I always thought it is sometimes very humorous. I don't know if I was at the Special Libraries Association or at the American Library Association at a meeting, and there was someone there who worked for the FBI. What they were doing was looking for librarians, because they knew that librarians could find information in all sorts of ways.

H: Could do research very well on the Internet. Right.

F: Yes. I thought that was hysterically funny but true. And the FBI person said, "Oh, yeah, we're here."

H: Librarians tend to be organized.

F: There's a new role if someone feels like it. But, yes, it's those fundamental skills. I think the schools are better and better about teaching those skills, which are very crucial.

H: I think you bring out a good point in that whatever organization you are working for as a librarian, if you look around the organization and there is an information need...

F: Do it.

H: ...it makes sense for the librarian to step in and say, "I can do that, or I can support that."

F: Right. I think way back in the '70s and '80s, we probably weren't so outgoing. Some were; a lot weren't putting themselves out there, seeking connections. Not good at marketing themselves. I see a difference today. The younger people or people newer to the profession are more outgoing, are better, are more technical. I also find it fascinating that there are more and more men going into this profession. Where before it was 80% female and 20% male, I think that is changing, just because of the skill sets that people are recognizing. "Oh, yes, we need that, and we need someone to do that and coordinate this." Big data, translational science—all of that. That's what I would say—just to be flexible, look at potential new roles, and get the best technical education.

H: And to continue to educate yourself throughout your career.

F: Exactly. Always. I find it interesting that in general, the American Library Association or any of its divisions have tried a few things, yet they cannot, at this point, establish some kind of continuing education, a formal program like we have. They do have one-time courses and programs. They tried and they do have something, but it's not quite the same sustained commitment.

H: It may be the culture in some organizations. People are too competitive and not able to cooperate on things when they really want to be competing.

F: Maybe. I don't know.

H: Any final thoughts on the future of professional associations as a whole?

F: Well, I talked about AMA's experience. I think that the associations will still be around in the future. I think that they have to operate in very different ways, and some will and some won't, to appeal to this newer generation. I think this generation will find out—and they already have—that just sitting on Facebook all day or communicating on LinkedIn or whatever doesn't quite have the same effect as actually either working on a project together or having a face-to-face meeting with someone. I think maybe we went through that and now they're realizing, "Wait a minute, it would be fun to get together and actually see somebody." I don't know. I don't know their minds well enough and how social they are. Because associations are essentially social. They bring people together, which is the whole idea.

H: Humans are social beings so, one way or another, they're going to continue to socialize. How much they do it in-person remains to be seen. It will be interesting to find out what associations do twenty years from now in terms of how much in-person contact they have versus virtual. I somehow just can't believe it's all going to be virtual.

F: That wouldn't be fun. Even though I'm an older person.

H: It's pretty hard to have a drink virtually.

F: That's what I always think. I've got a nephew and a niece who are in their very early forties, and they do a lot of face-to-face socializing, even more than I did. They have people over to dinner all the time. This is kind of the same thing in a professional way. My niece and a friend of hers have founded an association, MedtechWomen, and they started their first conference two or three years ago.

H: So this runs in the family. You have a niece who's starting an association.

F: Yes, she's been in the medical devices field for a long time, in sales and other roles. They decided to set up their little conference, because there was not a program that got women together who were in medical technology. It's getting a little bit bigger now, and I worked with her a little bit on the rules and regulations for organizations.

H: She's very lucky to have you as an aunt.

F: No, she's a very, very smart woman, and she is a forty-something. So this is what they decided to do. I'm describing this because it gives me hope that everyone will find ways this technology will work for us.

H: We know that there will be a future for the Medical Library Association because we've had such excellent leadership from our executive director for the last twenty years.

F: Thank you, Ruth.

H: You've kept us moving forward. I want to thank you for taking time to sit down with me and talk a little bit about your tenure at the Medical Library Association. I really appreciate it.

F: I really appreciate you doing this. These were excellent questions. They made me think; made me go back and research. I'm glad we did this now and not next year.

H: Because you can still remember!

F: I know, I know.

H: All right. Thank you, again, and we're going to sign off now.

