

MEDICAL LIBRARY ASSOCIATION

ORAL HISTORY COMMITTEE

INTERVIEW

WITH

ALISON BUNTING

Interview conducted by Diane McKenzie

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Edited by

Joan S. Zenan

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PUBLICATION NOTE

A joint interview of Rachael K. Anderson and Alison Bunting (conducted April 4, 2003) is also available as part of the Medical Library Association Oral History Project.

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CONSENT FORM FOR ORAL HISTORY INTERVIEW

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 DIANE MCKENZIE on 4/2/03 + 4/4/03. I understand that my interview 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.
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ALISON BUNTING
Name of Interviewee

[Signature]
Signature

Date 4/4/03

DIANE MCKENZIE
Name of MLA Interviewer(s)

[Signature]
Signature

Date 4/4/03

Accepted by: [Signature]

MLA Executive Director

Date 12/21/04

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ALISON BUNTING

Biographical Summary

Alison Bunting received her library degree from the University of California, Los Angeles in 1970. Her first professional position was as an Interlibrary Loan and Reference Librarian at the Louise Darling Biomedical Library at UCLA. Her career continued at the Biomedical Library as Head of Interlibrary Loan, Head of Consulting and Training Services with the Pacific Southwest Regional Medical Library Service, Associate Librarian and then Director of the Library and the RML from 1984 until her retirement in 2002. In addition, Alison served as Associate University Librarian for Sciences from 1991-2002, Co-Director of the UCLA Info-Share Project from 2000-2002 and, delayed her retirement to serve as Interim University Librarian in 2002.

Within the Medical Library Association Alison was on the Board of Directors from 1982-1985, chaired the Continuing Education Committee in 1980-81 and the National Program Committee in 1979-1982, and was elected to the Nominating Committee three times. She served as Representative to the SLA Competencies Survey Advisory Committee in 1997-1998, as Representative to the Association of Academic Health Sciences Library Directors from 1988-1991, and on the joint AAHSLD/MLA Task Force to Develop Guidelines for Academic Health Sciences Libraries from 1983-1987. Among other committee appointments, Alison was on the Fellows and Honorary Members Jury, the Janet Doe Lectureship Jury, and, from 1989 through 2001, was Editor in Chief of *Current Practice in Health Sciences Librarianship*.

She was also active in other professional organizations. She served the Southern California and Arizona Chapter as President, Program Chair, and Member of the Advisory Council, and served the Librarians Association of the University of California, Los Angeles Chapter as President and Representative to the Advisory Committee for Strategic Planning for Information Resources in the Research University. She was the Association of American Medical Colleges (AAMC) Representative on the Council of Academic Societies and on the AAMC Information Resources Program Committee. Her support for the Association of Academic Health Sciences Library Directors(AAHSLD) included serving as President, 1990-1991, as Chair of the Finance Committee,1991, Chair of the Program Committee,1986-1987, Chair of the Search Committee for the Annual Statistics Editor, 1993, and on the Board of Directors from 1986-1989. She was involved with the National of Medicine as Chair of the Board of Regents in 2002-2003, Chair of the Biomedical Library Review Committee, 1996-1997, and as a Consultant for the

Planning Panel on Outreach Programs, 1988-1989, for the Planning Panel on Building and Organizing the Library's Collection, 1985-1986, and for the Long Range Planning Panel on the Education and Training of Health Sciences Librarians, 1993-1994.

Alison's UCLA academic service career was also varied and prestigious. From 1984 until her retirement she served as Adjunct Lecturer at the UCLA Graduate School of Library and Information Science. She served on a wide range of UCLA academic committees, the UCLA Research Science Advisory Board, and the Deans Education Council; and chaired the Copyright Committee, the Public Service Council, the Physical Plant Committee, and the Library Computers, Information Technology, Telecommunications Committee.

Alison has published broadly and received numerous honors and awards. She elected UCLA Graduate School of Library and Information Science Senior Fellow in 1989, and received the Librarians Association of the University of California, Regional Medical Library Program Research Award in 1985. She received the Medical Library Association President's Award in 1988, presented the Janet Doe Lecture in 1993, and was elected a Fellow of the Medical Library Association in 1998. In 2001, she received the association's highest honor, the Marcia C. Noyes Award.

[Tape 1, Side A]

Diane McKenzie: This is a Medical Library Association oral history interview with Alison Bunting. It is April 2nd, 2003. We are in Sonoita, Arizona, or very near to Sonoita, in the Arizona grasslands at about 5000 feet and about 45 minutes southeast of Tucson, and the interviewer is Diane McKenzie. I would like to start out by asking you why did you go into librarianship? And that can be as broad or as narrow as you like.

Alison Bunting: Well, I think that I went into librarianship because my mother had worked in libraries but, to be honest, I never had a conscious plan to become a librarian. I was an undergraduate at the University of California, Irvine, and majored in French. I was accepted to the master's program in French, and after the first quarter of that decided it really wasn't for me, and decided I needed to figure out something else. For some reason, I just applied for library school and was accepted, and my mother was delighted when that actually happened. But I don't ever remember us discussing that as a profession, but it must have penetrated into me as one option to consider, as a librarian.

M: You didn't work in libraries?

B: No. I never did. I actually during college worked as a medical transcriber and considered becoming a nurse. My father, whose grandfather was a physician, said, "No, don't become a nurse. They really don't ever have a good future." His vision of it, I think, was the nurse in the time of his grandfather who was the handmaiden to the physician. The fact that I had worked as a medical transcriber did influence how I ended up as a medical librarian.

M: So where did you go to library school?

B: I went to UCLA. At that time it was called the Graduate School of Library and Information Science. It was a four quarter program. Later on, a few years after I graduated, it expanded to be a two academic year program.

M: And that was in the late '60s?

B: Yes, I enrolled in 1969. I started in the summer of '69 and graduated in June of 1970.

M: So what was library education like then? What type of courses did you have? What was the program?

B: It was a very traditional program I would say. It emphasized the basics like reference. We had three required quarters of reference, two required quarters of cataloging. What was innovative and different at the time was that UCLA had a two track program. One was the MLS and the other one was an information science degree. I was in the regular MLS program, but we did have an introduction to information science which was taught

by Bob Hayes. And I remember that we used the manuscript of the book that he wrote with Joseph Becker as our text for the class. It was on reserve and we would go and consult the manuscript chapters. That was one of the more exciting courses. He was an engineer who had become interested in and involved in information science, and later went on to become the dean of the UCLA program at one time [1974-1989].

M: So that was a memorable course and a memorable instructor. Were there other interesting people and courses?

B: I would say the other most memorable course was the medical librarianship course, which Louise Darling taught.

M: I wondered how you first became acquainted with Louise. So that was through this course?

B: No, actually when I went for my interview for library school I was interviewed by the then Dean Andrew Horn. He asked me if I needed financial aid or a job, and I said I needed a job, and because I had worked as a medical transcriber he sent me down to the Biomedical Library. He got on the phone and called Louise Darling and said, "I have a library school student who will want a job when she comes." He actually told me he was admitting me. He said, "There is a faculty committee who will decide on this but you will get in." Which I thought was rather interesting. He called Louise and Louise said, "Send her down." So I found my way down to the Biomedical Library, which was on the south end of the campus, wending my way through the labyrinth and structure that is the Center for the Health Sciences, and met with Louise. And then she sent me to interview with every one of the division heads of the library because she told me that they liked to hire library school students. So I interviewed with Martha Gnudi, who was the head of the History Division, and she told me that she expected lots of accuracy. The head of acquisitions told me it would be lots of fun to work for him. I also interviewed with the head of cataloging. Louise called me before my courses began and said she definitely had a job. I ended up working as a student assistant in the Cataloging Division of Biomed.

M: And it probably required accuracy there.

B: Yes.

M: So one of my questions has to do with the internship program that I know produced so many medical librarians and many directors. Were you then part of that or how did you become involved?

B: No, I was not part of it. By virtue of my work in the Cataloging Division I became immediately interested in health sciences libraries. It was very clear to me that it was an exciting profession. There was much more going on with technology than anything that

my other classmates were experiencing where they were working in other jobs or had worked. The Biomedical Library was just starting the Regional Medical Library. That was in 1969. I just felt that this was a really good environment and one that was exciting. The other thing that was clear was that because we were serving health professionals there was an imperative to deliver information as rapidly as possible because there could be life-and-death situations. There was more money going into ensuring that the libraries had the resources that they needed to fulfill that mission. The other thing that impressed me was the fact that there was a National Library of Medicine that was really focused externally on serving the health professionals in the country as compared to the Library of Congress, which was really focused primarily on serving Congress, and wasn't doing much in the way of programs for libraries in the country. So those factors, which I really observed, and I interacted with the interns who were enrolled that particular year while I was a library school student. They had to spend a quarter in cataloging, for example, so I got to know them. I actually applied for the internship program as I was finishing my degree. But there also were some jobs open in Biomed and my husband, Wade, had just begun his doctoral studies at UCLA. We needed the money so I ended up taking a job rather than the internship program. I don't know whether I would have been admitted or not to the internship program because there was a preference for people with science backgrounds in that program, and I didn't have that.

M: I want to back up and see if you have anything to say about the course. You said the course was important, that Louise taught, and she was such an important person in medical libraries and I don't think anyone has ever really described the course. People have described their experiences in the internship, but not the course.

B: UCLA had just moved on from a semester system to a quarter system and she was quite frustrated. Louise really wanted to introduce the whole environment of health sciences libraries and she had a combination of faculty coming in to talk to us and talk about their research needs. The Biomedical Library serves both health and life sciences at UCLA so the course was on health and life sciences libraries. So she had faculty come in and talk, and then we did a lot of visiting of libraries in the area. She had Sue Gullion, who was head of cataloging at Biomed come in and gave a lecture on MeSH and the NLM classification, which was never covered in library school. We got exposure to all the major reference sources in health sciences libraries. Probably one of the more memorable things about the course was the field trips, because Louise drove. I don't know if, in any of the other oral histories, you have heard, but she was an absolutely terrifying, horrible driver, and she was always late. One memorable trip was when we were going to the Los Angeles County Medical Society Library which was near downtown Los Angeles. We departed too late. She really didn't get along too well with the head of that library, but she was damned if she was going to be late. So she raced down Wilshire Boulevard, driving over curbs as she turned corners, and we were all terrified in the backseat of the car. But we made it, and they were always very interesting experiences. Actually, at that time, there were two courses that I remember taking. Louise's was on administration, and then there was a bibliography course, which I did take also, and I believe Gloria Werner was probably the instructor for that course.

M: Now your first job out of library school was at the Biomedical Library?

B: It was. It was a half-time position in reference and a half-time position in interlibrary loan. The Regional Medical Library had just started and, you may recall, that one of the major programs at the early RMLs was free interlibrary loan. And they were coming into the Biomedical Library in huge quantities. So my half-time ILL position was primarily to verify all of these interlibrary loan requests that came in that were difficult to find.

M: So you were on the lending side?

B: Yes. The lending side. At that time, for the Biomedical Library, we would lend 30,000 a year and maybe borrow 500, because we had such a fabulous collection. So it was really primarily to the lending side. Then the other half of my position was in reference. My position was a new one. The funding for it was cobbled together. The half-time ILL was on the RML grant, but the other parts of my position were paid for with bits and pieces from the School of Medicine, the School of Public Health, and the School of Dentistry. So it was a very soft-funded position. From there I moved to become full-time in Interlibrary Loan, to be head of interlibrary loan. That was after two years and it was actually a big decision. There were two positions open in Biomed. That particular one and I guess my choice was I could be head of ILL or I could be full-time in reference. I remember Wade and I sitting down and talking about what decision should I make and doing a checklist. I decided to go full-time in Interlibrary Loan because it gave me supervision experience and I really, really enjoyed that.

M: Did you think at this time that you might want to be a director or were you just interested in perhaps a step that was supervising?

B: I think it was the step that was supervising. I really didn't have a plan at that time to be a director, and Wade was just finishing his graduate studies so we were not sure how long we were going to stay at UCLA. In fact, at one point, Wade did have an opportunity, as he was finishing his Ph.D., to go to the Washington, DC, area. So Louise got in touch with NLM and I would have had an opportunity to go work for the RML that was located at NLM at that time, had we moved to the Washington area, but that didn't come to pass.

M: Louise was very good in helping people find positions I believe.

B: Yes, she was. She was unique, I think, in that way in that she believed that it was her role to train and get good work out of people, but not to hold them back and keep them from moving ahead. That it was important for people to go out into the profession.

M: Then you were head of interlibrary loan for how long?

B: About two more years and then I became head of Consulting and Training for the Regional Medical Library.

M: Was the interlibrary loan part of the Regional Medical Library or was it part of Biomed that time?

B: It was primarily part of Biomed, in terms of reporting relationships, but there was a lot of funding coming in from the RML contract. Actually, as head of interlibrary loan, I did report to the associate director of the RML because I did have so much responsibility for regional programs. But in the Biomedical Library, which has 12 stack levels, it's a very up-and-down library, the ILL Department was down in the basement and the Regional Medical Library was up on the 12th stack level so there was a lot of physical separation from the two. When I became head of Consulting and Training, I moved up into the RML offices and was much more directly involved in RML activities.

M: Were you actually going out or were you supervising people?

B: I was actually going out. The Consulting and Training program had begun under Phyllis Mirsky. She was the first head of Consulting and Training. Lois Ann Colaianne was also working at UCLA, but on grant funding from the Regional Medical Program. Her position provided backup service to library managers in four counties north of Los Angeles. The library managers required a great deal of training and support to teach them how to submit interlibrary loan requests and provide basic reference services. Phyllis was doing the same type of thing, having founded that program for the rest of the region. The two of them together developed a manual for librarians in small hospitals and began some of the training programs which then I took over. Phyllis had moved on to become the associate director of the RML. When I first began, Nelson Gilman was the founding associate director and he left shortly after that to become the director of the Norris Medical Library at University of Southern California.

M: At this point you've done things for two years. So was this another two-year position?

