

MEDICAL LIBRARY ASSOCIATION

ORAL HISTORY COMMITTEE

INTERVIEW

WITH

**JOANNE GARD MARSHALL,
AHIP, FMLA**

Interview conducted by Rick B. Forsman, FMLA

November 19, 2014

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Table of Contents

Consent Form	iii
Photograph	iv
Biographical Statement	v
Choice of Library Profession	1
McMaster and Expanded Health Sciences Librarian Roles	3
Consumer Health Information	5
Clinical Librarianship and Evidence-based Practice	6
University of Toronto and Career Transition to Educator	15
Diffusion of Innovation Research	16
Impact of Association Policy Statements	20
Dean at UNC-CH School of Information and Library Science	22
Accomplishments and Challenges as Dean	23
Return to Teaching and Research	27
Workforce and Value of Libraries Projects	29
Involvement in MLA and Presidency	34
Awards and Their Value	38
Other Professional Associations	42
Canadian Environment	44
Career Paths and Rewards	47
Contributions of Yoga	49
Index	56
Curriculum Vitae	60

Consent Form for Oral History Interview (2002 version)

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

1. I agree to be interviewed by Rick B. Forsman
on November 19, 2014. 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.

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

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

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

☒ No restrictions

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

Joanne G. Marshall
Name of Interviewee

Joanne G. Marshall
Signature

Date 5/11/15

Accepted by: [Signature]
MLA EXECUTIVE DIRECTOR

Rick B. Forsman
Name of MLA Interviewer(s)

Rick B. Forsman
Signature

Date 5/5/15

Date 2/26/16



Biographical Statement

Joanne Gard Marshall, PhD, AHIP, FMLA, graduated from the library science program at McGill University in 1968. She earned an MHSc degree from McMaster University in 1978 and a PhD in community health from the University of Toronto in 1987. Her interest in research and its application in practice were cornerstones throughout her career and helped to determine many of the issues she pursued in her work settings in Canada and the United States and as a leader in the Medical Library Association.

After beginning her professional career at the University of Calgary, Marshall developed her lifelong commitment to health sciences librarianship while working in the Health Sciences Library at McMaster University from 1970-1982. Upon completion of her doctoral degree, Marshall joined the Faculty of Information Studies at the University of Toronto, where she taught from 1987-1998. She was recruited to be dean of the School of Information and Library Science (SILS) at the University of North Carolina at Chapel Hill, where she led the program from 1999-2004. In 2004 she became alumni distinguished professor in SILS, devoting herself to research, teaching, and service, and in 2014 was appointed distinguished research professor. During her five-year tenure as dean, SILS saw a four-fold increase in research funding and developed important new educational programs that helped the school achieve international prominence.

Marshall was president of the Medical Library Association in 2004/05, having served earlier on the Board of Directors from 1994-1997. She contributed to key MLA committees and task forces, including the Research Task Force and related committees, Nominating Committee, and associate chair of the 2000 National Program Committee. She chaired three sections: Medical Library Education, Consumer and Patient Health Information, and Library Research. Marshall delivered the Janet Doe Lecture in 2013 and the following year was recognized with the Marcia C. Noyes Award. She was honored with life membership in the Canadian Health Libraries Association (2000), Special Libraries Association fellowship (2001) for her work on their research and competencies documents, and MLA Fellow (2002). In 2005, McGill University conferred an honorary doctorate in recognition of her contributions to the field of health sciences information.

Marshall helped reshape practice, education, and research during a remarkable period of innovation and change in the field. She was an early leader in consumer health information services, clinical librarianship, and the study of adoption of technology. In key studies, she documented the value of the librarian in contributing to clinical practice and successful patient outcomes, and she collected data on workforce issues affecting librarians. She published more than a hundred scholarly articles. Due to her widely recognized research skills, she was repeatedly called upon to guide the development and implementation of MLA's research policy statements. An early champion of evidence-based librarianship, Marshall led international conferences dedicated to this topic and spoke frequently about the acquisition of research skills and application in the daily work of librarians. Her passionate focus on practical research served as a stellar example of how librarians can acquire new skills, demonstrate their institutional contributions, and be accepted as valued peers in the health care environment.

Medical Library Association Interview with Joanne Gard Marshall

[Wave sound recording #1]

RICK FORSMAN: This is an interview with Joanne Gard Marshall. We're at the School of Information and Library Science on the campus of the University of North Carolina at Chapel Hill. Today is November 19, 2014, and I'm Rick Forsman. To begin, Joanne, what influenced you to go into librarianship?

JOANNE GARD MARSHALL: It's always interesting to reflect on those things. If I go right back to what made me start thinking about the profession, which was quite early on, I did work in the library at my high school, and I was always a big public library user. I liked the library as a place to be, and I really liked the librarian at the high school. I felt that I learned a lot. I was fascinated by the way that the books were organized and the indexes that were available. If you don't have a librarian at that age to show you these things, you don't even know that they exist. This seemed to open up a world.

So I had that in mind. Then, when I was deciding to go to university, my father had a big influence on my educational choices. He was British and I was born in Britain. We immigrated to Canada in the '50s. My mother was Canadian. My mother was a war bride. My father was stationed in Canada at the [British] Commonwealth Air Training Command. So I had this dual background. At that point we were living in western Canada, and I was applying to the University of Calgary. I knew I wanted to do something in the humanities, because, in the '60s, if you had a humanities degree, that was a good entrée into a graduate degree in library and information science.

As a lot of people do in high school, you do these [aptitude] tests. The number of choices given to girls in those days was, of course, much narrower than what was presented to boys. I looked at those typical things, like teacher, social worker, nurse. And librarian was on the list. There were probably some other things—but these are the ones that come to mind. I didn't think any of those others were for me. I could never get out in front of a group and speak, so a teacher was out. I didn't want to work in hospitals and look after sick people. But a librarian... I thought, if you were a librarian, you would be in the middle of a world of learning, and you could keep learning your whole life.

I worked in the university libraries during that period. My parents had moved to Montreal when I was just finishing high school. I had decided to go back to the University of Calgary, because I had so many friends there. It was a new university, and I felt it was an exciting place to be out there. But when I went back in the summers, I worked in museums. I worked in the [Montreal] Museum of Fine Arts—worked with their slide library and organized their slide collection. And then I worked in the Bank of Montreal as a special library assistant, but I did everything from wrap up newspapers, which we kept in the vault of the bank—which was interesting—to helping out on the reference desk. Again, I found some wonderful role models of librarians and people who worked in museums, and I thought I would love to be a part of such a profession. So that

just then led me to go to McGill for my graduate degree after I finished my undergraduate degree at Calgary.

F: So you got to dabble in many different facets of librarianship before you went to library school.

M: I did. It was sort of school libraries and academic libraries and then the museum and bank libraries—special libraries. So, yes, I saw a little bit of everything.

F: Which is more than many people do before they enter library school. That's a great background.