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CARLA J. FUNK

Medical Library Association 65 E. Wacker Place, Suite 1900 Chicago, Illinois 60601 Work: (312) 419-9094

EXPERIENCE

MEDICAL LIBRARY ASSOCIATION, Chicago, IL EXECUTIVE DIRECTOR.

Serves as chief executive officer for the 4,000 member association of health science information professionals. Responsible for planning, execution and coordination of the association's programs and services including educational opportunities, publications, and legislative activities; administers \$3 million operating budget; represents the association.

INTERNATIONAL ASSOCIATION OF SCHOOL LIBRARIANSHIP, Chicago, IL 2011-2014

EXECUTIVE DIRECTOR

Served as executive director for the 600 member association of school librarians from around the world as part of MLA's association management cost center. Supervised membership program, Board meeting organization, financial reporting, website maintenance.

AMERICAN MEDICAL ASSOCIATION, Chicago, IL

DIRECTOR, MEDICAL STUDENTS SERVICES

1989 - 1992

Administered the Medical Student Section representing over 30,000 student members. Responsibilities included department financial and personnel administration, planning and coordinating two national meetings per year in addition to Section Board meetings. Initiated programs, publications, and activities on national health issues relevant to student members. Initiated International Medical Student Studies Program and effective legislative network. *DIRECTOR, SPECIAL PROJECTS* 1987 - 1989 Responsibilities included planning and coordinating AMA's National Leadership Conference for over 1,000 medical leaders. Administered the Women in Medicine project serving the needs of the women membership segment. Initiated a study of leave options for women physicians in hospital settings, residency programs, and group practices.

DIRECTOR, AUTOMATION &TECHNICAL SERVICES 1983 - 1987 Directed technical services operations and automation projects for the AMA library. Supervised 13 staff. Operations included acquisitions, cataloging, serials control, interlibrary loan and fee-based document delivery service. Updated and initiated new automated procedures, particularly for serials control and exchanges; managed library remodeling. Supervised indexing of JAMA, AMA specialty journals, AMNews and AMA Digest of Official Actions.

SUBURBAN LIBRARY SYSTEM, Burr Ridge, IL 1980 - 1983

CONSULTANT. Provided consulting services to all types of libraries' boards of directors and librarians in human resources, budgeting, long-range planning and grant preparation. Developed and presented seminars on above topics. Managed job placement service.

1992 - present

	 WARREN-NEWPORT PUBLIC LIBRARY DISTRICT, Gurnee, IL 1977 - 1980 DIRECTOR. Administered a library district with 20 staff and a \$400,000 budget. Organized a successful building referendum campaign. Directed completion of new library facility. Developed first long-range plan. Initiated automated circulation and cataloging operations in the library.
	NORTHBROOK PUBLIC LIBRARY, Northbrook, IL1973 - 1977ADULT SERVICES LIBRARIAN; HEAD OF TECHNICAL SERVICES.Responsible for adult reference services, outreach and programming; acquisitionsand cataloging of library materials. Developed coordinated acquisitions program(CAP). Supervised 12 staff. Implemented and managed shared CLSI automatedcirculation system for seven public libraries. Helped develop system specificationsand procedures that were adopted for statewide interlibrary loan and cataloging.
SIGNIFICANT PROFESSIONAL GRANTS/ ACTIVITIES	Awarded a two-year \$52,000 grant from the Elsevier Foundation for the MLA Librarians Without Borders® e-library training initiative, January 2015.
	Member, National Committee for the IFLA 2016 World Library and Information Congress, 2014 – present.
	Awarded \$75,000 from the National Library of Medicine to further develop MLA's Disaster Information Specialization, January 2012.
	Member, San Jose State University SLIS Center for Information Research and Innovation Advisory Board, 2012- present.
	Awarded a \$130,000 contract from the South Central Region, National Network of Libraries of Medicine, to continue the association's involvement in the ALA Spectrum Scholarship program for minority LIS students, Fall 2010.
	Awarded a two-year \$72,000 grant from the Elsevier Foundation for the MLA Librarians Without Borders® e-library training initiative, January 2010; previous \$35,000 grant awarded in 2008.
	Member, Friends of the National Library of Medicine Board of Directors, 2009 – present.
	Co-principal investigator, \$250,000 National Library of Medicine contract for health information literacy research, 2006-2008.
	Advisory Panel member, IMLS grant, "High school to health sciences librarianship and informatics project." 2006 – 2008.
	Trademarked in the U.S., the Librarians Without Borders title for MLA's international activities which has helped brand the program worldwide, 2006-2007.
	Consultant, CILIP (U.K.) Governance Review Task Force, 2006.
	Member, National Library of Medicine Long Range Plan Planning Panel 2, 2005-2006.