B: No, actually the RML Consulting and Training, I believe, I did for five years from 1974 to 1979. And then Phyllis Mirsky, at that point, left UCLA. Louise Darling retired at the end of 1978, and there were interviews for the new director. Phyllis was a candidate as was Lois Ann Colaianne and Gloria Werner. Gloria Werner was selected. Phyllis, shortly after that, left to become head of reference at the National Library of Medicine. So I was interim associate director of the RML. But I ended up applying to be the deputy director for public services in Biomed under Gloria Werner, and I assumed that responsibility in 1979 under Gloria. So that took me out of the RML program and back into what you might call library operations in Biomed.

M: I wonder if you could talk a little bit about what the library was like when you first came because I want to then track that. You are one of the few people who was at the library for essentially your whole career. You sat in all different parts of one library. You saw undoubtedly many changes.

B: I did. Biomed was an incredibly exciting place, and a lot of that was due to Louise

Darling and her vision. When I started we were bringing up an online serials check-in system with grant funding from NLM, and Fred Roper, as an intern, was one of the early people who was involved with that and then stayed on to do some of that work. That particular system was expanded. We added a cataloging system and then a circulation system and eventually it became the Orion online system that UCLA had for many years.

Biomed was a MEDLARS Search Center. One of the few in the country so that activity was going on. The Regional Medical Library, PSRMLS (Pacific Southwest Regional Medical Library Service), as it was called at that time, was founded in 1969 so that program was starting up. Shortly after I began, AIM-TWX became available through NLM. AIM stands for Abridged Index Medicus, and it was NLM's first attempt at online searching. We were using teletypewriters and I think it was 300 baud per [second] (they were very slow) to do searching of a subset at MEDLARS. We were one of the first places, as were other academic libraries, to experiment with that. UCLA Biomed also had the Brain Information Service, which had funding from NINDS (National Institute of Neurological Disorders and Stroke) and that was going on within the library. When I first started, budgets were really very tight and Louise Darling was always struggling to find funds for staff and programs. She said that she never would have gone into developing an online serials check-in system if she had had sufficient staff to check-in the journals manually. But she didn't. So she went out and got a grant and figured out a way to do the work with less staffing. She always felt that she did not receive sufficient support from the university library to whom Biomed reported, that the university librarians were first and foremost focused on building the research library. That was at a time, in the 1960s in California, that there was lots of new money coming in to build libraries. I always felt that the university librarians thought that they would eventually get around to their branch libraries, but the money all of a sudden dried up because of financial difficulties in the state and so everything came to a halt. So, I mentioned before, that my position was funded, cobbled together from all sorts of sources and Louise was very expert at doing that. She had excellent relations with the deans that the Biomed Library served and so she was successful in getting bits of money from them to help add positions for the library.

M: Yet even with this budget problem you did have a fantastic collection.

B: We did. That was due to Louise's tenacity and hard work. She went out and found gifts, processed, took collections from wherever she could, took advantage of that. It was the kind of thing that she could go to the deans at the end of the year and say, if you can give me any of your year end money I will be able to buy this, that or the other. She built, for a library that was founded in 1947, just a phenomenal collection of journals. We were subscribing at one time to over 7000 periodicals and many in foreign languages. All of the classic journals. So it was and still is a fabulous collection. Clearly, over the years, the amount of material that we can subscribe to has gone down due to the cost of publishing and the lack of money. But it really is a good collection. And faculty who come to UCLA, people from other countries, are usually amazed at the collection. They don't expect to find the journals that are there, especially the historical material.

M: Did you have anything else you want to add?

B: I think that's good for what it was like when I started.

M: You held various positions. You were in cataloging as a student, and then you were in reference, and then you were in interlibrary loan, and then you were in charge of consulting, which is an outreach position, and worked with the RML, and then you became the deputy director of public services. I just wonder how holding all of these different positions affected your approach to being a director or even your approach to what you did in MLA.

B: Well it had a pretty significant effect. From my RML experience I learned a great deal about the different environments in which health science librarians operate. For example, when I started in the consulting and training job, and in that job the responsibilities were to work with hospital librarians primarily or hospital administrators, to help them set up basic library services within their institutions and provide the resources that their health professionals needed. I knew I had never worked in a hospital library so Lois Ann Colaianni, who was at Cedar Sinai Medical Center, agreed to have me come work there for a week, and that gave me one example of the experience so I could see firsthand what it was like to provide services within a hospital setting. The rest of my positions can really be characterized as public service ones, and as director I always emphasized that we needed to focus on meeting our users needs and not creating policies and procedures that were nice for us but not necessarily beneficial to the user. A good example is setting up systems for interlibrary loan that allow the end-user to place his or her own request and save a considerable amount of time. That required, over the years, a lot of talking to interlibrary loan staff who worried that a certain percentage of those requests would go out for materials that we already had or that would go to the wrong place, but my focus was always we need to improve the speed and delivery of these materials and if we can cut out the two to three days that it takes us to process by having an automated system, send it out directly, we should work towards that goal. It is something that we did accomplish within the University of California.

M: Do you think that this also spilled over into how you approached MLA activity?

B: Absolutely. My very early activities in MLA built on the experience that I had for example in interlibrary loan. Lois Ann Colaianni and I developed a CE syllabus for interlibrary loans and I became, over the years, UCLA's copyright expert for the library and many of my professional activities and opportunities revolved around that. So the consulting and training, because I was doing teaching, moved me into things like continuing education and MLA and many of my activities within the University of California, as I became a senior administrator, were to shepherd or work with programs that built on some of my early experience like interlibrary loan.

M: So can you give me now a picture of what was going on just before 1984 and then when you became the director?

B: Gloria [Werner] succeeded Louise Darling. She began as the Biomedical Library director in January of 1979. A couple of years later, the associate university librarian for technical services and systems, Dan Tonkery, who was an NLM associate, came to UCLA and was responsible for taking the early automated systems that Biomed had developed and spreading them systemwide within the UCLA Libraries, into the Orion system. He left to go to work for Faxon. Russell Shank, university librarian, asked Gloria to move to the library administrative office and be the interim AUL for technical services and systems, and Gloria did that. I think initially she thought she would return to Biomed, but she really found that she enjoyed working in the library administrative office for the library system and so she ended up applying for that position and getting it. I was interim director and then applied for the director position and was officially appointed in 1984.

M: How long were you the acting director?

B: Actually it was from September 1983 to May of 1984.

M: That's not super-long.

B: No, it's not. So some issues were facing us. Gloria's tenure was relatively short. She had begun some reorganization, but we felt we needed to examine our organizational structure and chose to involve all levels of staff in a planning process. So we did have a process which we called random groups, where all of the library staff were assigned randomly to discussion groups, and then they were asked to comment on particular organizational questions. That was a time when we were beginning to introduce computer-assisted instruction for health sciences students, and one of the most exciting things that was happening at that time was what is called MELVYL MEDLINE. The University of California applied for a grant to the National Library of Medicine to mount a subset of the MEDLINE database. It was to be for three years. MELVYL is a union catalog for the University of California, and it had a user-friendly search software. So the grant was to adapt that software to search the MEDLINE database. I worked on the grant proposal along with Mary Horres, who had just been appointed director at the University of California at San Diego Biomedical Library. We also had the assistance of David Bishop, who was then the university librarian at UC San Francisco, and of course the

[End Tape 1, Side A]

[Tape 1, Side B]

Diane McKenzie: And I think the tape cut off just at the end of your sentence.

Alison Bunting: Right. I said the other group that was involved in the grant proposal was the Division of Library Automation, which was the University of California systemwide group that was responsible for developing the MELVYL system, and they were going to do the technical work. We were successful in obtaining that grant, and Mary Horres took the lead in terms of managing the implementation of it, and the end

result was that we were able to provide free end-user searching to faculty, staff and students throughout the whole University of California system. It was initially a big political struggle. The University of California University Librarians, at that time there were nine campuses, met on a monthly basis. In the University of California there are five medical schools, five health sciences campuses. And MELVYL, as many automation systems did at that time, had occasional problems with response time. The university librarians were very concerned that if we were to mount this journal article database on their union catalog, which was the most important source of information, we would just bog down the entire system. We were fortunate that Russell Shank, who was the university librarian at UCLA, was a scientist and he understood that we needed to begin to put up journal articles, and that these were the important resources for a great many of our faculty. David Bishop was a university librarian so he was of great assistance in that. They helped us through the political ramifications and getting the university librarians to agree to go ahead with this grant proposal. In the end, MELVYL MEDLINE proved to be the model. They then went on to add all sorts of other databases. Up until this past couple of years the University of California had mounted I think about 13 to 14 databases, many of the major ones which were available within the UC system.

M: You yourself rather than going to a vendor?

B: Exactly.

M: Oh.

B: Now we have shifted over to vendor supported ones, but for many years we had BIOSIS, we had all the major science databases, humanities and social science ones. That all began because of the MELVYL MEDLINE experiment that we undertook.

M: Do you think that was an important new approach? This maybe is totally unfounded, but I keep thinking what would it be like to be the director after Louise? Were there expectations within you that were frightening, or was having this brand new way to start into something seem like a very good thing? Of course, Gloria had had that little interim.

B: Right. I was spared, you might say, by having Gloria in between me and Louise. I would say that both Gloria and I took a lot from Louise. She trained us, she was our mentor and she taught us to focus on the user, to take chances, to go out and try new things. If it was going to end up delivering information to our users, that was the important thing to focus on. Gloria did not have as much opportunity because of her short tenure, but she was Louise's deputy director. A good example of Gloria's contributions was she saw that it was important for the Biomedical Library to become involved with audiovisual services for the schools and provide medical audiovisuals. It wasn't something that any of the other libraries on campus were doing. Very few faculty in the medical school were just starting to experiment with that, so we provided space. We found some staffing for somebody to head up our Learning Resources Division, and that provided the foundation that I was able to build on as we began to introduce

microcomputers and computer-assisted instruction. And we used this as a model because we could not get funding for that from the university library budget. It wasn't something that there was precedent for, of working with the schools and having them provide the funding for these programs. They were really very tailored just to them and their educational programs. But, yes, there's no question that it was good to have new things coming along that allowed us to provide services to our users. Although it's something that I know Louise would have gone into immediately herself. And she and I talked. We were very close after her retirement and she was always encouraging and providing support. I never hesitated to embark on a program that had grant funding because you just always figured out a way to make it work and support it after the grant program was over.

M: Well let's go on from that first part. When did the MELVYL system come up?

B: I believe it came up in about 1986 or 1987.

M: What are some of the other things that evolved, how the library changed while you were director?

B: Well as I look back it's not different from many libraries, but you're right that I had the perspective of being able to see it. We went from print to electronic journals. We had a fabulous print collection when I began. We suffered as every other library did from the high cost of scientific publications and lower budgets, and had to cut back significantly. So when I mentioned earlier that we used to only borrow a few hundred items, now we borrow much more, but still we lend far, far more than we borrow. One advantage of being part of a large University of California system is that when it came to electronic journals we were able to work with and develop the California Digital Library and we have a huge number of journals available to our faculty and students systemwide and that's been really a wonderful thing. We went from mediated MEDLARS searching, it used to take two weeks to get your search results from NLM, to today doing end-user search training. So if I look at the evolution, we experimented with AIM-TWX, we immediately began to provide MEDLINE service as soon as it was available, we then did MELVYL MEDLINE, and then most recently, in the past year, we converted over to PubMed at UCLA. We are now using the PubMed system. But we have been training our users to search their own databases probably for 15 years, and there was that very natural evolution and not much concern about that. Going from slow, mediated interlibrary loan requests to the system that now exists in University of California, which is called UC Request, so an end-user can just place a request online and it is automatically routed to another University of California campus if it's available, if not it goes into the OCLC or DOCLINE system automatically, and it bypasses all our interlibrary loan staff. We are also now delivering documents to the web so that the delays that they were experiencing from transportation had really diminished over the years.

M: Is there a charge for that?

B: Within the University of California, no. And actually so far at UCLA there is no charge even when we borrow from another library. Whether that can be sustained with the current budget situation I'm not sure. As I look back at our budget structure, we went from reliance primarily on institutional and grant funds to a balance between institutional and contract funding. The RML is now a contract and we have a lot of income and expense funding. We run our interlibrary loan operation on a cost recovery basis and that provides funding for all of that activity. And too, much more gift funding. We went from one collection endowment when I started in 1984 to 13 when I retired, so that we are now able to have money in perpetuity for some programs. It was \$7000 a year that we could spend from gift funds on collections in 1984 to \$140,000 that we spent last year. So that has been a big change. And I would say we built on and enhanced the RML programs. When I first became the RML director it was a time of difficult budgets for the RMLs and I think we'll talk about that later. But that has really changed, and the RML program has evolved significantly and continues to be a really viable program in my mind. And I would say that in my tenure we developed closer collaborations certainly with the university libraries with our librarians being much more involved in the university library activities than under Louise's tenure, and also with the schools and departments that we serve. Louise worked very closely with those departments, but now there is much more involvement. Many of our librarians are on committees. It used to be only the director was asked to serve on those types of committees. So we have much more interaction from our reference librarians and staff with the schools and departments.

M: This was something I didn't ask you earlier but can you talk a little bit about what you see is your style of being a director? You said that Louise was your mentor but obviously you learned other things, other than what she taught you.

B: Well, my style I would say is a very collaborative, open-door style. I work well with people. I like to get a lot of input. I'm obviously able to make the decisions when that is necessary, but my preference is to work closely with all of the staff. Get them involved and moving along in the same direction. I really welcome change and that is an important characteristic that I look for in staff, especially in librarians. That's one of the interview questions that I always ask. On a scale of 1 to 10 how do you rate yourself in liking change? Ten being I can't get enough of it and one being I wish the world would stay exactly the same. I've had a few candidates say they are 11 or 12 and actually many of those we end up hiring because our environment is always changing and we need to be able to adapt to it, take advantage of it and continue to remain viable in our profession.

M: That's a good question. And someone actually said, "I'm an 11." Did that bear out?

B: Absolutely. It does. That particular young woman, she's a Canadian librarian who came to UCLA on a two-year interim appointment, filling in for somebody, and parlayed it into full-time. It turned out she loved Los Angeles, and she's just full of energy and very exciting.