M: I really didn't seriously consider anything else. And I know many people come to librarianship as a second career, but it was always my first choice.

F: And how did you happen to choose McGill as the library school that you wanted to go to?

M: Well, at that time, McGill was the university in North America that had the first two-year master's program in library and information science. Up until that point, the degree was usually a post-bachelor's degree—bachelor of library science. So you had two bachelor's degrees, but it was a one-year program. Toronto, which would've been another choice that wasn't too far from home—but they did not yet have the two-year degree. I'd lived in western Canada, I'd lived in Vancouver, where we lived when we first arrived in Canada. Then we moved to Calgary. I did my schooling there and then went back there from Montreal to do my undergraduate degree. I decided, okay, I've had the western Canadian experience. Now I'd like to have the eastern or central—really it's central. The eastern part of Canada is the Maritimes, which is further east. I thought this would be really great, because Canada is a very big country. It's nice to have experience with both. I think the fact that I had already moved countries from England—I had started school over there—to Canada meant that I wasn't afraid of moving from one place to another. In fact, I knew I wanted to seek that out in my life. I wanted to move and experience different things, and it didn't intimidate me. So McGill was there and it had the first master's program. If I had gone to Toronto, I would've had to do the bachelor's degree in the year that I entered and then come back and do the master's. And I thought, well, that doesn't make any sense, so let's just do it now. McGill was a wonderful university. It's one of Canada's oldest universities—not the oldest, the oldest is in Quebec [City], Laval University. But McGill has a very rich history, and it had a very good library science program at the time. And, of course, it's still good. It's not as strong as some of the programs in terms of numbers of faculty, but many good people have come out of it.

F: Oh, absolutely, and it's located in a wonderful city as well.

M: It is. It's a fabulous city. And it's a bilingual city, so, of course, French and English. And I wish I were more bilingual than I am, but at least I can get by a little bit in French.

I like the idea of being able to speak more than one language and feel as if I'm a member of a global community. That was sort of something that was in my psyche really early in life.

F: And that, I think, will come up again in our conversation as we go, as well.

M: But it's really interesting to think back—the influence of your parents, the influence of work experiences that you have, the kind of mentorship that you get in those situations, which I think is still so true today. One of the main ways that we get people coming into our program here at SILS [School of Information and Library Science] is that they have worked in a library with a librarian who they really admired. It's the most common thing that people put on our workforce questionnaires.

F: Clearly a very strong theme. And how did you go from that foundation of interest to interest in medical librarianship?

M: Well, now, that's an interesting one, because at the time, after I finished McGill, I had a scholarship from the Alberta government, and I had to go back and work there for a year-and-a-half. I had many job offers at that time, but the one I took was at the university library at the University of Calgary, where I had been an undergrad. I had friends there. I also ended up being in charge of the women's residence, which is another whole story. In any case, I became our reference and orientation librarian there. It was something of a disappointing experience, because I thought academic librarianship was going to be it for me. But it was not a really interesting job. They hired ten new librarians all in the same year. It was a new library, so they were at a bit of a loss about what to do with us all. I had not yet acquired enough experience or confidence to create things. I got that way later in my career, but I wasn't like that then. I thought there had to be more to this. Then I re-met my husband [Victor Marshall], who had been an undergrad at the University of Calgary, and he came back to teach a summer school course. He was a graduate student in the U.S.

At that point I left the University of Calgary. Victor was at Princeton University in New Jersey. I registered as a special student at Rutgers and took additional courses. And I thought, well, maybe something totally different, because I liked public libraries. Maybe children's librarianship would be it. Then Victor got an academic position at McMaster University in Hamilton, Ontario, Canada, and we married and moved there, and I started applying for positions there.

In that period we had a recession in the early '70s, and there were no jobs to be had, and so I was getting desperate. The university at that point did not want to hire me for the main library, because my husband was in arts and science and so forth. But there was this new medical library that was being built—it had not been built yet—and a new medical school that was being started. I can't remember if it was the university's suggestion or my suggestion—I'd like to think it was mine, but they may have said, "Well, would you be willing to consider a position in the medical library?" and I said—I was desperate—I said, "Yes, I'll do it." No medical background. And I knew I didn't

want to work, necessarily, with sick people, but, I thought, if you're a librarian you're not going to work with sick people. So, in any case, I took a job there.

The director of the library was Beatrix Robinow, who was a very fine health sciences librarian. She was originally from South Africa. She had been a Cunningham fellow [Editor's note: Robinow had a travel and study fellowship in 1957 through the Medical Library Association Committee on International Cooperation; fellowships in this period were supported by the Rockefeller Foundation and were predecessors to the Cunningham fellowships], and then she and her husband and family had immigrated to Canada. She had worked in several of the large hospital libraries in Toronto, and then she took the position as the first director of the McMaster Health Sciences Library.

F: And Bea was a fascinating woman.

M: She was. And she was a strong MLA supporter, I can tell you. A lot of my reason for becoming so active in MLA over the years was what she did in those first few years that I was there—I was there for twelve years.

F: So you had a lot of opportunity to work with her. And she was, for me, an early role model. She was on one of the first committees that I was on. Fred [Roper] and Bea and I were on a committee together, and I had such respect for her. What a wonderful person.

M: Very thorough. Would be so prepared for everything. And I knew her standards were so high that the rest of us... I was one of the first two librarians she hired for that library. The other ran the support network for the hospital libraries in the Hamilton region. I was hired eventually to become a reference librarian, but I started out in serials, just checking in serials, so I could start to understand medical serials, because they're so important to our collections. And then I moved more into the general collections area and I managed the collection, which was stored in the basement of the student residences at McMaster, including dealing with the flood when the sprinklers accidentally went off. So that was interesting—learning how to put paper towels between all the pages of the books. Oh, my gosh. When I look back, there were some really interesting experiences. And then we finally moved into this incredible library, which—

F: Was a state-of-the-art building at the time.

M: It was a state-of-the-art building. It's interesting to see what's been done with it today. I was just back there about a month ago, and Dorothy Fitzgerald, who retired fairly recently [2008] as the director, took myself [and Claire Callaghan on a library tour]... The people I knew at that period at McMaster are still my best friends today... Dorothy eventually became director of the library, and then Claire is a library director—not of health sciences but at the University of Western Ontario. The three of us got together and went over to the newly renovated library, and it was definitely a trip down memory lane. It was incredible.

Mrs. Robinow, of course, came to mind. And we always called her Mrs. Robinow. It was not informal... She came from a much more formal background. South Africa was like that, Britain was like that. I understood that. It was not a problem for me. Whatever form of address people are comfortable with is what I'm comfortable with. But her standards were such that there was a while there where I never felt I could really satisfy her. I would never get good enough at checking in these serials or whatever it happened to be, or answering reference questions as well as she would have answered them. You can't really compare yourself to someone else, especially someone with that many years of experience. And she, of course, wanted us to be as good as we could possibly be. So it was a very challenging experience. If I wanted challenge, if I didn't get enough in my first job, I can tell you—I got more than enough in the health sciences job. Also I started to find the subject matter so fascinating. I loved the Netter anatomy books. When I was on the reserve desk at night, I would sit there looking at these anatomy books. It just fascinated me. I would really study the reference books so that I understood. I think coming in without the background was actually better, because I really had to look at it and almost learn it with new eyes.