Member, National Library of Medicine Search Committee for Associate Director for Library Operations, 2005-2006.

Dominican University Graduate School of Library and Information Science Advisory Board, 2005 – present.

Treasurer, U. S. Library Associations Library Disaster Relief Fund, 2004 – 2007.

Treasurer, Fellowships for the Americas program, a scholarship program sponsored by the U.S. library associations, 2002 - 2004, for international librarians to attend IFLA.

Principal investigator, \$208,000 NLM grant for minority recruitment, awarded June 2000; additional award, July 2001, 2010. Grant expanded to include leadership program with Association of Reearch Libraries.

National Patient Safety Foundation, member, current awareness committee, 2002.

University of South Carolina Graduate School of Library and Information Science National Advisory Committee, Columbia, SC 1999 – 2003.

Treasurer, IFLA 2001 Conference and Exhibition, 1997-2002.

Member, IFLA/MLAS Standing Committee, 1993-2007; Treasurer, 2003-2007.

Consultant, "Collaboration in a Continuum of Learning", NLM Planning Grants for Education & Training of Health Sciences Librarians, LM-95-002, 1995-1998.

National Library of Medicine Education and Training Panel Steering Committee, 1993.

JCAHO/HIMSS Educational Program Development Workgroup, 1992-1993.

Member, American Association of Medical Society Executives Annual Conference Committee, 1989 - 1993.

Chair, American Library Association Local Arrangements Committee, 1989 ALA Conference.

Vice-President/President, Illinois Library Association, 1986-1988.

Adjunct Faculty, Rosary College (now Dominican University), Graduate School of Library and Information Science, 1986 - 2000.

Member, LSCA Title III Subcommittee for the Illinois State Library; Illinois State Library Advisory Committee. 1983 - 1987.

Member, Legislative-Library Development Committee, Illinois Library Association, 1983-1985.

Vice-President/President, Resources and Technical Services Section, Illinois Library Association, 1978 - 1980.

Member, Illinois State Library Interconnect Project Committee, 1974 - 1979.

PROFESSIONALAmerican Society of Association Executives**MEMBERSHIPS/**Association Forum of Chicagoland**AWARDS**Beta Phi Mu

Certified Association Executive (CAE), American Society of Association Executives (ASAE), 2001 – present.

Honorary Member, Medical Library Association, awarded May 2009.

Honorary Fellow, Chartered Institute of Library and Information Professionals (U.K.), awarded Fall 2008.

MLA Carla J. Funk Governmental Relations Award established in 2008 by Kent A. Smith, former Deputy Director, National Library of Medicine.

President's Award, Medical Library Association, 2005.

American Society for Association Executives (ASAE) Sharon Perry Award Scholarship for outstanding leadership, 2002.

Listed in Who's Who in America, Who's Who in the Midwest, Who's Who of American Women, Who's Who in Medicine and Healthcare, Who's Who in the World.

PRESENTATIONS Funk, Carla J. "Librarians Without Borders®: MLA's Global Health Information Initiatives." Keynote presentation for the New York-New Jersey Chapter of MLA, New York, New York, October 2014.

Funk, Carla J. *"Tips on Association Leadership"*. Presentation to the American Library Association Division presidents and executive directors concerning roles and responsibilities, October 2012.

Funk, Carla J. "*The Medical Library Association*." Presentation to the Association of Research Libraries leadership, May 2012.

Funk, Carla J. *"Professional Advocacy: the Association's Role"* presentation for the NN/LM Mid-Atlantic Region Leadership Institute (MAR-LI), Philadelphia, PA, February 2011.