M: Well, we just alluded to the RML and it must be very hard to separate the Biomedical Library from the RML in any way, but I know that each RML had its own personality

and its own set of issues to solve. And I have interviewed people from several different RMLs, for example, Gerry Oppenheimer, Vern Pings, and Mark Hodges. So I would like to know about the Pacific Southwest Regional Medical Library and what its situation was, its environment and its issues.

B: Well the environment of Region 7 or 11, it started out as Region 11 when the RMLs were first founded, and it included at that time Arizona, California, Hawaii and Nevada, and later on the Pacific Basin was officially added to the region.

M: What is the Pacific Basin?

B: The Pacific Basin includes US trust territories so Guam, the Mariana Islands, all of those areas. So it is a very, very remote part of our region. To me collaboration and pioneer spirit are two of the phrases that I use to talk about our region. We benefited, I think, from being as far away from NLM as one could be, especially in the early days, because the further away you were, the less micromanaging went on with the RML program. The region, in fact the poor region, and perhaps you worked in it, that had NLM as its RML really suffered from close scrutiny and it was very difficult to do things independently. The resource libraries in Region 7 are primarily public institutions. In three of our states they are the only medical library and they have a statewide responsibility. So in Arizona, Nevada and Hawaii their mission is to serve all of the health professionals in the state. It's an active part of their program. Within California we have many more medical schools, but there's only one city where there was more than one and that was Los Angeles, and the territory really divided out very evenly along lines that were originally established with the Regional Medical Program. So there was not the kind of rivalry or vying for territory that I witnessed in some of the eastern regions where you would have cities with five medical schools and "what are you going to do with my people, my alumni" which was a problem, I think, in some of the early days of the RMLs. Because we were in the west and further away from the eastern establishment, people were used to fending for themselves and working things out for themselves. The resource libraries in Region 7 were never particularly interested in getting money from the RML program to do some of these things. In fact Martin Cummings was quite irritated with our region at one time because our Resource Library directors refused some collection development money that he wanted to give them. At one point when we were in one of the cyclical crises of rising cost of journals and having to do cancellations, he wanted to give some money to each region. He did give money to each region for collection development and the Resource Library directors in our region said, "We don't want it. One year's worth of money won't help us one bit with journals subscriptions." We can't continue them after this year, so we turned that money down. And he was not very happy with us at the time. That was under Louise's time. So we were really blessed with the spirit of cooperation. The problems and issues were really the same as most regions. We needed to develop means of sharing resources so a good ILL network was needed. We did not have any union lists in our region unlike some of the earlier ones so that was an early activity. And providing MEDLARS search service and developing collections. One thing that was unique about our region is that Louise Darling felt that NLM was making a mistake when they offered free interlibrary loan at the start of the

network because she envisioned that it would be so popular that there would not be enough money to support it in the long run. So our region actually started out with what were called restricted journal title lists which were journals, 30 of them, for which you could not get free interlibrary loan because these were such important journals that we felt they needed to be in local collections, like *JAMA*.

M: Okay. Would you say that would be true way back? So even for early *JAMA*?

B: Oh, not for the early ones, but just to have them available. There was a restricted list of 100 journals for the metropolitan area because the resources were there. You didn't have to come to UCLA or UC San Francisco, which was providing ILL service in our region for these free loans. You could get it from a different institution. That was eventually adopted in other regions. Then we had to go into quotas because the money started drying up. In the long run it was far easier for our region to phase in fee-based interlibrary loans because it started that way, there were some restrictions to begin with, and we were gradually able to phase in, whereas in some other regions it was very, very painful to move from the free loans to a cost recovery basis. So I would say those were the hallmarks of the region. Originally there was the notion that there would actually be many more than 11 RMLs, and Louise started planning to just do Southern California, Arizona and, I think, New Mexico. That was her vision of the region. Then it turned out there wasn't going to be enough money to have as many regions as NLM originally envisioned so we expanded to have Northern California, Nevada and the Hawaiian Islands. We had a broad geographical area to get to. Another thing that was very different, I think from my recollection, is that we were dealing with very sparse populations in some areas and we felt it was important to send me as a trainer or somebody else as a trainer even if we were going to train only three people.

M: Did you go to the Marianas?

B: I didn't go to the Marianas because that came later but some of our other librarians did. But we would go to very rural areas of Nevada or Arizona and only have three people in a class. Some of the other RMLs would say, "that's not cost-effective." We would say it's unfair to them not to provide these types of services because that's been a hallmark of the RML service that we try to get out into the region and become very well-known by the people. We also worked very collaboratively. Arizona is a good example. They had funding even in the early days of the RML for an outreach type librarian and so what we would do would be work together. We would send somebody to places where they couldn't get to in their budget, or we would do joint classes, so we always worked closely with them. Joan Zenan at the University of Nevada Reno is a good example of somebody with whom we worked very, very closely. She was for many years the only professional librarian at her library. She now has a second and she provides service to the entire state, but she worked closely with the RML staff to supplement that and expand what she could do.

M: You have talked about some of these early issues. Do you think they changed or they pretty much stayed the similar issues throughout the 1970s, '80s and '90s?

B: The issues, again the focus or the mission of the Regional Medical Library is to get health information to health professionals initially, just health professionals, no matter where they are located. The mission is still the same and the issues, in a lot of ways, are still the same. The techniques are very different. So we have moved from building local collections in small libraries because that was the fastest way to get information to people, it was faster for them to have those 30 journals than to request it on interlibrary loan when it could take two weeks, to now saying you can get a lot through DOCLINE online and maybe you don't need to have those type collections, especially in the very rural areas where they have virtually no money for collections or the staff to process them.

M: Do you think you are going more now for the end-user or to the actual professionals?

B: I view the phases in the early days of the network, I would say in the 1970s, the RMLs worked primarily with librarians or library managers. Yes, we worked with health professionals. Mostly we would meet with library committee members. We would try to persuade them to have local libraries. When online searching started to become available, we started the shift and we began to train those few health professionals who were interested in doing their own searching. Of course we started to train librarians to do searching because they hadn't done it before then. As we moved into much more training the end-user, there were problems with librarians worrying about "what's going to become of me. Am I going to be superseded?" Now we always took the approach that what you are going to be doing is training people how to search and, in fact, and I still believe this, that that increased the respect of librarians among many health professionals because they didn't appreciate what was involved in searching. We are now in a new phase where with the electronic journals and content, there again there will be questioning, as always, about the need for local collections. Can I get it free on the Internet? Again, I think it's a lot of education and working collaboratively to say, "Yes, these journals are available electronically but you need somebody to negotiate a license agreement and it's not something that is just freely available to you out there." The other big change in the network most recently has been the expansion to include consumers, and that's been very beneficial and exciting for the RML network. It's been a whole new audience to approach—the consumer and, of course, the individuals who serve the consumer like the public librarians, teachers, other areas.

M: I'm going to lump one question together. What are the things that you are the proudest of? It could be the RML. It could be the Biomedical Library. What are the things when you look back you say "these are the things I contributed, these are the influences that I had in my career"?

B: Well, in terms of the RML, the influence of which I'm the proudest is that I was able to maintain the spirit of cooperation and innovation in Region 7. Region 7 was the region that first experimented with DOCLINE, and we were the region that first came up completely on DOCLINE, and a lot of that was based on our willingness to experiment. But our good relationships with all the hospital librarians in the region were really a fair

source of trust. As always, focusing on what is our ultimate goal and, as I mentioned, it was delivering information where and when needed, and thus we welcomed innovations that allowed us to do that better even though it might prove threatening to the way we were used to doing things or might mean that we would have to take on different roles. I think that we worked very carefully in our region to ease that transition for librarians, to make them appreciate [change], and train them in such a way that they could become end-user trainers when doing mediated searches was something that was being phased out. To help them deal with providing access to electronic journals in this new environment.

The other thing I'm proud of is the history of the Regional Medical Library network that I wrote, which was published as a supplement to the *Bulletin of the Medical Library Association*. It's very nice, sometimes the RML associate directors will say, "Oh, it's required reading of all of our new staff." I wrote it primarily because I had been involved in the early network and as new people started to join staffs of RMLs I felt like I was answering questions for things that had happened before, or that they wanted to try and didn't realize what had happened in an earlier date. They were able to learn from those early historical experiences. And I am committed to and that is one of the things that I'm going to do in my retirement, is to update that history. I'm working with Becky Lyon at NLM to do the next phase of it. So it will be exciting to document the changes that happened after 1985, which is when the history ends.

One thing I want to mention about the RML program, that I meant to earlier, is a key change in the RML program was change in leadership at NLM. Donald Lindberg was appointed director at NLM in 1984, the same year I was appointed director at Biomed, and Lois Ann Colaianni was appointed deputy director of operations, I think, a year before that. They made a huge difference in the way NLM managed the RML network and the way they used the RML network. Don Lindberg came in from Missouri, and had a fair amount of experience with the Regional Medical Program. And so he had worked in the field and knew the importance of the local resources and what could be done by people working collaboratively with NLM. And Lois Ann, of course, had experience in an academic library and a hospital library. So they were quick to realize how the RMLs could really help NLM in a lot of ways. And Don Lindberg has been very, very successful with Congress and taking on new roles for NLM, getting budget increases. And in almost every activity he views the RMLs as having the network, as being able to play a part in the new delivery of information. He has had a few missteps along the way. For example, the infamous letter to hospital administrators, but really he believes so strongly in a strong network of libraries that can help deliver NLM programs and services. I hear it all the time when he is speaking to NLM advisory committees and to the Board of Regents. He's very, very supportive.

M: Just elaborate a little bit on the letter since people are going to be hearing or reading this that may have no idea.

B: I'm trying to remember the year and I can't. It was about the time when MEDLINE was becoming really freely available and he wanted to let hospital administrators know

that this was a resource that was available free to them and wrote

[End Tape 1, Side B]

[Tape 2, Side A]

Diane McKenzie: And we had a dramatic end to the last tape. Just as you were describing the letter that was misinterpreted that Don Lindberg had sent to the hospital administrators.

Alison Bunting: Right, it was basically talking about MEDLINE being available and that end-users could search it and it was misinterpreted as a way of saying you can do without your librarian. It was not intended in that fashion, but there was not great communication in terms of letting the librarians know that such a letter was going out. The RMLs knew nothing about this letter until it was sent. I think NLM learned a great deal from that experience and has taken great pains to really do much more consulting with the RMLs. I think the Internet and email allow them to have much better communication now. You can send out trial balloons and get feedback from individuals and I think NLM regularly gets feedback via some of the list serves that exist, such as MEDLIB-L. There's lots of discussion whenever anything changes or there are revisions to NLM's policies and programs.

M: Did you have anything else to add about the RMLs or Biomed in particular? I want to talk about your service at UCLA, in addition to in the Biomed Library, but this would be a time to put in perhaps things that have to do Biomed or RML.

B: I think you had asked me in the questions you sent in advance what are the contributions and influences for Biomed specifically of which I am proud? And I think one is that I helped the library and its librarians and staff to evolve and take advantage of new technology to deliver better services to users. [Another is] the continued success of the RML program in the region. At UCLA we considered the RML just a department of the library. In some of the RMLs there's a big separation between the main library and the RML, and we always integrated it. In my administrative structure, as director, I had an executive committee and it included the deputy director of the library operations, the associate director of the RML, and there was always lots of interchange and understanding of what each part of the program was doing. I'm proud of the close collaboration we developed with our health schools. We operate in the Biomedical Library the Instructional Microcomputer Facility for the Schools of Medicine and Nursing and they provide us with funding to operate that. They don't have separate computer training labs for their students. In my last two years at UCLA we did apply for and receive a planning grant from the National Library of Medicine for the Academic Health Sciences Center, and I worked very closely on the developing of that grant and of course on the actual planning process. I think I'm proud, too, of my development activities. It was a learning experience to fund raise. It's certainly something Louise Darling never had to do. All librarians have had to take this on I would say in the last 10 years, but I was able to generate a fair amount of funding for collection endowments at

UCLA, which I hope will help in the long run for the Biomedical Library.

M: That's a role that we did not have traditionally.

B: That's correct.

M: Although grants have been important that is something that we had to learn. We found we had to have.

B: Speaking of development prompts me to remember one of the very exciting things about being director at Biomed and so far I think I emphasized the technology and the regional program. We also have a fabulous history of medicine collection and, again, Louise helped to found that. It was started with a gift. The first endowment that we had was an endowment which now is about \$3 million to allow us to purchase materials for our historical collection. We have a program of lectures. It has proven to be a very good development promoter even for other areas of the library, but also just loads of fun. I often described to people that I loved the fact that I could spend the morning dealing with technological issues and then plunge back into history of medicine in the evening. The richness and variety of the activities of the Biomedical Library were always very exciting.

M: Do you want to mention any people that you particularly thought were important or you had an important role in their development?

B: I'm a very modest person so it's hard for me to talk about that. I certainly think that Gail Yokote who came to be the deputy director for public services in Biomed after I became director and is now an associate director at the university library at UC Davis is one of the individuals with whom I worked very closely. Judy Consales, who is currently the interim director of UCLA Biomed, [Editor's note: Judy became Director in 2003] and Beryl Glitz, who was the associate director of PSRML. She moved out of the reference department into the RML and it was a big change for her. We worked very closely together to effect that change and she was a wonderful associate director. And Elaine Graham who is currently the associate director of the RML.

M: I'd like to talk a little bit about your activities at UCLA in general and even, because of what you have mentioned in the interview, the bigger structure of the University of California, because it does work together. There are other states that have the structure perhaps, but this one is fairly well known, with many different medical libraries, and how you have worked together, and obviously it had an effect on how you run the library.

B: Yes, the University of California, in the 1970s, had a plan for the development of the UC Libraries, which came out with the motto, "one university, one library."

M: Really?