F: It's really interesting that you came into two relatively new library situations, both at Calgary and then at McMaster. And the one didn't feel comfortable and didn't work well for you, and the other gave you such a rich platform that you engaged with.

M: Well, that came over time, I have to say, because we were pretty tightly bound to whatever our roles were in the library. And then my friend Claire, who I mentioned I visited with recently, she was hired as a collections librarian, and eventually we hired a second reference librarian. There was, of course, a technical services person and then an assistant technical services librarian. We built up over time. We were never a really large library. But we were a really important library on campus. We were always doing the innovative things, the new things, which I think health sciences libraries continue to do today.

F: And you were so well integrated into the campus—ahead of, I think, many other health sciences libraries.

M: Yes. We were independent. Mrs. Robinow reported to the vice president of health sciences, as opposed to the university librarian. As far as I know, that situation still exists today—where the [director] reports to the vice president of health sciences there. So that gave us a certain freedom... The other thing that was really unique, I think, about the McMaster Health Sciences Centre, is that the building was designed by a very avant-garde architect. He had integrated the clinical, research, and education functions of everything. He didn't separate them out into different areas of the building. They were all integrated. So we would have patients with IV poles wandering into the library. If they could get out of their rooms and were mobile, they could go wherever they wanted. And they would come in, and that was something. Oh, my gosh! What's happening here?

F: So there you were, in direct patient care, as opposed to what you had thought.

M: Right, right. One of the things that got me into consumer health information was that they would ask for books or they would ask for information, and I thought, oh, my. That was in the day when it was very controversial about whether we should be giving information directly to patients. So there's another whole story there, because I got pretty active in that, and had a lot of debates with Mrs. Robinow about whether that was appropriate or not. And throughout my whole evolution at McMaster—I went through a consumer education and a clinical librarian period and becoming really integrated, especially into the Department of Clinical Epidemiology and Biostatistics, and getting more heavily involved in a direct educational role around what was originally called critical appraisal, which eventually became evidence-based medicine—throughout all of that, one of the things that educated me and drove me on was going to MLA meetings and meeting people like Alan Rees, who wrote one of the first books on consumer health information. And I contributed a chapter to one of his, *Developing Consumer Health Information Services*. And then also meeting Gertrude Lamb and eventually going to visit—

F: The mother of clinical librarianship.

M: Absolutely. And I managed to figure out a way to get to Kansas City and see her in operation.

F: And you also decided to pursue a master's in health sciences while you were at McMaster.

M: Yes. Well, I didn't have any formal background in health sciences, and I was also looking for a way at that point... Can I tell you a little bit how I got to that point?

F: Absolutely. Please.

M: Okay. So I noticed these patients coming in, so I thought, there are people out there who need information in different parts of... It's not just information for students and educators. It's the researchers, it's the patients, it's everybody. The health care team was really big, as it continues to be. And there were people who weren't coming to the library. We were getting lots of researchers and people doing grants. But we were not getting a lot of nurses and we were not getting a lot of clinicians. They were busy on the wards and in the clinics at the hospital—

F: And they couldn't come to the library.

M: —and couldn't come as easily. And so the clinical librarian thing, it seemed to me, really offered a model whereby if they won't come to us, we'll go to them. At McMaster, I was encouraged to think of myself as a member of the health care team. We were all working together. In the early days of that medical school, there was much less hierarchy. The physicians who came there really wanted to treat the other members of

the health care team as their peers, as opposed to the physician was the chief and everybody else was not the chief and was definitely under them.

I didn't know that much about health care and how it was organized, so to me it didn't seem that unusual. But all I had to do was go and see one of the physicians—actually, the one I went to see was Victor Neufeld, who was in charge of medical education. I said, "I'd like to do this. I think it's a really interesting opportunity for the library to get more directly involved in the work that we're doing here, and it would benefit education but it would also have other benefits." And he said, "I think someone who would like to have you work with their program is Dr. John Hamilton," who was head of the gastroenterology program there. So I went to see Dr. Hamilton. He was also English, so a bit of a connection there. But anyway, he allowed me to come to his rounds.

In those days, librarians did the MEDLINE searches, so I would listen. I would listen for unanswered questions. I would go and do some searches. I'd bring up the articles and I'd post them on a bulletin board. Eventually they would go into some sort of binder under some general categories. I can remember going up one morning early—because they have rounds early—to listen to the rounds that they do as a group in the conference room. And there were two of the residents looking at this article. I still remember the article. It was on steroid cover for patients undergoing surgery. It was a bit of a debate at the time whether they should get this steroid cover. And so they read the article, and they said, "Well, we're going to do it, then." And I thought, oh, my gosh, they just made a clinical decision based on this article that I found. And I certainly didn't bring up everything. You just wanted to bring up the key article or two that related specifically and that was recent. It was from a good journal. You checked to see who the authors were and all that sort of thing. And I thought, wow, this is impact. This is real impact. I've just got to do this.

And so how could I do it? Mrs. Robinow... I think I had gone beyond what her comfort level was in terms of what services the library should be emphasizing. She didn't stand in my way, but she just wasn't sure. She felt so strongly that we should be running the very best traditional-type library that we could and that all our efforts should be put into the collection building and the reference services in the library. But I said, "Well, I did go and talk to Victor Neufeld and he really encouraged me, and Dr. Hamilton is willing to have me come and attend his rounds, so would you be comfortable with that?" But if I wanted to take it any further than that, just being a very small part of my reference work, I had to do something different. So that's when I applied to the master of health sciences program, which was actually a clinical practice program in lieu of a master of nursing. They were very innovative. They had an interdisciplinary clinical master's program. The idea that a librarian would apply for this was totally bizarre.

F: Not what they had expected at the outset.

M: But I went to see the program director, and I explained this, and I took them some papers on clinical librarianship, and I said, "I want to develop this role and I think this would be a wonderful group to work with," because within that group were nurses and

physiotherapists and occupational therapists and other health professionals who wanted a master's program. So I did it. And there was a research paper at the end of it, and I did a study looking at the information needs of patients with Crohn's disease and an evaluation of the information packets that I prepared for them. So it brought in my consumer health information interest and the clinical librarian interest. I continued that. And I also wrote a grant proposal to our ministry of health. They had a health innovation program. I got help from people in the Department of Clinical Epidemiology and Biostatistics. The research project called for two clinical librarians to work with eight different health care teams over a two-year period and then to evaluate the results. And so that really got me into research. I did go back into the Health Sciences Library for a time after that, but by that time I was really interested and...