Funk, Carla J. "*Demand Driven Associations: A Model for the Future*" presented as a webinar for the Association Growth/Nonprofit Summit, August 2011.

Funk, Carla J. "Promoting International Exchange and Cooperation: the Medical Library Association's Librarians Without Borders® Program", presentation for the International Workshop in International Exchange & Cooperation of the LIS Profession, Taipei Medical University, Taipei, Taiwan, December 2011.

Funk, Carla J. and Fang, Min-Lin. "Promoting International Exchange and Cooperation: the Medical Library Association's Librarians Without Borders® Program", Taiwan Library Association Conference, National Central Library, Taipei, Taiwan, December 2011.

Funk, Carla J. and Homan, J. Michael. "<u>Partnerships, collaboration, promotion:</u> role of the Medical Library Association's *Librarians Without Borders*® in <u>ensuring quality information for improved health</u>". Presentation to the IFLA Health and Biosciences Section at the WLIC: 76th IFLA General Conference and Assembly, Gothenburg, Sweden, August 2010.

Shipman, Jean P., Kinzie, Lenora, and Funk, Carla J. "Changing attitudes and reaching new altitudes via results of the MLA/NLM health information literacy research project (HILRP)". Presentation to the MLA Midcontinental Chapter, September 2009. Awarded Best Paper by the Chapter.

Shipman, Jean P. and Funk, Carla J. "<u>Teachers of Health Information Literacy –</u> <u>Future roles for librarians as supported by the Medical Library</u> <u>Association/National Library of Medicine's Health Information Literacy Research</u> <u>Project</u>". Presentation to the IFLA Health and Biosciences Section at the WLIC: 75th IFLA General Conference and Assembly, Milan, Italy, August 2009.

Funk, Carla J. "Health information literacy and the community: a demand driven solution." Presentation for an Association Growth Summit webinar, December 8, 2008.

Funk, Carla J. "Health information literacy and the community." Presentation at the American Library Association Annual Conference, Anaheim, CA, June 2008.

Funk, Carla J. "Management of the professional association." Presentation for the Symposium on the Association of Research Libraries: History, accomplishments, future developments. Columbia University, April 25, 2008. <u>http://www. columbia. edu/cu/lweb/conferences/2008/arl-symposium/proceedings/index.html</u>.

Co-organizer and moderator for the IFLA Mangement of Library Associations/Continuing Professional Development and Workplace Learning Sections joint session, "Library association leadership development" at the WLIC: 73rd IFLA General Conference and Assembly, Durban, South Africa, August 2007.

Funk, Carla J. "Avenues of advocacy: Using standards to make a difference." Presentation at the American Library Association Annual Conference, Washington, D.C., June 2007.

Funk, Carla J. "When disaster strikes." ASAE Legal Symposium presentation, Chicago, IL, April 2006.

Funk, Carla J. "National dialogue on the curriculum of readiness for the 21st century librarian- preparing leaders for 21st century library and information service. American Library Association Annual Conference, June 2005.

Funk, Carla J. "Health information literacy: the power of partnerships." American Library Association Annual Conference, Orlando, FL, June 2004.

Conference coordinator and panelist. Informationist Conference, Bethesda, MD. Sponsored by the Medical Library Association and the National Library of Medicine. April 2002.

Funk, Carla J. "Consumer health credential," The Public Library and Consumer Health symposium, January 2001.

Chair and moderator, "Key themes for the 21st century", 8th International Congress on Medical Librarianship, London, July 2000.

Funk, Carla J. "Quality information = quality healthcare." SLA Biomedical and Life Sciences Division at SLA Annual Conference, Minneapolis, MN. June 1999.

Organizer and presenter, "Association strategies for success", Round Table on the Management of Library Associations program, IFLA, Bangkok, Thailand (August 1999)

Keynote speaker, University of Pittsburgh School of Library & Information Science Life Sciences Reference Research Institute, May 1996. "Evolving roles of life and health sciences librarians for the 21st century."