B: Yes. Now we never were able to parlay that into a license agreement or copyright for

the entire university, but we tried and publishers never bought it. They would persist on seeing us as nine separate campuses, five separate health sciences campuses. But even in the early 1970s, it was actually the California State Legislature, which prompted a lot of this planning. They were quite appalled to find that there was a great deal of duplication going on in the purchases between these nine libraries. There was something like not just nine copies of the British Parliamentary Papers, but 11 copies in the system. The pressure being placed on the state to build libraries as our collections expanded they felt they could not keep up with. One of the early activities that was planned for and funded was the development of two regional storage facilities for the University of California campuses, one for the southern campuses, which was located at UCLA, and then one for the northern campuses. Early on we began to store little used materials. We originally had quotas so we were forced to store materials so we could relieve the pressure of having to build new library facilities on prime campus space. But that particular planning document also led to the development of the MELVYL System of a union catalog so we could share information. How do you prevent duplication in collection development? Well, you have to know what everybody has and you need to have access to that online. It also provided for funding for free interlibrary loan between all University of California campuses. And we used to have a system of buses that would transport users from the smaller campuses to, say, UCLA. So there was a bus that came up from San Diego everyday and brought people to use the collections at UCLA and then go back to San Diego at the end of the day. Over the years the traffic got so bad that we had to phase it out because the San Diego bus would arrive and have to turn around and leave within an hour and we figured out other means of delivering the material. But before we had union catalogs or we didn't have online catalogs, the only way you could find out what UCLA had was to come up and use the card catalog and get the material while you were there. So those were all set up at the beginning.

Throughout my career I have been involved in several collaborative ventures. Probably the most recent ones, as I became a senior administrator, one of the committees that I served on the last three years that I was in the University of California was called the Systemwide Operation Planning Advisory Group - SOPAG - and it had a representative from each one of the University of California campuses and the California Digital Library, and we basically served as an advisory group to the university librarians of the University of California. We would come up with plans for operations for any collaborative projects that we were going to undertake. A good example of that was the system I mentioned earlier, the UC Request system, where we took the MELVYL system and again modified it to allow the end-user to place a request. It would be blocked if the system determined that the material was on their campus, but then routed randomly to other campuses to distribute the interlibrary loan load between all of the campuses.

The other very exciting activity was when I was appointed, shortly after the California Digital Library was founded, to the Science, Technology and Industry Collection Task Force or STIC as we called ourselves. That was to plan the first digital library collection for the University of California. It was in science and technology because that was where the online journals were becoming available. We advised the California Digital Library director, Richard Lucier, who actually came out of health sciences background, on what

should be the big packages that we should negotiate. For example, Elsevier and Academic Press, and we brought up the first electronic journals. Again we did it on a system-wide basis so that they became immediately available to all University of California faculty, staff, and students throughout the whole system. So planning for that was really quite exciting.

M: Were you involved at all in UCLA committees or academic work?

B: Yes. Within the UCLA Library the Biomedical Library reports to the university librarian as part of the University Library system and I also had a title of associate university librarian for sciences. Within that system we had what was called the administrative conference, which was sort of a management group for the university librarians. I was active in that. I think I mentioned earlier that I was the UCLA Library copyright expert during my tenure at UCLA. I had opportunities to be involved in some UCLA-wide activities. At one point I was on a committee on science service centers to see if we could consolidate things that provided services to the sciences like machine shops and departmental libraries and other things such as that. Within the School of Medicine, the biomedical librarian had also a title of assistant dean for library services and I participated in a number of committees. The Deans Education Council is one example. The Academic Information Technology Committee of the School of Medicine. I represented the library on that. So there were a lot of opportunities. Also, whenever we had a School of Medicine accreditation, I chaired some of the subcommittees that dealt with the accreditation process, and always included the library. The first year I did it I was in charge of the accreditation examination of the library and the vivarium, something about which I knew very little, but learned quickly. And then later on, [I was responsible for] the library and the information technology requirements for the LCME accreditation process.

M: What health science schools are at UCLA?

B: Medicine, Nursing, Dentistry and Public Health. So there are the four health science schools, and then UCLA Biomed serves the Life Sciences Division of the College of Letters and Science and that includes microbiology, biology, physiological sciences and psychology, which is unusual. It is very brain science oriented at UCLA. The Biomedical Library was founded as a biomedical library and it was very unusual at that time. There was great trust between the chair of the Department of Biology and the dean of the School of Medicine, which were the two schools at that time. They had the vision to see that in the long run the collections for the two areas would be very similar and it would be more cost-effective for the university, and in fact that proved to be very true.

M: Now was social work in public health?

B: Social work is not in public health. It's a different school. It's in the School of Public Policy at UCLA.

M: Did you want to speak at all about what we talked about last night very briefly that

with two different structures, one where the medical library or health sciences library is separately administered and then one where it's part of the university library, and you said that you thought there were pros and cons for both structures and you were quite comfortable with the structure at UCLA?

B: Yes. I was very comfortable with it. Louise Darling chafed under it. She always felt that she would have received stronger support had she reported to the health sciences. Now one of the complicating factors at UCLA was the fact that we served both life sciences and the health sciences. If she had reported to the dean of the School of Medicine or even a vice chancellor for health affairs, and we didn't ever have that at UCLA, I think there would have been a great deal of concern and distrust on the part of life sciences department that all of the resources would go to medicine. But during her tenure it was certainly true that more of the resources of the university library went to the main research library, the humanities and social sciences libraries. Our university librarians were very interested in building those collections and those resources. After Russell Shank became university librarian, because he was a scientist, he really appreciated the differences between information delivery in those two libraries and was much more supportive and receptive to providing assistance to Biomed. He and Louise overlapped only a very short time and then Gloria was appointed as librarian. Of course when Gloria Werner became university librarian we had the fact that she had been, as she likes to say, "Born and raised in the Biomed Library." So my feeling is that as long as there is an understanding on the part of the university librarian that there is a difference in the speed at which you have to deliver information, the types of information, the programs and services, and they are comfortable with that, they are comfortable with letting one library do something differently than the other. Then there is no problem being part of the university library system. I think today with automated systems, electronic journal packages, other things like that there are lots of advantages about the fact that we are administratively one part. I see on the AAHSL list serve questions about how much does the health sciences library pay to obtain access to the hard science electronic journals that the main library is subscribing to. It is just not a question that even comes up at UCLA or within the University of California because of the reporting structure. I also feel that a lot of it is personality based. You can have a wonderful and supportive vice provost for health affairs or dean or you can have one who could care less about the library. When money is tight, I would worry about putting the library up against research dollars in some situations. When you are part of a greater whole there is perhaps a little bit more protection that way. So I was very comfortable with that particular approach. But it is important, and I certainly would say in my career, to have a university librarian that appreciates differences and isn't uncomfortable with the health sciences library going its own direction in some areas.

M: Do you have any other things you want to talk about UCLA or your career before we move on?

B: I don't think so. I think we've pretty much covered the waterfront.

M: I think we would like to talk about your work with organizations. You have been

with several, but let's talk about MLA to start with since that is our main purpose here. When did you first become involved with MLA, and what was your first meeting, and do you remember were you required to go, did it sound interesting and what happened?

B: I'm not exactly sure when I first joined MLA, but it was probably in 1971 or 1972. My first meeting I remember very vividly. It was the 1972 meeting in San Diego. I wasn't required to attend. In fact we had so little travel money that it was very difficult for the rank and file librarians to go to meetings, but San Diego was one where Louise Darling went out of her way to see that we could get some funding to go. It was a very exciting meeting for me. I believe I was on one of the local arrangements committees that helped distribute all the materials for the CE courses. Annual meetings at that time were so different than today because it was all done by volunteers. There were no professional meeting organizers at MLA headquarters, or anybody that they hired, so there was a lot of activity related to that.

Another thing I remember was that Louise Darling provided a lot of introductions, and that was one of the wonderful things about her mentoring. She made a point of introducing us to individuals she knew, which was a great opportunity for a beginning librarian. Louise also had a tradition that she did because of the internship program at UCLA. She had a party at MLA, and she invited primarily library directors, because she wanted to introduce the interns and give them an opportunity to make connections that would be helpful for them and their employment. Over the years that party evolved to what is now called the Biomed reunion because she always invited individuals who had worked at the Biomedical Library. After the internship program ended we continued the party as a tradition and used it as an opportunity to get together.

There was one other memorable thing about that meeting. I didn't know anything about the Janet Doe Lecture, and it didn't seem like anything particularly important, so I thought that was a good time to go sit by the pool and I did. The ballroom where the Janet Doe Lecture was held, and Scott Adams was the lecturer that year, overlooked the pool and a lot of people saw me out there sitting by the pool and mentioned it afterwards. Now I realize that I missed a very good lecture because he gave a wonderful lecture. I read it later in the *Bulletin*, but it was a very memorable event. But nobody told me what the Janet Doe Lecture was and why it was important to attend. I certainly attended it after that.

M: And then you wrote the history of the Janet Doe Lecture.

B: That's right. And I gave a lecture myself. But I always remembered that. Now within MLA, my first formal assignment was on the Editorial Committee for the *Bulletin of the Medical Library Association*. I was appointed to that in 1974. So that was my first committee appointment and later I became chair of that committee.

M: Isn't it interesting how so often these early appointments affect us for a long time in our association?

B: Absolutely. I think at that 1972 meeting I was involved with delivering CE materials partly because I'm pretty sure Phyllis Mirsky may have been on the CE Committee at that time. If not Phyllis then Fred Roper was and so they were calling on people that they knew.

M: And you felt it was a friendly organization? You said it was a different organization at that time.

B: I felt it was friendly because, I think, of Louise. She made it a point to introduce me to people, because it was in Southern California, and I had a role, albeit a menial role, of running around and delivering syllabi, but it made me involved. Also our local chapter of the Medical Library Group of Southern California, at that time we didn't even have Arizona attached to our name, was quite involved in all of the activities. So to me it was an exciting meeting. I felt comfortable. I felt welcomed and made a lot of good contacts.

M: You did mention earlier last evening that there was always trouble with enough money to travel and that Louise had a particular way of dealing with the room.

B: She would rent a suite and then take in a number of us. So oftentimes we might be in a suite that had a living room and two bedrooms attached and there might be four or five of us sleeping in there and going to the meeting. So that was one way of sharing the expense and not having to pay the full room rate. Now I can remember trying to sort out those bills at the end of our week at MLA and figure out who owed what. We finally learned to make an appointment the day before and go down and sit with the finance person of the hotel to get everything sorted out so that Alison would pay for her phone calls and so and so would pay for their room service. But it was a wonderful way to meet some of the people who became very close friends and colleagues. They had worked at Biomed at some time but then had moved on to other parts of the country. Sometimes they stopped by and visited, or they even became roommates depending on the circumstances.

M: I know some of your important activities, like the MLA Board, we are going to talk about on Friday at the joint interview with you and Rachael Anderson, particularly the MLA Board from 1982 to 1985. The AAHSL Board, the infamous 1979 Nominating Committee, the Challenge to Action Task Force, and the NLM Group on Education for Health Sciences Librarians. There may even be some other things that you've served on jointly. So I'm going to skip over those committees now and note that they will be part of your joint interview. But it's such an important part of what you did with MLA that I want to make sure that it is noted in the body of your interview. So we are going to just leap over all these important committees and move on to your work as the editor of the *Handbook of Medical Library Practice* and the *Current Practice in Health Sciences Librarianship*, which has almost defined part of your life in MLA because you were the editor of the *Current Practice* and also that it was your Janet Doe Lecture. It seems like a very central part of what you were doing with MLA. So you said that your first appointment was to?

B: My first appointment was to the Editorial Committee for the *Bulletin*. But it got me into writing and becoming interested in publications. And another person influenced me significantly in terms of going into publications, well two people, but Gloria Werner I would say primarily. She served as associate editor of the *Bulletin* when I first started at Biomed, and then became the editor of the *MLA Bulletin*. She writes beautifully and would go over my memos when I was reporting to her and helped me improve my writing. She was an editor from day one and helped me with writing in the early phases of my career. And then also, a lot of my writing, as I look back over it, is somewhat historical in nature. Some of that comes from when I first started at Biomed and I was working reference. We worked nights and weekends and Louise Darling worked every day of the week many, many hours.

[End of Tape 2, Side A]

Diane McKenzie: Tape two, Side B. of an interview with Alison Bunting.

Alison Bunting: I was mentioning that Louise Darling would work late hours and when it was quiet on the reference desk sometimes I would go in and talk to her. I was always interested in hearing about the founding of the library and some of the early issues. She was very generous in sharing that kind of information. I found it extremely helpful to me to understand what had happened before. Why we were at a particular point in time. What were the circumstances that had led to the policies and procedures we were using. So a lot of my writing has been to document the practice of our profession or a particular event, because I feel it's important for people to have access to that information should they choose to use it. I was asked by Dottie Eakin to be the editor-in-chief of the *Current Practice*. I think in your question you said my long service and I jokingly referred to that as a life sentence at that time. Originally I was asked to be the editor of the fifth edition of the *Handbook of Medical Library Practice*, but we had carte blanche to examine exactly what type of publication we needed to work on and the Publication Panel had some ideas related to that. They had done some studying and I appointed an advisory committee and we ended up recommending that we change the title of the publication, which librarians hate to do. We felt that if we developed a series instead of a stand-alone edition that it would be possible to update the volumes more frequently. Some parts of the Handbook worked fine. The history of medicine section could last a long period of time. The reference section needed to be updated much more frequently. So that was the primary purpose behind making the change from the *Handbook of Medical Library Practice* to *Current Practice in Health Sciences Librarianship*.

M: And you more or less have answered some of these questions such as why did you change and the goal?

B: The goal as editor was, I was looking at the scope and coverage statements of *Current Practice*, to provide a general introduction to the field, a source of basic information and references to the literature, each one of the chapters of *Current Practice* has extensive references, as a means of documenting the state of practice at a particular point in time, and to serve as a textbook in some ways. We knew that by splitting it into the eight

volumes that it was going to be very hard to have it have a great deal of sales in library schools because it would be too expensive for students. The goal was to be able to update it. Unfortunately, it took a long time to get the volumes going and there wasn't interest on the part of MLA in updates. In beginning of the process, a new editor-in-chief really should have started on updating some of the volumes like the reference volume almost immediately, but the publication program went through a fair amount of turmoil at that time. There were challenges to doing *Current Practice*. When I gave the Janet Doe Lecture on the evolution of the profession, as reflected in the *Handbook of Medical Library Practice*, I mentioned that every editor had problems with delays, with authors not coming through, and I certainly experienced some of that throughout. Things happen to people. One of the editors was employed as a health sciences librarian and then went off traveling around the country for a couple of years and landed in North Carolina later on, but we managed to get that particular volume out. We had one volume, the collection development volume, which was the one which had the fewest authors, Dottie Eakin and Dan Richards. Dan died when he was making the final revisions on that volume. Fortunately we were able to retrieve the manuscript from his house and Dottie and I were able to finish it up and publish it. It was far enough along and we really wanted to do that for Dan. But the other thing that happened within MLA is that MLA, at the time when we began, first began to experiment with their co-publishing contract.