F: Were you still working full-time in the library while you were working on the master's?

M: I was, except for the last three months, when Victor had a sabbatical and he went to the University of Montreal to improve his French. By then I had my daughter Emily, who was one of the first babies born at McMaster University Medical Centre. And Emily and I went with him. I took that time to do all the analysis and writing up of my research paper. I can't remember whether it was called a thesis or not. And at that time I wasn't working in the library, but, except for that, I was. But I got a three-month leave in order to do that before I went back.

But I must say—the whole consumer health information movement and the consumer movement in general was one that really appealed to me. That really got going in the '70s and '80s. And I felt that this was a way that health sciences librarians could enlarge their role and make themselves even more valuable to the institution.

And then the clinical role, also—one of the kick-starters for that was that the education in the medical program at McMaster, this new medical school, was problem-based. So [students] would be presented with kind of a paper problem—a patient who had this and that and their test results showed this and that, and they would have to find additional resources. But we would have these so-called problem boxes, which presented the problem but had some slides and other test results. And that was one of the things that the library circulated from the reserve desk. So they were a problem box in more ways than one. You can imagine trying to keep track of all the contents. But in any case, it was just very different. And I thought, a big part of what these students are learning is how to see confined information that is relevant to patient care. The department of epidemiology at McMaster was called Clinical Epidemiology and Biostatistics, and Dr. David Sackett [a pioneer in evidence-based medicine] was the head of that.

F: A pretty famous name.

M: Very famous. And he was very keen on this idea of linking research to practice in medicine. And I thought, we have a part to play in that, and how could they do without us. So I got friendly with Dr. Sackett, and he said, "Well, why don't you come...?" He

started off and he called it critical appraisal of the literature. That's how literature-based it was. And he wanted people to be able to evaluate articles. He had specific criteria that were applied, which became eventually the criteria for assessing the evidence for evidence-based medicine.

And we taught the tutorials on how to seek and find this information. Of course, at that time, MeSH [Medical Subject Headings] did not include the methods terms. It was very content-oriented—diseases, drugs, organ systems, things like that. But the idea that you would have a whole set of terms devoted to research methods seemed pretty foreign to NLM [National Library of Medicine]. So I started working on—they were hedges at the time, but sets of terms that you could apply in order to search titles and eventually abstracts and things like that. So we would teach the hedges that they could add into their searches.

F: To try to get around the limitations of the terminology.

M: Yes. And eventually, we did work with NLM to start to integrate methods terms. They started to realize it wasn't just...you know, they had clinical study, which was one of the check tags. But they didn't have a lot of methods terms. So you had things like blind and double-blind, the more specific things to the type of study.

So that really introduced me to the expanded role that librarians could have in education with the evolution of problem-based medicine. And then that was eventually adopted by two of the other major medical schools in Ontario, the University of Toronto and the University of Western Ontario. But McMaster was fully problem-based. Western Ontario was partially problem-based, and the University of Toronto was the last to come in. So we organized a study where we wanted to see what the impact of problem-based learning would be on the use of the library. We did a library survey in each of those institutions, at the time when each of them was either not at all, partially, or fully doing problem-based learning. And we found, indeed, that there was a statistical difference in the use of a library, and that article was eventually reprinted. It was in the BMLA [*Bulletin of the Medical Library Association*] and was reprinted by Jocelyn Rankin in one of her readers on problem-based learning.

So that really influenced me. And working with Dr. Sackett really influenced me and some of the medical students at the time. Gordon Guyatt was a medical student, and he's gone on to be a big guru, and Dr. Sackett's protégé, Brian Haynes... Well, I got seconded at one point to go and work with Brian Haynes. He wanted to set up this health information research unit. I wanted it in the library, but it was set up in the epidemiology department. But Brian had big plans. And I thought, well, we could be a great team. And Ann McKibbin was hired as my assistant. We started writing grants to the Rockefeller Foundation and to NLM, and at that point no Canadian had ever received an NLM research grant, and it was Brian—he was the PI [principal investigator]—who was the one who eventually got that changed. But we did a number of interesting studies. I could see he wanted me to stay on.

At that point, Mrs. Robinow retired, and the opportunity came up where I could apply to be the director. Well, there were five of us librarians who had been hired not that far apart from each other. We all felt we could be the director, so we all applied. And none of us got it—[laughter]—which was actually a blessing in disguise. Often you look back and you think, this is a blessing. By that time, I was head of public services, so I had some administrative experience. But I didn't have the budget experience and other things. So I thought, well, I've been here twelve years. Am I going to stay here? By that time, it was pretty clear to me that I was not going to have exactly the same relationship with Brian Haynes that I'd had with John Hamilton and some of the other physicians that I'd worked with—that this was going to be Brian's initiative. And I felt, actually very strongly, that it should be a co-initiative with the library at the very least, because this was our area of expertise, and I felt that I was developing some research expertise as well. I had finished the master's program and had had my own research grant.

By that time, Victor had taken a position at the University of Toronto, in a department called behavioural science, which was an interdisciplinary department that was part of community health—now it's known as public health. So there was an option. You can commute from Hamilton to Toronto on the train, but it would have been nicer to live there. So I thought, well, maybe this is an opportunity to make a transition. And it was a really difficult one, because I just felt that [McMaster] was probably the most creative part of my career. I didn't realize what was to come. But the idea of starting to open up the library to the patient, to the family, to more segments of people who are involved in health care... And I got the Hamilton Public Library involved in the work that we were doing. When we were providing packets of information in this project, we provided, in the clinical librarian program, information to the health care providers. But we also offered an information service to the patients and families. And we had these packets on different commonly encountered situations, but we would also do specialized searches. That whole experience just, I think, made me think more broadly about what the possibilities were, as opposed to just doing what we do better and better.

F: Yes. But you were clearly at McMaster at a wonderful time—

M: Oh, I was.

F: —when the institution was innovative, because they were way ahead of everybody else with problem-based learning—

M: Yes.

F: —and interdisciplinary teams and accepting people from different parts of health care, including librarians.

M: Yes, they were. And I really benefited from that.

F: Yes, and you jumped into it with both feet. And I can see the genesis of so much of what you've worked on in your career.

M: And I obviously think Mrs. Robinow appreciated what I was doing. It was just that it was something that she had not really experienced, and maybe she didn't feel she could be the mentor to me in that environment that she could be in the library. But she didn't stand in my way, either. I was able to get grant money for the other librarian and pay for release time for myself, so she could hire someone else for the reference desk. I think as I started to give papers at MLA and other things started to happen, she started to realize it was good for the library what we were doing, it was good internally.

But I remember the first time, I was on an elevator going up to one of the rounds, and there were some residents in there sort of saying, "Oh, they let you out of the library, did they?" It was like a little joke. And I thought, well, that's interesting. But they were not used to seeing librarians outside the library at that point. And you look back and you think, well, there was a big debate about whether we should give information to patients and families and a big debate about whether you should go outside the library. And now you look at it today...now there are these, quote, "embedded," unquote, librarians who are attached to teams in all kinds of different library environments, especially special libraries—especially management consulting firms and things. So we often join teams as an information specialist and provide those services. And even academic libraries are starting to designate areas of specialty for their librarians in the library—because they do want to integrate more with the institution.