Panelist, Partnerships for Networked Consumer Health Information Conference, Rancho Mirage, California, May 1996, representing the library community.

Presenter for numerous seminars for library associations, library systems and other groups on long-range planning, personnel issues, library operations, and library education.

PUBLICATIONS Funk, Carla J., Homan, J. Michael, and Rhine, Lenny. "Librarians Without Borders®: Building In-Country Research and Information Provision Capability", *Against the Grain*, April 2014: pp. 14-18.

Thibodeau, Patricia L. and Funk, Carla J. Trends in hospital librarianship and hospital library services: 1989 to 2006. JMLA, v. 97, no. 4, Oct 2009: pp. 273-279. (http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2759173/)

Holst, Ruth, Funk, Carla J., et. al. Vital pathways for hospital librarians: present and future roles. JMLA, v. 97, no. 4, Oct 2009: pp. 282-292. (http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2759170/)

Shipman, Jean P., Kurtz-Rossi, Sabrina, and Funk, Carla J. The Health information literacy research project. JMLA, v. 97, no. 4, Oct 2009: pp. 293-301. (http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2759165/)

Funk, Carla J. ARL and Association 3.0: ten management challenges. portal: Libraries and the Academy, Johns Hopkins University, July 2009. (<u>http://muse.jhu.edu/login?uri=/journals/portal_libraries_and_the_academy/v</u> 009/9.3.funk.html)

Funk, Carla J. Using standards to make your case: examples from the medical library community. New Library World, v.109, nos. 5/6, 2008: pp. 251-257.

Funk, Carla and Humphreys, Betsy. Foreword to Using benchmarking needs assessments, performance improvements, outcome measures, and library standards: A how-to-do-it manual, by Rosalind Dudden. Neal-Schumann, 2007.

Funk, Carla J. Towards a 21st-century association: Trends in governance of membership bodies. Library + Information Update, CILIP, May 2007: v. 6 (5), pp. 25-26.

Funk, Carla J. Demand-driven associations: A model for the future? Journal of Association Leadership, ASAE: Fall 2006: v. 3, n. 4.

Thibodeau, Patricia and Funk, Carla J. U.S. medical libraries and open access. Journal of EAHIL, v. 1., no. 4, November 2005.

Funk, C. Health science librarians and health information literacy, poster at the 2005 MLA annual meeting. Developed on behalf of the MLA Health Information Literacy Task Force, May 2005.

Funk, C. The power of many, commentary. Journal of Association Leadership, Winter 2005, v. 3, n. 1.

Holst, R. and Funk, C. State of the art of expert searching. JMLA, v. 93 (1), January 2005.

Flemming, T., Dorsch, J., and Funk, C. The Academy of Health Information Professionals: ripe for research. JMLA, v.92 (3), July 2004.

Thibodeau, P. and Funk, Carla J. MLA and open access. MLA News, April 2004.

Thibodeau, P. and Funk, Carla J. Quality information for improved health. PloS Biology, February 2004.

Funk, Carla J. "The Medical Library Association" entry, Encyclopedia of Library and Information Sciences, electronic edition (publication date 2002, 2009).

Funk, Carla J. Evolving roles of life and health sciences librarians for the 21st century. Keynote address for the Life Sciences Reference Research Institute, May 6-10, 1996, University of Pittsburgh. BMLA).

Roper, Fred. W., Barron, Dan. D., and Funk, Carla J. Collaboration in a continuum of learning: developing the next generation of leadership. BMLA, v. 84(4), 1996.

Funk, Carla J. Paying for member services. Prepared for an IFLA/RTMLA presentation. RTMLA Newsletter, 1995.

Funk, Carla J., Webb, Reneta. and Corcoran, Kate. Health sciences librarianship. Prepared for and referenced in the NLM Education and Training Panel Report (unpublished).

Funk, Carla J. and Pierceall, Kimberly. MLA headquarters and copyright: an editorial. BMLA, v. 81(4), 1993.

Funk, Carla J. In support of research. Editorial. *BMLA*,v.80(4) Oct.1992.

Funk, Carla J. MLA's role in JCAHO revision. *MLA News*, no. 245 May 1992.

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