M: This was with Raven?

B: It was with Scarecrow. The very first volume was delayed while MLA negotiated the contract with Scarecrow and that took about a year. So I was appointed and we were ready to go and Sandy Wood, who did the first volume, was ready to go, but, rightfully, didn't want to get too far along until we knew who the publisher was going to be. Then, halfway into the project, MLA switched co-publishers to Forbes Custom Publishing and that was a contract that lasted just one year. And there were problems with one volume, Lucretia McClure's volume. We were encouraged to switch to Forbes and it proved to be problematic. I think Forbes, I'm not sure exactly who pulled out, but I think Forbes did. They found that it took too long for publications that are done by volunteer writers, which is a problem. After Forbes pulled out, we decided to go back to Scarecrow for the last two volumes because they were familiar with the product and we were not ready to break in yet a third publisher. So that did contribute somewhat to the delays.

M: How long did that take to publish all eight?

B: I have to look that up. The first volume was published in 1994 and the last volume was published in 2001.

M: So that is not terrible. It is more than one a year.

B: Yes. We were on a roll for a period of time, but as I said we had a variety of things. The other thing that surprised me was we thought when we split these into smaller volumes, like having a reference volume, that we would end up with fewer authors than Louise Darling had experienced when she did the previous edition. And, in fact, we

ended up with many more. One of the things I had not anticipated was that librarians were specializing within reference. So there were very few librarians who were willing to write about the whole scope of reference services. One might be comfortable talking about reference desk service and somebody else about online searching. So we ended up having to have many more authors than I had originally envisioned. I thought that we would have more generalists who would be willing to take on and research and do broader projects than proved to be the case.

M: Do you think that is still true?

B: I suspect so. I think it may be even more so, but it's hard to say. Maybe it's that people want to keep it within scope. As with most MLA publications, these are individuals who are doing this while maintaining a full-time job and probably managing or raising a family. So the amount of time that they have to devote to doing an entire treatise on reference services or access services is probably small.

M: Interesting. I wonder when that began? As you said, you were surprised in the early '90s to find that to be the case.

B: Right. It's true that if you looked at even the organization of reference departments, many of them had people who did primarily the desk and others who were the online searchers, the mediated search experts, and when education came in that was, in some libraries, even a separate department from reference.

M: That was a separate book too, wasn't it?

B: Yes. Because that was becoming more prominent. So really it is quite interesting to see how people, maybe as staffing got larger, in a lot of academic libraries there was more of a specialization, or perhaps people just felt more comfortable or felt more expert in certain areas.

M: So what is going to happen now with this?

B: I don't honestly know. A committee was appointed to talk about the future of the MLA publication program.

M: Oh, the whole program?

B: Yes. And the future of *Current Practice* was folded into that. To be honest, I haven't followed what their recommendations were. It's interesting. Before Louise Darling edited, took on, the fourth edition of the *Handbook of Medical Library Practice*, MLA looked at what was the best way to publish this. Estelle Brodman recommended that we use the German fascicle classical approach. That it would be easier to get those out on time and publish them most quickly as chapters. That was not adopted. And I personally think that MLA might look at that now as something that could be done in an online environment electronically. What always got tangled up in the decision-making process

is, well, how can we get our income out of these publications. So here we are as librarians frustrated with publishers who are clinging to the old styles and not figuring out how can I provide this in electronic form, and MLA as a publisher is going through that same process. So I don't know whether they have come up with any recommendations about that.

M: We have just come back from a break. We felt like that was a good stopping point and now we are going to move on to MLA committees and I also want to just reiterate that several of the committees and appointments at MLA we will be working on Friday at the joint interview with Rachael Anderson. So here we are going to talk about the other committees you were involved with.

B: Well, I think I already talked about my very first committee, which was the Editorial Committee for the *Bulletin*. My next major committee assignment was the Continuing Education Committee and it was an exciting committee. I loved the work and the impact of the continuing education program on our profession. When I was involved in that we were still very much in the mode of finding MLA members who would develop a syllabus and a course for a particular topic and the primary place for delivery of the courses was at the annual meeting. Later on, the program was expanded to provide for the CE courses being offered at chapter meetings, which was really very important for the profession. It further evolved over the years into bringing in people who were not MLA members to do quick topical courses on a hot topic for a particular year because it was always difficult, just as with publications, to get somebody to find the time to develop a syllabus in the mode in which we were doing it at that time. The impact of that particular committee work for me, I think, was that it gave me the visibility within the association to be elected to the MLA Board of Directors. An interesting thing that I observed about elections with MLA is that it's advantageous if you worked in more than one region because more people know you. In my case, I was an individual, as you pointed out, who stayed in the same institution, the same region, well-known in my area, but things like the CE committee, which were high visibility committees, were particularly helpful.

The other committee that was, to my mind, notable was the fact that I was asked to chair the 1982 National Program Committee. At that time MLA did not have professional meeting planners on its staff so any annual meeting was very much a local volunteer association, and the tradition was that the library director in the area would be the person who is asked to be the NPC chair because they have the ability sometimes to command the people resources that were needed to put on the local arrangements and do a lot of the activities. It was very unusual for me to be asked. At that time I had just been appointed associate director for public services in Biomed and I know that they asked Gloria Werner first and she said no. I think they asked Nelson Gilman and he said no. And so they turned to me in the end.

M: Was it in Los Angeles?

B: It was in Anaheim close to Los Angeles. I asked Phyllis Mirsky to be my co-chair. By that time she was at the National Library of Medicine, so it was very helpful to have

somebody on the other side of the country as we worked on it, and it was a great learning experience for me. It was the first time that I was responsible for calling up somebody to be the keynote speaker and I had a great deal of trepidation of how am I going to get someone to speak. In our case it was Lawrence Weed who was a faculty member at the University of Maine. As it turned out he answered his own telephone and I asked him if he would speak and he said, "Sure." All of the concern that I had had about having to persuade him to talk were washed away by his informal faculty approach. I have, since that time, learned that in fact many of your senior faculty are terribly approachable because they are basically researchers and faculty members and they are not powerful administrators who can be more formidable. The other thing that I remember about that meeting was that Charlie Sargent was going to be the president, and he made one requirement of the program committee. He wanted to be able to wear his tuxedo. So we had to have a formal dinner dance. Now you have done Bob Braude's oral history so you know about dancing at MLA. I hope he talked about that. He was one of the few men in MLA, and one of the few men who was willing to dance. Our plan, Phyllis and I, was what we really wanted to do was to hire the Chippendale dancers to come in to provide entertainment. I don't know if you are familiar with them but they are the male strippers who were very popular in the Los Angeles area.

M: Actually I am familiar with them but just not in MLA context.

B: So we thought that would be a very California fun thing to do for the annual meeting but we were overruled by our president and had a formal dinner dance at the Anaheim Disneyland Hotel. The other committee, which we will talk about on Friday, really, was the AAHSLD/MLA Task Force that led to the creation of *Challenge To Action*. So I think that those would be the two that I mentioned that I want to highlight at this point.

M: A number of times you have talked about the effects of MLA being a volunteer organization. The people who were doing the writing are holding down full-time jobs and are volunteering. And especially in earlier years the meetings were put on by people who held full-time jobs and were volunteers. And of course the president and the board are all people who have regular jobs as well. It just occurs to me that this is changing somewhat. I guess the first change was to have headquarters become a paid feature. I mean that's quite a while ago but that was a major impact on the organization. Do you have any thoughts of how that has changed? I think now we do have planners. In fact our chapter has decided now that we will hire a planner. We find that we can do this very cheaply and actually get better deals and find hotels and this is at a much, much more regional local level. I don't know if people are busier and if people are less willing to commit so many hours? I'm not sure what's happening or why this is a trend. Or do we expect something to be much more formal and much slicker than it used to be?

B: I certainly think that a lot of it has to do with how busy people are and also one of the things that was very important for MLA to do was to move to become more professional, use more professional people, especially if we wanted to be able to involve, meaningfully, people like hospital librarians, because a large majority of our members are in one-person libraries. When Rachael and I talk jointly on Friday we will talk about the

nominating committee from hell, as she calls it, which was one of the times in our association's history when we had difficulty getting somebody to run for president, and part of the reason was the time commitment that was required of the president. That was in 1979, as headquarters became more professional. As we as an association provided funding to have more professional staff at headquarters, they were able to take over a lot of the work that used to fall to, say, a president. A good example was when you were president-elect of MLA, and this is still the responsibility, you appoint members to the committees. Well, whoever had that job had to send out every letter, had to call people and ask them if they were willing to serve. That had to come out of either your secretary, if you were a director of a library, or you sat there and typed them yourself. That is something that headquarters takes care of completely now that was a major time investment and commitment. I think that the professionalism of adding on professional staff to help us also made for more sophisticated meetings, brought in new ideas. I think the idea of bringing in somebody from the outside to do a CE offering, something that's a hot topic, was probably suggested by some of our MLA professional development people who saw that was happening in other areas. It expanded our horizons to a great extent. But I think that, in large part, it acknowledges how busy people are and was a way of being able to expand participation by individuals and institutions, not just hospital librarians, that's certainly one category, but regular staff in a medical library who might not be allowed to have as much time off or support for what was required at that time.

M: You also implied that early on when you were in MLA it really was the directors and higher up staff that went to MLA not line people because of the funding.

B: That certainly was the case for us at UCLA and I think it was pretty common throughout the country. Travel budgets just in general were pretty tight and the commitment to professional development, I think, started to come in a little bit later in the association's history. That's why the chapter meetings were the very important venues for young professionals to get started. It was something that you could afford to participate in. You could learn. But going to a national meeting was a big expense and a big thing. At UCLA, when I was first hired, librarians were classified employees. Your position was classified and you were paid based on what your classification was and you could only move up if you, for example, took on supervisory duties. Then in the '80s the Librarians Association at the University of California was established. Librarians became academic employees and their promotion was predicated on professional activities. That really changed the tenor of what you had to do in order to advance. It was no longer tied to what job you did, it was what contributions you made, personal contributions. How you expanded your skills through continuing education, participation in conferences and things like that. Going along with that in the University of California's case, librarians eventually entered into a collective bargaining agreement and the union contract required that the university provide a certain level of travel funding for the librarians in order that they could advance themselves professionally.

M: Why do you think we are busier today?

B: Interesting question. When I first started at Biomed we used to take breaks together.

We would go off and have coffee and have lunch and people don't do that very much anymore. In the Los Angeles environment, one thing that played a big factor was that as it became more congested, as people had to go further out in order to find affordable housing, people were spending more time commuting. If you were trying to raise a family you had those responsibilities as well. But I think just the pace of life is much faster. Technology has had a lot to do with it. There is this expectation of instant delivery of information because people can get at it so much more quickly over the Internet and so we just expect more and expect to be able to do more.

M: Because it seems we add staff but yet we are busier.

B: Yes.

M: Going back to the volunteer aspect of MLA, do you think there are some negatives to the fact that we have become more professional and that we used to be more of a home-grown operation?

B: Probably. I think that every national program committee and every local arrangement committee gets frustrated sometimes at decisions that are made by the professional staff, for example, choosing a hotel that has the best deals but is not in a location or venue that the local people feel will show off their city to the best advantage. When we did these volunteer works they were team efforts for the most part and you don't develop the close relationships with people that I certainly feel I did throughout my career. Some of my very best friends are people that I have met through MLA activities and we've become personal friends and get together on a regular basis and these are people from all over the country. So I'm not sure that that same feeling is developing or there are fewer opportunities for that for some people.

M: One of the other notes that I made while you were speaking had to do with MLA friendships and I perhaps am struck most here because of your friendship with Rachael and then you talked about a group of people from MLA coming together here at Christmas. They are not colleagues they are truly close friends that you developed through MLA.

B: Yes. Through MLA and a large influence was Louise Darling and her network of people. By having the get-together at the MLA meeting I came to know a Bob Braude or a Fred Roper. They were working across the country and I might not have been able to interact with them, but there was this common bond of having worked for Louise Darling, and she nurtured that, and we continued to nurture it ourselves so we continue to have the Biomed party even long after Louise retired. We are having another one in San Diego at Phyllis Mirsky's house and we will be celebrating some upcoming retirements. It's a great way to get together.

M: I think many people who have formed a bond have been library directors.

B: Yes. AAHSL definitely is another group. One of the big benefits of AAHSL is that

of course it is a much smaller group than MLA so when you go to an AAHSL meeting you can pretty much see everybody. You can go to the one cocktail party and encounter just about everybody in the association. As directors we have shared common problems and we are interested in finding solutions, so there is a bond that develops from that and then you can go from there sometimes into a friendship.

M: I have very much been struck as I have interviewed people that someone will say, I think Mark Hodges said that he was visiting Bob Braude, and Bob said, "When I retire I would like to have an interview," but there is a lot of visiting and intentionally going to see someone, which I'm not sure if that's going on now with the new people coming up or not.

B: Yes, I'm not sure about that. I've seen some of it and it mostly happens if people have been on the MLA Board of Directors together. That might be a good example. Or if they have participated in a joint project like *Challenge to Action*, and in fact that is being updated now so it will be interesting to see if that particular group of people that work together end up forming friendships and colleagues.

[End of Tape 2, Side B]

[Tape 3, Side A]

Diane McKenzie: An interview with Alison Bunting on April 2, 2003. I had asked you several questions that had to do with friendships, and had to do with the changes in how MLA used professional planners and how they used volunteers. So I think now we are ready to move on a little bit. Do you have anything else you want to add about committees?

Alison Bunting: No, I think that pretty much covers them.

M: My next question has to do with memorable events and you have already talked about several of these memorable events and meetings. I wonder if you have others that you wanted to mention.

B: I think that most MLA meetings were exciting and good meetings. There were some in venues that I would never want to go back to and I won't name those cities. And some in cities that I absolutely adored like Vancouver and Seattle. The location oftentimes made a big difference. I think the other meeting was the Hawaii meeting. I was on the nominating committee and we will talk about that more, also, but that was an interesting meeting from the perspective of the Regional Medical Library Program.