And I've always felt, too, that whole experience really made me realize that wherever you are, you have to really understand, identify with, and contribute to the strategic plan, the goals of the broader organization that you serve, or the broader system. And that if you don't do that—if you stay as a service entity on the side but don't integrate yourself and get yourself out there and be visible—that things will not go well in the long term. I really believe that. Even though it was painful at certain points to make that transition, given the way things have gone, I think that, again, in the health sciences, we were just a little bit ahead in forging some of these new roles for librarians, which we have to continue to morph and change over time, because so much continues to change in our field.

F: And I don't mean to put words in your mouth, but it seems to me, Joanne, that not only were you instrumental at an early stage of having the library and the librarians in alignment with the strategic priorities of the institution, you learned early on to document the contributions that were made and the fact that the library was supporting those strategic priorities. And that was a clear representation of the value of the library to the institution, rather than being on the sidelines, as you said.

M: Well, I could see the importance of the literature, whether it was in the critical appraisal of the literature, which eventually came to be called evidence-based medicine, and then the critical appraisal was one component of it. But I could see that it was the things in the literature that people were using as evidence, or where there were studies that had been done.

So if that's really important for medicine... And how did medicine get to be such a powerful profession? Because it's got the strongest evidence base. It's got the National Library of Medicine to collect its collective knowledge and make it available to the world. So it became the preeminent health clinical science. There were all sorts of competing health professions in the early 1900s—probably many librarians, I hope, are still looking at the Flexner Report [Editor's note: Abraham Flexner, *Medical Education in the United States and Canada*, Carnegie Foundation for the Advancement of Teaching, 1910], because that really started to change things. And then the medical schools really upgraded their education and had libraries. But if it doesn't get into the literature, then it doesn't have the peer review and it's not considered very rigorous. So we had to start doing our own studies as well.

After I left McMaster and I was at Toronto, there were a couple of times when Mrs. Robinow—when she retired and eventually went into a continuing care facility—I picked her up a couple of times and drove her out to McMaster for some events, and we had wonderful talks. It was a pretty good, long drive there, and we would have these wonderful talks. And she actually said to me at one point, “Joanne, if I had only fully realized what you were doing, but I'm really glad you did it.” [Laughter] And I said to her, “I can't think of anybody who was a more wonderful mentor than you.” And when we had her retirement party at McMaster, I was asked to make some remarks. I said, “It's a big challenge to work with a librarian who knows every year in which the *Journal of the American Medical Association* indexed the letters to the editor.” She would have all the current journals that had come in each day wheeled into her office at the end of the day, and she would spend the evening—because she lived in Hamilton during the week and went home to Toronto, where her husband lived, on the weekends—and would go through everything. She knew every new article that was coming out. It was amazing. But how can you do that? I had a family at home. I couldn't stay at the library for another three or four hours and go through all of the journals. But I did learn from her that you need to keep scanning the literature and just be current in what's coming up, as well as what you can find in what were then *Index Medicus* searches and eventually MEDLINE batch searches and then online MEDLINE searches.

F: It certainly sounds like she was instrumental in giving you that foundation in the importance of quality and doing the job really, really well, but also giving you the freedom, then, even though she was perhaps a bit uneasy with it, letting you explore some new territory.

M: Yes. And I really appreciated that. She had so many good qualities. You know, we have people who are working with us as employees, or in my case here at UNC, students, who are starting to go off on some really different directions. And my own experience sort of makes me step back. I hope I do it consistently and say, “Well, this is not something that I'm an expert on, but it does look interesting. Why don't you explore it and see what evidence you can find to support this whole approach, or if there isn't any, make a case for it yourself and tell me how you're going to do some sort of investigation.”

But I can't tell you, being there in this place that I didn't even really ever think of going, nor did I really think I would want to be there—it was just where the job was—changed the rest of my education. It changed my own library practice, because I just felt totally dedicated to health sciences libraries from that moment on. There was just no question that that was the field.

The other thing about Mrs. Robinow that I have to say—being a Cunningham fellow, she had had the MLA scholarship. That was in the days when the Cunningham was a yearlong fellowship and the recipient traveled from library to library. So Mrs. Robinow was very keen on MLA. She would find money for all of us to at least travel to MLA. We always had to pay part of our own expenses. But then we divided all of the sessions at the conference up into things that Joanne would do and Claire would do and Linda Pantan would do and the other reference librarian would do. And we went to every session. We had to take notes, and then we had to come back and prepare them all, put them all together. Then we would get together and discuss all of the papers. Well, can you imagine doing that today? There are just so many. But I'll tell you, you really learned a lot by doing that. And she also encouraged us to take continuing education. I always did at least two continuing education courses every year at MLA, and they were really good courses. I eventually taught some courses myself and met some wonderful people. I co-taught some things with Holly Buchanan. Who else did I co-teach with? I have to really go back through that stuff. I didn't co-teach with Ann McKibbin, but I've continued to be really close with Ann McKibbin. She stayed at McMaster. She did a PhD at the University of Pittsburgh eventually but went back. When she retired last year, she was head of the new master's program in clinical informatics. So she did very well, and she published a lot...

F: So much.

M: Oh, she really did. She made a huge contribution. And I moved into different areas somewhat, but still remained primarily a health sciences person, in my own mind.

F: Yes. I should ask you, too, just to get it into the record: the friend Claire, that you've mentioned several times. What is her last name?

M: Her name is Claire Callaghan. And she was at McMaster for—I'm not sure how many years, but quite a number, at least five or six. And then she went to be head of the library at the [Canadian Memorial] Chiropractic College in Toronto, and she was there for quite a number of years as director of that library. And then she went back to [the University of] Western Ontario [known as Western University], and at that point I think she was working in the university library. Now she is the head of King's [University] College [at Western University] library, which is one of the most esteemed—like a lot of the Canadian universities, with the English Scottish connection, they have their own amalgamation. They start as an amalgamation of church-run colleges. So King's College, I believe, is Anglican [Catholic]. But it's a beautiful college. And Claire's family is all in London [Ontario]. So she has kind of drifted out of health sciences.

The other person who was really a part of our group and worked at Chedoke Hospital in Hamilton was Margaret Haines. Margaret was working on a PhD at the University of Toronto when I first went there, but we became fast friends at Hamilton. And so the four of us really kind of formed a group. Then Margie went off to England and she became the librarian for the King's Fund, which is Prince Charles' favorite charity. They do all sorts of health care and health policy research in Britain. Then she went to be library advisor to the National Health Service. She eventually went to be sort of the head of this research directorate within the British Library. She did so many things. And then she came back and she [was] library director at Carlton University in Ottawa. So the four of us have gone in slightly different directions, but we still... Oh, Margie was also head of this Children's Hospital of Eastern Ontario. She was a very innovative person. She did all sorts of wonderful things there at CHEO, and also at Chedoke Hospital. So we would kind of egg each other on. Dorothy was the librarian for the College of Family Physicians of Canada.

F: Dorothy Fitzgerald.

M: Yes. She was at the University of Western Ontario. And she, then, ended up getting appointed as Mrs. Robinow's successor, which I couldn't have been happier about. But she was from outside. Dorothy is very organized, really works well in teams, great strategic planner. I think she was exactly what they needed, and she was responsible for the full renovation that occurred at the library. She is also retired. So the only one who isn't retired now of the "Famous Four"—famous in our own minds only, of course—is Claire, and she probably will do that in the not-too-distant future.

F: Sounds like you had a wonderful cadre of people to work with, and in an environment that probably fostered innovation for all of you over your careers.

M: I think so. I think so. I think we kind of watched what the other was doing, and it encouraged us. Because we weren't necessarily doing the same things at all, but...

F: And then you moved to Toronto. What led you to decide that you wanted to do a PhD there?

M: Well, when I moved, I had been doing some consulting for an organization called the Palliative Care Foundation. Palliative care is more or less what they call hospice care down here; it's end-of-life care. And they had wanted a literature database on palliative care that would be global in scope. I had hired someone to do a lot of the searching for me, and we had put together this database. It was in the early days of databases, electronic databases. Of course, MEDLINE was there. But now we have databases for everything, right? And we published this *International Bibliography on Palliative Care*, and we published a directory of all the palliative care programs in Canada. And then the foundation was privately funded. It was pretty clear to me that they were going to have a hard time going much further than what we had been able to do already.

I also had started taking some courses towards a master's degree in epidemiology and biostatistics at McMaster, believe it or not, so I had several irons in the fire. And Victor said to me, "Joanne, you're going to have three master's degrees, and you'll have a better chance in research if you get a PhD." So I thought, oh, my gosh, I never really thought of that. So my husband, Victor Marshall, is really responsible for encouraging me. And then when I saw...that the foundation...could have me part-time, but they obviously would not have a full-time job, which is what I needed at that point in time. We had bought a house in Toronto and we had a growing daughter and lots of expenses. So, anyway, I applied to the PhD program in what was then [Division of] Community Health, and miracle of miracles, I got in—mainly because that master of health sciences program had this major research paper, and I had published the results of my study that I had done in *Patient Counselling and Health Education*, as the journal was called then. And in lieu of a proper thesis, a master's thesis—because in Canada you usually do a bachelor's and then an academic master's. A professional master's is a different animal—but an academic master's with a master's thesis, then you get accepted into a PhD program. So it's a different trajectory. A lot of students in the U.S. get accepted into a PhD program without a thesis.

F: But they viewed your research work as an equivalent.

M: Yes. So that was an interesting transition because, again, it took me out of... Well, I actually went to what was then the [Faculty] of Library and Information [Studies] at the University of Toronto, and I said I'd really like to do this. I'd like something that would link research and education, but I'm really interested in.... I described the things that I'd done. I said, "I'm very interested in information-seeking and use by health care providers, but also health information for the general public." And they said, "Well, we have no one who could supervise you. Our professor of medical bibliography has recently retired and we really don't even have anyone in the medical area." So they didn't recommend it, which is a really good thing, because then they would not have hired me, which they later did, if my degree had been from their program, because universities are often reluctant to hire graduates internally. So Victor said, "Well, go and apply in community health," and so I did, and they let me in. And then I found this wonderful supervisor, whose name was Peggy Leatt, who's also British, and we got along really well. She was the chair of the Department of Health Administration, and she became my supervisor, and was really a wonderful mentor.

And to fast-forward briefly, Peggy and her husband, George Pink, who was doing his PhD in health care finance at the same time I was doing my PhD, moved to UNC to the Department of... Health Policy and Management... And so they now live down here, and now we're the very best of friends and very good friends with their daughter, who also wants to be a librarian, so that's very exciting. So I continue to have Peggy's mentorship, and we have these Canadian friends here. So those international relationships... like, I still go back to England periodically to visit my brother and my cousins. And for a long time that wasn't very possible. It was like, if you were in England and you went out to Canada or Australia or New Zealand or South Africa, it's

like you'd gone off to the colonies. You might as well have gone off the end of the earth, you know?

F: It was a one-way trip.

M: It was a one-way trip. But fortunately air travel became more common, and I started doing some consulting for the British Library on my clinical librarian studies that I did—problem-based learning studies and things. And when I went over there, I went up to Scotland, where my uncle was a professor at the University of Aberdeen. So I have lots of academic people in my family, and I reestablished that contact, which was really wonderful. So I feel like there are parts of me in those three countries still, and even in other countries where I've got colleagues.

F: You've managed to maintain those relationships and sort of interwoven your cultural experiences. Very nice.

M: It's been a wonderful set of opportunities. I feel very fortunate.

[Break]

F: Okay, we took a little break to get reorganized and we're going to pick up again, Joanne, with the completion of your PhD and then your move in 1987 to become an assistant professor in the Faculty of Information Studies at the University of Toronto.

M: Well, the PhD turned out to be another wonderful exploration of the possibilities of research in our field. In the coursework that I took in social science theories and trying to understand the way social scientists do research and analyze information and so forth, I came across diffusion of innovation theory. And it seemed to me that since we were innovating so much that this could provide a theoretical framework, which is always preferred in social science, for looking at some of the things that were happening in our field. So I knew I wanted to do something related to diffusion of innovation.

I had made a lot of contacts with people. My part-time job, when I was in the PhD program once I had completed the work for the Palliative Care Foundation, was with Continuing Medical Education [Faculty of Medicine, University of Toronto]. And that was a really interesting job, too. I worked with some really wonderful people there. I met a woman who did a lot of consulting with the Canadian Medical Association and just had a lot of contacts with health care organizations in Canada generally. She networked and she would take people to lunch. So we went to lunch one time and I said, "Lynn"—her name was Lynn Curry—"I'm looking for a project which would allow me to use diffusion of innovation theory, study something new"—ideally because technology was starting then to become so important in the '80s. I could really see that it was going to really impact the field. I said, "I'm interested in how physicians seek and use information, evidence-based practice, all this kind of stuff." And she said, "I think you should speak to the people at the Canadian Medical Association, because they're working with Bell Canada and they're going to put these Bell display phones in physicians'

offices and get them to start using computers. Well, it's a challenge within a hospital environment. It was an even bigger challenge in private practice. But the phone company wanted to create this portal which they called iNet 2000, where the big carrot on the stick was that you can submit your billing information to the government on your Bell display phone. Because it was a combination data terminal and telephone, and it had a screen.

F: Money motivates people.