M: What year was that?

B: That was in 1979, the same year as the nominating committee. There was a lot of controversy about having the meeting in Hawaii because the eastern librarians, especially, felt that their institutions wouldn't fund them to go that far and it was

considered a frivolous junket type place. There was a tradition in MLA that the RML Directors meeting at the Medical Library Association would be an open meeting in the early days of the RML program, and people came and observed and commented. When the RML switched from the grant funding mechanisms to the contract mechanisms, and after Lois Ann Colaanni got to NLM, the meetings were declared contractors' meetings and they weren't open to the general MLA membership. There was a fair amount of controversy about that from people who liked to come to that meeting and hear what was going on and offer their comments. And I'm not exactly sure, but I think that the Hawaii meeting was probably one of the first ones where we were in a closed contractors' meeting and there was a lot of grumbling relating to that. The other thing that was memorable about that meeting was that as the meeting was ending the 747s were grounded with some mechanical problem that had to be fixed. All these people were stuck in Hawaii for a few more days than they anticipated. That wasn't such terrible duty for some to stay in Hawaii for a few extra days, but it made for the traveling to be a lot more difficult.

M: I would like to talk next about some of the honors. You have had two major honors, one being the Janet Doe Lectureship and the other being the Marcia Noyes Award. I don't know how you ask someone, but how did you feel about getting these awards? It's somewhat obvious, but the Janet Doe Lectureship, in particular, I'm interested in because you've written about it and because you used it as a nice way to summarize what's going on in our profession and how we look at librarianship.

B: Well, the first feeling, in my case, with the Janet Doe Lectureship, the letter just arrived, there was no phone call, and it said you have been elected to do this lecture and I was saying, "You've got to be kidding." As you know, with the Janet Doe Lectureship, you can talk about either the history or philosophy of the profession.

M: Unless you are Frank [Bradway] Rogers.

B: And then you can do whatever you want, Brad Rogers. But I, of course, being interested in history that proved to be an easy decision for me and because I was just becoming involved with *Current Practice* it gave me the idea. I had been looking at the earlier editions of the Handbook to try and trace the history of the profession through the various editions. The staff person who we worked with at Scarecrow Press happened to come to the lecture. We hadn't published the first volume. And he was so delighted because he said I had done all of his market research for him in terms of all of the issues of the history of the publication, what were the problems with it, various issues that came along. But it was fun for me, too, to go back and see what had happened in libraries. How had our practice changed over the years? Then I was asked to do the article for MLA's centennial on the Janet Doe Lectures. That was a great deal of fun as well. When I did my own lecture I sampled some of the previous lectures, but in this case I read every one of those lectures and it was interesting to tease out themes and approaches to it.

M: I want to read the quote from your article about the Janet Doe Lecture, the way you

opened it. I wasn't aware this was how it happened. "The letter arrived without warning instantly eliciting sensations of pride and pleasure at the singular honor which had been bestowed." Then it goes on to say, "And then it was a sense of oh, my gosh." And I didn't realize that you don't know you're being considered. It just happens.

B: It just happens. It is a secret process and so when the nomination for the Janet Doe Lectureship is submitted you're not supposed to let the person know that that is happening.

M: Now have you been on that jury?

B: I was on it early in my career before I was a Janet Doe lecturer. Before there was the formal jury process that we have now, I believe there was a committee that did that. It always included three previous Janet Doe lecturers. We were discussing who would be possible good lecturers. There was no nomination process the way there is now. It was really up to the committee to come up with the names. I was the one person who had not been a previous lecturer. And we came up with one name and one member of the committee – actually I can remember, a very prominent member of the association – this one person said, "That person has been MLA president. The lectureship should be reserved for those who aren't president because they get their distinction and recognition earlier." And I was kind of shocked by that. This happened to be an individual who had lost MLA elections a number of times and had very strong feelings about awarding this honor to somebody who hadn't been accruing all sorts of other honors through the presidency.

M: Is that one of the criteria now?

B: I don't believe so. Now it's a much more open process where nominations are submitted at-large from the membership and I think the committee has a lot of good supporting documentation.

M: And it's also now younger people. It isn't always people who would have been president and then given the talk.

B: Yes. I've been really pretty pleased with the process as it has evolved in, I would say, the last five to ten years where in fact there has been a much broader balance in terms of younger people, as you point out, people from different backgrounds. We have had hospital librarians. We have had other types of individuals. But we have had a good balance.

M: But I was very surprised that it was such a surprise. Now is the Noyes Award equally a surprise?

B: Absolutely. It is less of a surprise then it used to be. The Noyes Award they did not tell. When I first joined MLA and started to go to the meetings, the person who was going to receive the Noyes Award didn't know in advance.

M: And how were you sure that they were at the meeting.

B: People were deputized to get them there and I became aware of how difficult that was because the year that Louise Darling was to receive it, we were deputized, some of her staff, to make sure that she attended the Honors and Awards Luncheon where she was to receive the award. And that was the year when she was in a particularly frustrated, unhappy mood and she was talking about not going to this luncheon, and I think that perhaps in the end Gloria Werner may have had to tell her, "Louise, you have to go because you're going to be getting an award," because she was bound and determined not to go that particular year. They changed that and now they notify the individual prior to the annual meeting and that's very nice. But the fact that you are nominated is a complete surprise. It's supposed to be kept confidential, but I'm not sure that it always is in every case.

M: And have you ever been on that? Or maybe you were the year after you were given the award?

B: No. I believe that the Marcia C. Noyes Award is handled by the chairs of the various juries of the Honors and Awards Committee. So I have not been on that particular committee. I have certainly participated in nominating individuals for the award and that's been a real pleasure to be able to put together those packets and work with people on that.

M: Usually, however, the last year's winner presents that award.

B: That's been the practice the last few years, yes.

M: Which was nice.

B: Yes, it was fun for me, for example, to be able to present it to Bob Braude. That was a great deal of fun.

M: Do you have other awards that you wanted to speak about? They don't have to be awards but honors?

B: Well I was quite surprised to receive the President's Award for the history of the Regional Medical Library network. That was something that I think Ray Palmer, who was then executive director of MLA, was instrumental in coming up with, the idea of the President's Award and that was a big surprise to me. It happened when I was on the Board of Directors at MLA and they presented it to me at a meeting.

M: I think we have talked enough about your involvement with the Handbook. I don't know if we need to go over anymore in terms of that?

B: No, I think we have got it pretty much covered.

M: Anything else on MLA before we move on?

B: I don't think so.

M: We are going to talk about AAHSL (Association of Academic Health Sciences Libraries) on Friday with Rachael. I don't know if you have any other comments that you think would be pertinent or would be better handled here. You were both on the Board together and you both have been involved in AAHSL for a fair amount of time.

B: I think that there is really not much that won't be covered on Friday. I think that the organization itself, and we talked about that already a little bit, provided a really good venue for directors to get together and be able to approach common problems and work on solutions. We will go into some of those on Friday.

M: Yes. That's my thought as well. Now another group you were involved with was the AAMC (Association of American Medical Colleges). You were involved with this organization since, of course, you represented a medical school library.

B: Well, yes. The AAMC is a venue during which AAHSL meets. When AAHSL was founded the dream was that it would become a formal section of the AAMC. Gerry Oppenheimer and the other founders worked pretty hard to see if that could be accomplished, but the structure of AAMC at that time was not conducive for that. AAHSL decided to continue to always have its annual meeting at the AAMC meeting. To my mind, that was a very wise decision because we were physically present at the AAMC meetings and we attended the general sessions. The way the AAMC meeting is organized, you are not allowed to have concurrent sessions during some of the major sessions. From my perspective it was a tremendous educational opportunity because I could go and listen to the issues that were facing our medical schools and, I have to tell you, that often made me feel much better because they didn't have any more assurances of what their future was going to be like than we did as librarians. But the other thing that was really important is that it, I think, raised the prominence of medical librarians and what they could do for their institutions. I remember when I first started attending, UCLA had a new dean of the School of Medicine who had come from Pittsburgh. He was surprised to see me at AAMC. "Why are you here?" And it was an opportunity to explain and then over the years it became very clear to them, to deans and other administrators, that we really had an important role to play in education.

The AAMC, of course, sponsored or produced some very important publications that had an impact on health sciences libraries, academic health sciences libraries. The first one that comes to mind is the Matheson-Cooper Report which led to the IAIMS program that the National Library of Medicine funds. The other very important report was the GPEP Report (General Professional Education of the Physician). It was a landmark report that proposed reorganizing the way medical education is conducted and recommended moving much more towards self-learning, self-instruction, self-paced. That report was written, let's see the panel began its work in 1981 and the report was issued in 1982. And

it became very clear that if we were not going to have lots of lectures for students and try to fill their heads with, but teach them how to use information, that there was a role for libraries. I think the fact that AAHSL was meeting with AAMC, that we attended the discussions when the GPEP Report was being discussed, that we volunteered to help work on some of the follow-on reports, that really changed the way that our medical schools viewed us. It provided an entree into doing the kind of education that we had always wanted to do. At some institutions we were more successful than others in getting a little bit of time in the curriculum and I think by the fact that we were present at those meetings, that we participated in those discussions, that the administrators knew us, we were able to get much further ahead than we would have otherwise.

M: I know that the medical school is usually the powerhouse in an academic medical center. Is there any similar participation in the nursing or dental or pharmacy?

B: There is certainly in the dental, American Dental Association I guess it is, but primarily by separate dental libraries. In some institutions there are freestanding dental libraries. I think those are actually disappearing. But they have a comparable group. Following that pattern, one of the activities that Rachael and I will probably talk about on Friday is one activity that AAHSL was involved with, trying to get the AAMC, which is one of the two groups involved in accrediting medical schools, to change the questionnaire that was used to assess the library for a medical school. After we accomplished that, the dental group was very interested in what our experiences had been. I believe also the pharmacy schools have similar type groups if there is a freestanding library. In most cases, if it's a combined health sciences library I'm not aware of very many directors who would attend those other meetings. Sometimes they might send, if there is a librarian, for example, who is responsible for dentistry then they might attend those.

M: But not with the power that AAHSL has.

B: No.

M: AAHSL is not taking on that responsibility for other areas in health sciences?

B: No.

M: Anything else about AAMC?

B: I think that's basically it. I guess I should say one other thing about AAMC. A more recent development in AAMC was the formation of what is called the Group on Information Resources and I need to consult a recent paper.

M: We should mention the paper that you're consulting.

B: Yes. On the occasion of the 25th anniversary of the founding of the AAHSL there is a symposium that will appear in the April, 2003, *Journal of the Medical Library*

Association on the history. I wrote an article on the vision of AAHSL and so I am consulting this in terms of some of the details on the Group on Information Resources. When information technology became so important, there was a movement within AAMC to have a group that was addressing information technology, and it's an interesting combination. The health sciences librarians immediately joined up with the GIR (Group on Information Resources) as the group was being formed. It also includes people like the directors of the computing centers of the hospitals or the medical schools so it's a multidisciplinary group and the very first board of the GIR, as it's called, included a number of medical librarians so there was a lot of discussion. It has led to some questioning, do you need both AAHSL and the GIR, and that's yet to be determined. Do we have energy to participate and work in both types of groups?

M: It's interesting that MLA originally was started heavily by physicians and was run by physicians, even though there were librarians equally beginning it, up until the '40s, I believe. And now probably we have two or three physicians who participate in MLA who happen to be heads of not just libraries but of the greater library information group in a medical center. But the collaboration now seems to be in AAMC through AAHSL involvement. It's a whole shift.

B: Yes. Part of it was just MLA because it's a diverse group and has many, many issues that it deals with. The directors felt that it was difficult to focus in on the things that were most important to medical education in academic libraries and so that venue, the AAMC/AAHSL venue, is the one in which that action can take place more effectively. It's a smaller group of people. You are only talking about 120 institutions. Only one individual comes because it's a representative thing so the director attends. Other people can attend and observe but it's not a broad membership organization the way MLA is.

M: Well, let's see. The National Library of Medicine. Now some of these things that you were involved with I think Rachael was involved with but at different times. And you mentioned right at the very beginning that one of the things that impressed you about medical libraries was the support that they have from the National Library of Medicine. So it's fitting that you were very active in National Library of Medicine activities. I think what I said in my notes was that you can pick the things that you want to discuss because I was unable to choose which were most significant.

B: Well, I think my very first official involvement with NLM, aside from being on the Regional Medical Library staff, was when NLM decided to begin to work on what turned out to be SERHOLD, the union list of serials. When I first started in interlibrary loans, some regions had union lists that they had developed in paper format. We didn't have any in our region. When you were trying to find out what region had a journal you had many books to look through to figure out which region can I send my request to. So NLM, after they got the MEDLARS system up and running well for Index Medicus or MEDLINE, decided to turn its attention to SERHOLD. So I was sent by my region to work on that and then came back and we really gathered together all of the information for our region to submit to this national database. So that was my first interaction with NLM and its staff and it was a very exciting time to be participating in a project such as

that. I was very fortunate to be appointed to the Biomedical Library Review Committee which, as you know, is the body which reviews the grant proposals that come to the National Library of Medicine. It's a very stimulating and exciting group because it includes a few librarians, usually only a couple, one academic and one hospital librarian, it has computer scientists, it has physicians, and it has medical informatics types because NLM's portfolio of grants is very broad. It ranges from the resource grants for small libraries to multimillion dollar informatics grants, or the IAIMS grants, and you get to read all of them. The way the process works is you are assigned as primary or secondary reviewer to a set of grants. It might be one on radiological images, which is really a struggle for a librarian to understand, and it could be one that's in the library field. What I found was, of course, you learn a tremendous amount from reading these proposals. It's a very collegial group. NLM has probably one of the most efficient grant reviewing processes I've ever seen. I subsequently participated in one National Science Foundation grant review process and I will never do that again because it was just so different and not as coordinated as NLM's. I found that you could, even though you might not have mastery of the subject matter, and there were always experts who were really the ones who were looking at the science of the particular proposal, you could assess major flaws, you could find them in a proposal in other areas, so I was able to contribute in subject areas where I wasn't sure I was going to beforehand. It was interesting to find that the scientists could not understand a library proposal any better than I could understand some of the ones that were challenging for me.