M: But they could also do other things. They would also provide access to MEDLINE and other relevant databases—*Science Citation Index* and the things that physicians might need, drug databases, things of that nature. And they want to evaluate it and see if it's going to work or not. So I thought, wow, this is terrific. Like, take me to it. So I went off to see them in Ottawa and kind of got signed on. And this iNet 2000 had also a feature where you could do instruction online and you could see the other person's terminal screen. So I did some instruction for them that way and evaluated that. And I kept having little opportunities to publish in the *Canadian Medical Association Journal* as we went along in the project.

And I said, "You know, I really sense that there are some barriers to adoption of this technology, and I really want to understand more about the thinking of these physicians and why they might or might not be using this technology." And of course, one of the major ones was, these physicians did not know how to type, and they had to use a keyboard to use the Bell display phone. So they would get the trainer who came around to install it—they would get their secretary to learn how to use the keyboard and input the OHIP—Ontario Health Insurance Plan—data. But then would they do their own MEDLINE searches? I think that Martin Cummings, director of the NLM for so many years—his vision was that physicians would do their own. Computers are still complex, but they were totally non-intuitive for everybody back then.

But librarians got very thorough training in the early days in MEDLINE searching. I had to go to Ottawa to the Canada Institute for Scientific and Technical Information [CISTI]. It took me a couple years to persuade Mrs. Robinow that this was important enough that we should have a MEDLINE terminal in the library, that it wasn't enough to just send requests to NLM and get batch searches back. So we were certainly not the first. Each of the Canadian health sciences libraries got a number as we signed on for that. But anyway, we were certainly not one of the first. But we did get it eventually, and it was, of course, a 125 baud dumb terminal, the one where you hook the phone into—

F: —the acoustic coupler.

M: The acoustic coupler—the whole thing. But it was just very foreign. So this idea that they were going to do it... But I did find some physicians who were much more adept with computers and who were doing their own MEDLINE searches, and I thought, well, that's interesting. In diffusion of innovation theory, there are the early adopters. I said, "There are some early adopters out there."

So I did some evaluation of the facilitators and barriers to the technology for the Canadian Medical Association, and then I designed my own dissertation project, which was to try to identify as many MEDLINE searchers as I could, starting with the group who had been participating in the iNet 2000 trial, but doing a snowball sample to try to build up numbers, like “Who else do you know who does their own searches?” kind of thing. And then I did a mail survey. In those days you did them by mail. And I got a good response rate. But I only ended up with maybe 160, 170 physicians. But it was enough to test out [Everett] Rogers’ theory and whether the factors that he said would predict adoption actually predicted implementation. Because for online searching, it’s not just whether you ever have done it; it’s whether you keep doing it, whether you actually implement it as opposed to make the adoption decision. And my results were somewhat similar. There are a couple of the variables that he talks about in his book [*Diffusion of Innovations*], which are the predictor variables that seem to confound each other. But, overall, I could see that ease of use was a really important part of it... and then the feeling that they needed to use it.

So the ones who were using it were the ones who were—if we weren’t calling it quite ‘evidence-based medicine’ yet, they were of that ilk—that for the decisions they made, they wanted to know that there were some studies supporting this, and they wanted to find the literature, or they were in research part-time. So I was able to identify characteristics of the early adopter population and then make suggestions for what could be done to leverage the early adopters to get more physicians to do their own MEDLINE searching.

So my dissertation... was on early adopters of online searching and the end users searching in the health professions, because I had a few people other than physicians. But it was primarily physicians. And I got lots of publications out of that, which every doctoral student should try to do, of course.

And then I had also, while I was a student—because I had so much online search experience and my friend Margie Taylor—she was ‘Taylor’ then, she’s ‘Haines’ now—was a doctoral student then and we were great friends. She was one of my original friends from Hamilton. She introduced me to Ethel Auster, who taught the online searching courses. And she said, “Would I ever be interested in being a teaching assistant for the course,” and I said, “Oh, yes, that would be really, really interesting.”

I was the first person at the University of Toronto... If you teach graduate students, you have to get all sorts of special permission from the graduate school to even be a teaching assistant for a graduate course, let alone teach a graduate course, which is quite different, actually, from what happens often in the U.S. So anyway, I did that for several semesters. Then they also asked me if I would like to teach the health sciences information resources course, because their professor had retired, and I said, “Definitely.” So I started teaching that course. So that was wonderful. I had some teaching experience, and I had a wonderful research opportunity. I did something that was new for me in terms of using diffusion of innovation theory. And so they then offered me a

job as a faculty member. There were two of us who were hired, one other professor and myself. They were the first new faculty hires they'd made in ten years, because there had been quite a bit of retrenchment at the University of Toronto, so I was so fortunate. And here was also my husband, Victor, at the University of Toronto, so we thought we'd died and gone to heaven that we would actually get faculty positions at the same university. And I stayed there for twelve years.

F: When faculty positions weren't readily available.

M: That's right. So a wonderful opportunity. And then the great thing, of course, about being a faculty member, besides teaching great students, I also taught special libraries—that was another one of my courses. And research methods I taught at one point. They'd actually thought that I would also be good for collection development, but unfortunately, our really wonderful person who taught special libraries passed away, and I had special library experience. Health sciences libraries are considered special libraries. So I got to teach that, and that was great fun. So I had a wonderful set of courses and a wonderful set of students, and periodically I meet students from those days. In fact, the chief librarian at McMaster, Dorothy [Fitzgerald], took us in to say hello to this person. And I looked at this person and she looked at me, and she said, "You were my professor at the University of Toronto." Now she's the director of the McMaster University Library. So, very exciting, and I think doing a very good job; I can remember her quite distinctly from the class. So it was a wonderful set of twelve years. I could develop my own new research projects, and I love working in partnership with people. So is it okay if I go on to this part now?

F: Absolutely. Please.

M: I had gotten to know this woman in the Consumers' Association of Canada who was the head of their health committee. She had heard about what I was doing and she sought me out, and we were in contact, especially when I moved to Toronto. She asked me if I'd be on the health committee, and I said, "I honestly feel it's not appropriate for me right now, but I think I know somebody who would be terrific for it," so I recommended Beatrix Robinow. And she did serve on the health committee, which was wonderful.

Then there was this health innovation grant that the ministry of health put out, and they wanted innovative ideas for improving the health of people in Ontario. We put in a proposal for a province-wide consumer health information service that would be headquartered at Toronto Public Library but in collaboration with all of the health science libraries—all of the hospital libraries and the university Science and Medicine Library. We all agreed to support this service, and we hired two librarians to run it and a library technician. And it's continued for eighteen years—beyond the initial grant period.

F: So that's certainly a major success.