M: When were you on that board?

B: I was appointed in 1993 and I then chaired the committee from 1996 to 1997.

M: So you had already participated in writing a number of grants before that? Do you think that that's an important criterion for being on the committee?

B: Absolutely, I think that you do need to be familiar with grant writing and grant proposals and understand what is going to lead to the success of a particular project.

M: And what happens with the process? Do you get together? Is it done face-to-face or is it now done with email?

B: No, it is done face-to-face. There are three meetings a year. So about a month before the meeting you get a pile of papers depending on how many grants you are going to review.

M: Alison indicated the pile about 18 inches high.

B: That's right. Depending on how many grants are being reviewed and you have to read the one that you are assigned and prepare written critiques of them.

M: And there is a template for that?

B: Yes, there are criteria that you need to follow. Then you travel to the National Library of Medicine and you meet for a day and a half. You are supposed to read all of the grants that are being reviewed, and often it can be up to 30 grants in a particular session, but you have to write reviews on the ones that you are assigned. So then at the meeting they will go through each grant and the primary reviewer will give his or her comments. The secondary reviewer will add to that and then the committee as a whole will comment on it. Then you assign scores and those are done individually and then the NLM staff averages those out and gives the final score to the proposal.

M: So as chair you are responsible for divvying up the work and running the meeting?

B: Actually the NLM staff divvied up the work, as chair you run the meeting, you make sure, especially when you were talking about things like grant reviews, that you keep people focused on the criteria, don't get sidetracked. Sometimes personalities will enter into it if somebody knows a particular investigator and that might be to their advantage or not depending on what their knowledge is, so you need to keep order to the session, keep it moving. Sometimes there can be strong disagreements and you need to adjudicate those and bring the discussion to a conclusion.

M: Do you feel like that's a strength you have, running the meetings? How did you develop that?

B: I think that I do have a strength. I'm a very calm person. I'm very organized and I can keep to a timetable and I can usually manage to facilitate a discussion especially if it gets to be heated in some way.

[End Tape 3, Side A]

[Tape 3, Side B]

Diane McKenzie: Side B, Tape 3 of an interview with Alison Bunting. As the tape went off you made a comment about running meetings.

Alison Bunting: Yes, I think that my father had my two brothers and me involved in a fair number of activities where we had to work with other people and I started to learn that at an early age, and then I just seemed to have an ability to get along with most people and to keep a process moving ahead. Being organized is important for that.

M: And I commented on, when the tape was off, that earlier that you were basically a modest person and didn't like to take credit for influencing others all the time, but I think that that may also help running a meeting where you are not trying to bring focus on yourself.

B: Yes. I think that's true. And also over the years I think I have learned it by working on committees within the UCLA library. I have done some facilitating and so I have been interested, when I have participated in strategic planning, watching the processes

that people used to move things along and then have been able to apply them myself as I've worked on them.

M: Were you on the Board of Regents as well?

B: Yes, I'm currently on the Board of Regents and I am chair of the Board of Regents. That, of course, is a tremendous honor.

M: This is for NLM?

B: This is for the National Library of Medicine. Again it's a very multidisciplinary group. It has at most two librarians on the committee and it includes medical educators, physicians, and very prominent individuals. It meets three times a year and the agenda is pretty much developed by NLM to keep the regents informed on NLM's activities and, of course, bring to their attention any policy issues which they need to decide on. One policy issue which is always on the agenda at the Board of Regents is to give final approval to the recommendations of the Biomedical Library Review Committee. They will score the applications and then those grants are given to a subcommittee of the regents who actually review the ones that are a small, select subset of those, and either concur or disagree with the review of the committee and then no funding can be awarded until the Board of Regents has actually made a final decision. If there is a policy question that comes up related to grant proposals then the Board of Regents would be the one to whom NLM would turn for advice. A good example in my career was that when vendors started to produce MEDLINE on CD-ROM, and this was before MEDLINE was available freely over the Internet, a lot of libraries were putting in grant proposals to NLM to get funding to purchase CD-ROM packages. There was a great deal of disagreement as to whether NLM should fund the purchases of those and so that was an issue that went to the Board of Regents. I believe that they've ruled that that would not be a normal type of thing that would be funded. If there was a unique aspect to a delivery of information that included the purchase of a CD-ROM package it could be funded, but that they [NLM] weren't in the business of providing the database to the vendors and then providing the funds for libraries to purchase them. So those would be the types of questions.

M: Now were you on the board before or did you just go onto the board as the chair?

B: No, I was on the board. It's a four-year term and so I was elected chair. This is my final year.

M: How does one become elected?

B: Well, it's actually an appointment. It used to be a presidential appointment. It is now an appointment by the director of NIH. It can be political in the sense that Congress looks very carefully at the geographic representation on all the NIH committees, not just NLM in particular. So Don Lindberg had said to me a number of times that he had turned in my name to be on the Board of Regents, but because I was from California and

there were too many people from California on NIH committees, I kept being knocked out. So there are various ramifications that come along with that. It's actually the secretary of Health and Human Services that makes that appointment. So when you get that letter it's really pretty nice. Donna Shalala was the secretary when I was appointed, so it is a major honor and one that I've been very pleased to serve on that board.

The other NLM activities were some of the planning panels. When Don Lindberg was appointed in 1984, one of the things he instituted was a long-range planning process for the National Library of Medicine, and he brought in outside experts in a variety of areas. The first one I was on was Planning Panel 1, which was on building and organizing the library's collection. That happened to be chaired by Bob Hayes who was the faculty member I mentioned earlier in my interview. And we talked about what is it that NLM needed to do to continue to build, catalog and organize its collections. Then there was a special Planning Panel on Outreach Programs and I was asked to be a member of that. That was chaired by Michael DeBakey, which was really very interesting. And he, of course, has been a strong supporter of the Regional Library Program and one of my publications was a small piece that we did as an offshoot of some of our work with that particular planning panel. And then, I'm sure we'll talk about it, or Rachael will certainly talk about it, the Planning Panel on the Education and Training of Health Sciences Librarians.

M: You were both on that.

B: We were both on that. I believe I was an MLA representative to that.

M: I asked you about how you were appointed to the Board of Regents, but I don't know how one is appointed to the Biomedical Library Review Committee.

B: That is something internally within NLM. They can make those appointments. I believe they look at individuals who have had proposals funded in the past so many of the medical informatics faculty, for example, are ones who have received NLM funding. Then any interaction they've had with individuals throughout the country to provide this broad representation and different kinds of expertise.

M: Do you have anything else to add about NLM? That we won't talk about on Friday.

B: I think that is about all of it.

M: I want talk a little bit about the regional groups that you were involved with. As part of that, and you alluded to this earlier, that it used to be very important for the more line librarians who weren't on the director or associate director level, that was a place where they were able to go to a meeting and to meet people and to be involved at a larger level than their own library, and that nowadays more and more regular people, I guess we'll call them, do go to MLA. It's a change of philosophy, and I wonder what the role now is of the chapter and if that has changed, and if you have any thoughts? I mean it may not be something that you are involved with.

B: I still think it's a very important way to begin your professional involvement, and even though attendance at MLA has increased, although I think if we were to look at registration numbers it probably remains roughly the same. It's higher than it was. But for hospital librarians, for example, again individuals working in one-person libraries, it is sometimes very difficult for them to get away for the length of time that an MLA meeting takes. So having these local organizations brings in continuing education programs, brings in speakers, and it is the best way to start to learn how to work on a committee, it is the best place to make your first presentation of a paper, and to learn from that particular experience. One of the things that I was very much against, and again when we talk about the time on the MLA Board, that was a time of change of MLA's organizational structure, and frequently, when I was on the board, there was discussion about should we be more like SLA and require that, in order to belong to the chapter, you have to belong to the national organization. I was very much against that and still am. I could see, in the Medical Library Group of Southern California and Arizona, that if we were to require membership in the national organization we would lose at least half of our members.

M: It's expensive to join MLA for many people.

B: It is. If you cannot go to the meetings or you're not in a tenure track system or an academic system where that's very important and it pays off for you professionally it's something that would just make the local organization irrelevant to individuals.

M: They've even dropped the compliance percentage now.

B: Have they?

M: Yes. Chapters used to have to have 50% of their members. We were always at 50.2% in our chapter, or 50.1, and it was always questionable if we were going to be in compliance, but that has dropped now. So they are working on going new directions.

B: Right, and one of the things that I found really exciting about chapter meetings recently is that a big change, and it's related to the RML, is that in the past five years we have had funding in the various RMLs to do outreach awards; small awards, grant awards for hospital librarians who don't have the time or the expertise to write one of the bigger NLM grants, and we could give them awards of say a few thousand dollars to do a special training effort in their geographic area on MEDLINEplus or MEDLINE. And, one of the things that happened is that many of these people would then do papers for the regional chapter meetings. It was wonderful to watch that, because these were individuals who didn't have opportunities to participate in a project that would give them something to write about and do a presentation at a meeting, and then they would do them at the chapter meeting. And then I would start to see them showing up as either poster sessions at MLA or as invited papers. It is really the best way to get started professionally, and have a wonderful way to provide programs and learn how to give a paper, learn how to work on a committee. So I think it's a very important part of our profession.

M: Anything else on chapters or local groups?

B: No, other than I am very prejudiced that the Medical Library Group of Southern California and Arizona is one of the very best chapters. It's a very vibrant group and it's been wonderful for me to watch, as I dropped out of my direct involvement in it, that there has been a stream of young, new to the profession, individuals who are taking on the responsibility to put on very good programs and bring in good CE programs. It's a group that actually always had a fair amount of money because it operated a coupon system for interlibrary loans. The small hospital libraries didn't want to have to be paying invoices when they started charging one another so the chapter sold these coupons. You would write a check and get 50 and your interlibrary loan would cost one dollar. These coupons just continually circulated and the money that was being held by the chapter was invested in a CD and generated income that the chapter could use for its CE programs and other activities, so it was quite entrepreneurial.

M: It used to work better than it does right now.

B: Now they are having to phase it out.

M: Do you have anything else you want to bring up before we talk about the very last questions that I would like to ask you?

B: I think not.

M: Okay. Also we need to remember how many things we are going to be talking about on Friday. I have a feeling those are missing.

B: Why don't we take a break now, what do you think?

M: Okay, that sounds good.

[Tape stopped]

M: We are back from a break and one thing I wanted to have you comment on is what you see, how you see your involvement with the Medical Library Association or that field now that you've retired, very recently retired, or if you will be back in at all?

B: Well, I do have a couple of projects that I am committed to doing for the Medical Library Association and the profession, one I think I've already mentioned, which is to update the history of the Regional Medical Library network. We have already approached Scott Plutchak to see about publishing it as a supplement in the *Bulletin* the way we did the first one. I think my involvement will primarily be in the areas of publication as I do enjoy doing historical type research. There have been a few things, as I have done research, I think, "wouldn't it be great if we had like an index to all the Proceedings?" So depending on how things go in terms of what other things I am doing

in my retirement life, I will probably participate in that. I don't plan to attend meetings unless they happen to be local or there is a particular reason to go to one. Rachael Anderson and I will go to the San Diego meeting because we can drive over and it will be fun to see old friends and go to the Janet Doe luncheon. I don't know if I mentioned this earlier, but it is a tradition that the lecturers in attendance at the meeting take the person who has most recently completed their lecture out to lunch. That's a fun time, once they are all relieved to have the whole thing over, and it's a great way to meet some of the previous lecturers. In terms of consulting or providing advice or support to other libraries, I might do a little of that, but I would expect for a very short period of time, because I feel you become uninformed. It is very difficult to keep up with what's going on unless you are really actively working hard at it, and I don't think that it would be of particular benefit to institutions, so I probably will not be doing that.

M: Okay, I like to end any interview that I do with a certain set of questions and I see them as you can interpret them very broadly and they just sort of sum up, and everyone sort of answers the questions differently, but they all answer the same questions. And there's a certain redundancy here, you already mentioned some of these things. And the first one has to do with influence. Who were your mentors and who did you mentor? And I know you said you were a modest person, but if you can just address that for a moment.

B: Well, I think I mentioned my mentors early on, or perhaps not, but certainly Louise Darling qualifies as a mentor, Gloria Werner, Phyllis Mirsky and Nelson Gilman, those individuals who were really my early bosses or individuals who I continued working with. People who influenced my career or assisted me, I have to say that my husband, Wade, has been very influential in my career by the fact that he has always been very supportive of my activities and tolerated my absences, either physical absences when traveling or when involved with a particular writing project. Professional colleagues have, we talked a little bit about the friendships but people like Rachael Anderson, again Phyllis Mirsky, Joan Zenan and Mary Horres, who I mentioned, when she came to UC San Diego. She and I joined the MLA Board, I think perhaps even in the same year, and we ended up rooming together and we continued to room together after the MLA Board experience. We became very close friends. She retired a few years back and has relocated to the east coast, but she was a very special colleague. And then, I feel very fortunate to have worked with some really special people at the National Library of Medicine: Lois Ann Colaanni, Donald Lindberg, Betsy Humphreys, Kent Smith, who I think is a very important individual at NLM, Sheldon Kotzin, and Becky Lyon, with whom I worked quite closely as it related to the RML program.

M: Okay, do you want to mention people that you feel that you are happy that you were mentoring them or that it looked like they were going to take an important role in the library?

B: Well, I think we talked a little bit about some of these earlier today. You know I think that there are other people, and I don't have any particular names, but that through some of my teaching, through some of my consulting and training, or my work with them

at MLA, some have had new opportunities that they wouldn't have had otherwise. Some of the students that I had in library school have gone on to work in medical libraries and be quite successful in this area. But beyond the names that I already mentioned earlier, I don't have any additional names.

M: The next question is how do you want to be remembered? Your most important contributions, and perhaps, differently, how you would like to be remembered, they are not necessarily the same.

B: Well, I think that probably I would hope that I would be remembered most for some of my publications, especially the historical topics that someday some people will say, "Oh gee, I'm really glad she took the time to do that because I found this useful for me." And, I think that in terms of my interactions with the library community, that I was a welcoming and open person, that I got along well with a lot of individuals, and that I do adapt well to change, welcome change, and look for what are the opportunities and the changes that are being presented to us by technology or circumstances. And in general take a very positive, even approach with individuals. I think that has helped me to be successful, the fact that I get along with a wide range of people. Some of the people in my career that have worked, either with me at UCLA or in the profession, I seem to have had the ability to get along with those who sometimes are, how would you describe it?

M: Difficult personalities?

B: Well, they can be. They are very brilliant, they have different ways of thinking, and I can find really good ideas in those things, but they can be difficult to get along with because they're so different from the norm. And I think that I have been able to work effectively with those types of individuals as well.

M: Now the next aren't so personal, but they give you a chance to make some predictions. So where is medical librarianship or librarianship headed and what are the big issues for addressing, and, this will be nice for you, how does the past help us address those issues?

B: In health sciences libraries, because so much of the information is now available online, the full-text electronic journals, we really need to focus on getting out and interacting with our users much more directly in their own environments. It used to be, when I started, that they have to come to us for their information, so we had opportunities to get to know them across the reference desk, working in various venues within the library. They don't need to do that anymore, and, in fact, it is sometimes invisible to them where these free, electronic resources come from. They may not be conscious of the fact that we are negotiating license agreements and paying significant sums to make it available. Now I think it's absolutely wonderful that we are delivering information to their desktops. That is the ultimate service and it's something that it's wonderful that technology has made possible, and we need to do all we can to improve that and make it even better. But in order for the profession to succeed, for individuals to appreciate the value of librarians and what we can bring to the institutional mix, we need to be out there

working with individuals and committees, talking with them, visiting them, finding out what their information needs are and carrying personal messages. And I think that's a very different role from when I look back at Louise Darling's approach to the library. In her day it was, I'm not saying that there wasn't consultation with users, there definitely was, but there was much more of, "Well, I know what you are going to need and I will provide it to you in the form of this collection that I can make available." So it's been a change and individuals coming into our field also have to be the type who can adapt to change because it's going to be constant. I think technology is going to keep us hopping all the way along.

M: And, finally, if you could give some advice to people in the field today and some almost have done that right now, most of the new librarians and to people who are well into their careers, what would your advice be?

B: Well, as I say, keep focused on what is the mission of your library, of your profession. If it's to deliver information to some form of user that's what you have to do and then you figure out the best way to do that, and take advantage of changes that come along that enhance your abilities to make changes. And be prepared to give up some of the time-honored, traditional things that we are so used to. We were talking last night about weeding out reference collections of these major abstracting and indexing tools that were so important and made or broke a library in the sense of, this was a distinguished library that had Chemical Abstracts and Excerpta Medica, and that's not important anymore. Other resources are far more important. So those would be the major things. You really need to be able to get out of your library, feel comfortable interacting with individuals. Certainly if you want to be a library director you have to be comfortable with donor relations, working in the whole development arena, and approaching administrators and faculty, on a collegial basis and carrying the message of the importance of the library.

M: Anything else you want to talk about that we have forgotten?

B: I don't think so.

M: Okay. Now I also want to say thank you for the wonderful interview and I am looking forward to Friday.

B: All right.

End of interview.

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 Assistant Dean for Library Services, 19
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 University Librarian, 9, 20
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CURRICULUM VITAE
ALISON BUNTING

EDUCATION

University of California Irvine, California	B. A., 1969 Major: French
University of California Los Angeles, California	MLS, 1970 Major: Librarianship

HONORS AND AWARDS

- Medical Library Association, Marcia C. Noyes Award, 2001.
- Medical Library Association, Fellow (elected), 1998.
- Medical Library Association, Janet Doe Lectureship, 1993.
- Academy of Health Information Professionals, Medical Library Association, Distinguished Member, 1990, renewed 1995.
- UCLA Graduate School of Library and Information Science, Senior Fellow, 1989.
- Medical Library Association, President's Award, 1988.
- Medical Library Association Certification, 1976, renewed 1982, 1987.
- Librarians Association of the University of California, Research Award, Regional Medical Library Program: 1965-1985, May, 1985.

PROFESSIONAL EXPERIENCE

- Interim University Librarian, UCLA Library, July 2002-December 2002.
- Associate University Librarian for Sciences, UCLA Library, January 1991-2002.
- Acting Associate University Librarian, Research and Instructional Services, UCLA Library, April 1990-July 1991.
- Co-Director, UCLA InfoShare Project, University of California, Los Angeles, March 2000-December 2002.
- Director, Louise Darling Biomedical Library, University of California, Los Angeles, May 1984-June 2002, Acting Director, January 1983-May 1984.
- Director, Pacific Southwest Regional Medical Library Service, Louise Darling Biomedical Library, University of California, Los Angeles, May 1984- , Acting Director, September 1983-May 1984.
- Assistant Dean for Library Service, UCLA School of Medicine, May 1984-December 2002, Acting Assistant Dean, October 1983-May 1984.
- Associate Biomedical Librarian for Public Services, Louise Darling Biomedical Library, University of California, Los Angeles, July 1979-May 1984.

- Acting Associate Director, Pacific Southwest Regional Medical Library Service, Louise Darling Biomedical Library, University of California, Los Angeles, February-June, 1979.
- Head, Consulting and Training Services, Pacific Southwest Regional Medical Library Service, Louise Darling Biomedical Library, University of California, Los Angeles, September 1974-June 1979.
- Head, Interlibrary Loan Services, Louise Darling Biomedical Library, University of California, Los Angeles, July 1972-September 1974.
- Interlibrary Loan Services/Reference Librarian, Louise Darling Biomedical Library, University of California, Los Angeles, June 1970-June 1972.

CONSULTING AND TEACHING

- Chair, National Library of Medicine, Board of Regents, 2002-2003, Member, 1999-2002.
- Consultant, Columbia University Health Sciences Library, 1999.
- Chair, National Library of Medicine, Biomedical Library Review Committee, 1996-1997; Member, 1993-1996.
- Consultant, National Library of Medicine, Long-Range Planning Panel on the Education and Training of Health Sciences Librarians, 1993-1994.
- Consultant, Blue Ribbon Committee for the Review of the Health Sciences Library, State University of New York at Buffalo, 1993.
- Consultant, Ministry of Public Health, People's Republic of China, August, 1991.
- Strategic Planning Consultant, University of California, Collection Development Committee, 1989.
- Consultant, National Library of Medicine, Planning Panel on Outreach Programs, 1988-1989.
- Consultant, National Library of Medicine, Planning Panel 1--Building and Organizing the Library's Collection, 1985-1986.
- Adjunct Lecturer, UCLA Graduate School of Library and Information Science, GSLIS 471: Health and Life Sciences Libraries, 1984- .

PUBLICATIONS (selected)

Bunting A, Werner G. Louise M. Darling, 1911-1999 (obituary): Biomedical Librarian (1947-78). Bull Med Libr Assoc 1999 Oct; 87(4): 503-4.

Bunting A. Excellence, promise, vision, and values: reflections on the Janet Doe Lectures, 1967-1997. Bull Med Libr Assoc 1998 Apr; 86(2):258-66.

Bunting A, editor-in-chief. Current Practice in Health Sciences Librarianship, Metuchen, NJ: Medical Library Association and Scarecrow Press:

Volume 1: Wood MS, ed. Reference and information services in health sciences libraries, 1994.

Volume 2: Allegri F, ed. Educational services in health sciences libraries, 1995.

Volume 3: Lipscomb CE, ed. Information access and delivery in health sciences libraries, 1996.

Volume 4: Richards DT, Eakin D. Collection development and assessment in health sciences libraries, 1997.

Volume 5: Morse DH. Acquisitions in health sciences libraries, 1996.

Volume 6: Thompson LL. Organization and management of information resources in health sciences libraries, 2001.

Volume 8: Forsman RB. Administration and management in health sciences libraries, 2000.

Bunting A, editor-in-chief. Current Practice in Health Sciences Librarianship, New York, NY: Medical Library Association and Forbes Custom Publishers:

Volume 7: McClure LW. Health sciences environment and librarianship in health sciences libraries, 1999.

Bunting A. From **Index Catalogue** to Gopher Space: Changes in our profession as reflected in the **Handbook** and **CPHSL**. Bull Med Libr Assoc 1994 Jan; 82(1):1-11.

Bunting A. Legal considerations for document delivery services. Bull Med Libr Assoc 1994 Apr; 82(2):183-187.

Bunting A. Academic perspective. Natl AHEC Bull 1991 Summer; 9(1):10-11.

Medical Library Association. Oral History Committee Interview with Priscilla Maltby Mayden. Interview conducted on June 25-26, 1988 by Alison Bunting. Chicago, Medical Library Association, 1991.

Horres, MM, Bunting, A. Interlibrary cooperation among health science libraries. In: Handbook of medical library practice, Darling, L. ed., 4th ed., Volume III, Chapter 6, Chicago: Medical Library Association, 1988.

Bunting, A. The nation's health information network: history of the Regional Medical Library Program, 1965-1985. Bull Med Libr Assoc 1987 Jul; 75(Supp):1-62.

Joint Task Force of the Association of Academic Health Sciences Library Directors and the Medical Library Association. Challenge to action. Planning and evaluation guidelines for academic health sciences libraries. Love, E., ed. Chicago: Association of Academic Health Sciences Library Directors and the Medical Library Association, 1987.

Bunting, A. DeBakey, ME, Davies, NE, Messerle, J, Palmer R. Medical Library Assistance Act: a twenty-year review. In: National Library of Medicine. Long Range Plan. Locating and gaining access to medical and scientific literature. Report of Panel 2. Bethesda: National Library of Medicine, Dec 1986.

UNIVERSITY SERVICE (selected)

Biomedical Library Advisory Committee, Convener, 1983-2002.

Librarians Association of the University of California (LAUC), Los Angeles Chapter:

- Advisory Committee for Strategic Planning for Information Resources in the Research University, Representative, 1986-1990.
- Past President, 1980-1982.
- President, 1979-1980.
- President-Elect, 1978-1979.

UCLA Academic Planning and Budget Committee. Science Service Center Task Force, Member, 1993-1994.

UCLA Information Technology Planning Board, Member, 2002.

UCLA Library

- Administrative Conference, Member, 1984- .
- Copyright Committee, Chair, 1987-1989.
- Public Service Council, Chair, 1990-1991.
- Task Group to Study ILL and Related Issues, Chair, 1983.

UCLA Research Service Advisory Board, Member, 1998-1999.

UCLA School of Medicine

- Academic Information Technology Committee, 1998- 2002.
- Advisory Committee to the Medical Education and Research Center, member, 1989-1991.
- Advisory Committee for Multi-Media Education, 1995-98.
- Association of American Medical Colleges, Group on Information Resources, Representative, 1998-
- Committee on Computing Policy, member, 1983-85.
- Dean's Education Council, 1999-2002.
- East of Westwood Steering Committee, member, 1998- .
- East of Westwood Library Committee, Chair, 1998- .
- Faculty Computer Network Committee, 1988-1989.
- Follow-on Committee for Strategic Planning, Member, 1987-1989.
- Library Committee, Chair, 1983-2002.
- LCME Accreditation Task Force, member, 1989-1991; 1996-98.
- LCME Library/Physical Plant Committee, chair, 1989-1991.
- LCME Library, Computers, Information Technology, Telecommunications Committee, co-chair, 1996-98.
- Medical Informatics Committee, member, 1988-1990.
- UCLA Medical Enterprise Master Planning Process. Education Planning Committee, member, 1996-98.
- UCLA Medical Enterprise Master Planning Process. Information Systems Planning Committee, member, 1996-98.

University of California, Ad Hoc Working Group on Fees for External Users, member, 1990-1991.

University of California Digital Library, Science, Technology and Industry Collection Task Force, 1996-98.

University of California, Heads of Public Services

- Member, 1990-1991.
- ILL Subcommittee, convener, 1992-1994.

University of California, Heads of Public Services/Collection Development Council Task Force on Access and Resource Sharing, chair, 1992-1994.

University of California, Library Council

- Subcommittee on Interlibrary Lending Statistics, Chair, 1974.
- Working Group on Non-UC Access to MELVYL, 1988-1989.

University of California, Office of the President, Advisory Committee for an Animal Alternatives Center, Member, 1989.

University of California, Search Committee for the Director of the California Digital Library, member, 1997.

University of California. Systemwide Operations and Planning Group, member, 1999- .

PROFESSIONAL ACTIVITIES (selected)

Association of American Medical Colleges (AAMC):

- Council of Academic Societies, Representative, 1989-1991.
- Group on Information Resources Program Committee, Member, 2001-02.

Association of Academic Health Sciences Library Directors (AAHSLD):

- Nominating Committee, Member 1993-1994, 1999-2000.
- Past-President, 1991-1992.
- President, 1990-1991.
- President-Elect, 1989-1990.
- Board of Directors, Member, 1986-1989.
- AAHSLD/MLA Joint Legislative Task Force, member, 1989-1991.
- Finance Committee, Chair, 1991- .
- Program Committee, Chair, 1986-1987, Member, 1985-1986.
- Search Committee for the Annual Statistics Editor, Chair, 1993.

Medical Library Association:

- Representative to the SLA Competencies Survey Advisory Committee, 1997-1998.
- Fellows and Honorary Members Jury, Member, 1994-1995.
- Editor-in-chief, Current Practice in Health Sciences Librarianship, 1989-2001.
- 1991 National Program Committee, Member, 1989-1991.
- Representative to the Association of Academic Health Sciences Library Directors, 1988-1991.
- Janet Doe Lectureship Jury, Member, 1987-1988.
- AAHSLD/MLA Joint Task Force to Develop Guidelines for Academic Health Sciences Libraries, Member, 1983-1987.
- Board of Directors, Member, 1982-1985.
- 1982 National Program Committee, Chairman, 1979-1982.
- Nominating Committee, Member (elected), 1979-1980, 1985-1986, 1992-1993.
- Continuing Education Committee, Chairman, 1980-1981, Member, 1978-1980.

Medical Library Group of Southern California and Arizona:

- Past-President and Member of the Advisory Council, 1978-1979.
- President, 1977-1978.
- President-Elect and Program Chair, 1976-1977.

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