M: Yes. And it's been integrated into their science and medicine department in the Toronto Public Library, which is more or less like the provincial library of Ontario. For

many years the ministry of health funded us, and apparently we were the only project to get continued funding beyond the initial five-year period besides the one that was submitted by the native people—we call Indians in Canada ‘native people’ [aboriginal peoples including First Nations]. The native people had submitted a grant for doing Shaking Tents, which is a native healing method. So anyway, we used to kind of laugh a little bit about that—us and the Shaking Tents. And then one of the librarians who worked there in the Consumer Health Information Service went to be assistant librarian at the World Health Organization eventually, and the other one went to be head of the medical library at McGill. So, all very exciting.

But it really got me back into consumer health. I didn’t continue on with the research on clinical librarianship, per se, but certainly my interest continued. And I have to say, throughout the whole period I’ve described, from the time that Mrs. Robinow made us go to those initial MLA meetings... and I joined that library in 1970, so I probably went to my first MLA meeting in ‘71 or ‘72. It took me a few years to get going, but after we finished our first clinical librarian experience and we wrote a paper on it, which was published in the *Journal of Medical Education*—that was based on the ministry of health grant... I think we had an earlier paper, too. I had something on the role of the clinical librarian and providing patient information. Anyway, there were several papers that came out around that time. But every year I think I presented a paper at MLA or at least submitted one. It wouldn’t always get accepted, necessarily, of course. Everyone has that experience, I think. And some posters too. But I was always doing something. And I was active in our Upstate New York and Ontario Chapter and held various positions on that. I just feel that MLA has been with me all the way—all the way through my career, and facilitating those contacts, which would have been limited in Canada but which were wonderful when you put Canada and the U.S. together. Some really wonderful things could happen.

F: We’ll go into MLA in a little bit more detail, but I wanted to ask you, too. It’s an interesting coincidence that you were at McMaster for a twelve-year period when there was lots of innovation, and a very rich career foundation came out of that for you. And then you went to the Faculty of Information Studies at Toronto for twelve years. And there were, again, lots of interesting projects and teaching and all kinds of other things that happened during then. And then in 1999, the University of North Carolina called and said, “We’d like you to become our dean.”

M: Let me just finish off two things that happened while I was at Toronto, which were MLA things, which I think were very influential for me. One was that I got appointed to the committee that did the first research policy statement, which was called *Using Scientific Evidence to Improve Information Practice*. I got to work with people like Betsy Humphreys and Jana Bradley and Prudence Dalrymple. And it was a wonderful committee. I think that first research policy statement really set the framework for our involvement in patient care and evidence-based practice.

And then, of course, Fred Roper was also doing the educational policy statement [*Platform for Change*], and that was a very influential document on the whole field, as

you so well know. And actually, Fred Roper, if I have to say things about people who were career-long mentors for me in health sciences libraries, Fred Roper is at the top of the list. I know Fred has been a mentor for so many of us, but he has a very good ear for listening and making very good suggestions and helping you calm down when you need to calm, if that's the case, and encouraging you—overall just encouraging you to do what you believe in. And so I got to know Fred.

And becoming an educator, then, I feel very strongly that MLA should have policy statements like that, because they provide guidance to the field of educators. Now, there was a big controversy about whether, among educators, whether the professional association should be having a role. That was really evident with the work that I did for the Special Libraries Association [SLA] as well. But I think one of the hallmarks of the profession is that we have a code of ethics, thanks to Lucretia McClure and others, who did wonderful work on our code of ethics. And we have the research policy statement, we have the educational policy statement. Those are the things which set MLA, in particular, apart. We were a leader in producing those kinds of documents. And I think they took the right kind of tack. They were not prescriptive, saying, "Offer this course, this course, this course." But they gave the kind of guidance and even set up a set of values around education and research and ethics that we can be very proud of and which we continue to build on today. Even though people may see them as something... We don't go back to them that often, I think we don't go back often enough. I like to go back and read them periodically just because I think... But I know they really influenced me an educator, both of those statements.

F: And I think you're absolutely correct that they also influenced people in all branches of librarianship, because they are nice, clear documents—foundations for thinking about education and for research.

M: And it was those statements that really allowed me to see this bigger role for maybe me in MLA and MLA, too, that it's an advocacy organization for librarianship and librarians, but it's also an organization that can, when MLA speaks, it speaks for all of us, and we are much stronger together than we are individually. So I could do all the individual research or team research that I wanted, but it will never have exactly the same kind of impact as the kind of documents that MLA is able to produce have had on the whole profession and the whole field in general. Because we have an excellent reputation out there among librarians in general.

F: Oh, yes. I think librarians have always looked at MLA's continuing education program, its professional development program, these two great documents.

M: Yes. So that was to finish off Toronto. But it seems to me—you're right, every twelve years something has happened.

F: It's an interesting coincidence.

M: When I was young, we lived twelve years in Calgary, Alberta. Now, I did go back and do the undergrad degree, but it was always with the idea that I would be leaving again. One of the things that attracted me to Victor was that he had been brave enough to leave Calgary. I still have good friends in Calgary who have not left. And they've had very good lives, too, I must say. But it depends on what your particular orientation is.

So we went to McMaster University, and then we went to Toronto, which is like a different world, really. McMaster is not nearly as big a university. It was a great place to be. Toronto is our much more established university. It's the largest research university in the country. It's a major international research university, as is McGill, but Toronto, it's just bigger, stronger. So that was an interesting experience. But it's also, because the individual departments there and the schools and programs there are so strong, they don't network as much as we did at McMaster or as we do at UNC. So there comes a point where you think, well, I've done some interesting things here and I think I've made a contribution. What contribution would I make in the future here? And I just felt, I think maybe that twelve years is up.

It was twelve years from when I grew up to sort of moving away from western Canada, and then twelve years at McMaster, twelve years at Toronto. Well, where's the next twelve years going to be? And then this opportunity came along to apply, and I guess, as they say, the rest is history. But I was stunned. I was just honored to be interviewed, let alone chosen, because they had several other deans who had applied in the cohort. But I think coming from the University of Toronto, which is a member of the Association of American [Universities]. The top sixty research universities in North America have an organization [called AAU]. But they like to hire someone for their senior dean or higher positions, if they can, from Michigan or Virginia or Illinois or UCLA or Berkeley or Toronto, within that grouping.

And by that time, I had also worked on a policy statement for the Special Libraries Association, the *Competencies for Special Librarians [of the 21st Century]* document. I'd become very active in SLA when I was teaching the special libraries course, and much influenced by Stephen Abram, who was a special librarian in Toronto. He continues to be a big advocate for librarianship in general and has been the president of SLA. But I think that SLA document in particular got very widespread recognition, and I think that competencies document, I was told, was translated into seven languages or something like that. It was quite succinct. But the one that got quoted all the time was the brief version of it. We did have a longer version, but we made this brief version. And I think our committee kind of hit the nail on the head, so to speak, with what the competencies would be. The competencies of special librarians, needed at that time, were very much in keeping with the kind of competencies that all librarians need now—they were already more embedded in their organizations and oriented towards their organization strategic plan. And some of them were getting positions within the organization that were above and beyond managing the libraries. So it was very interesting.

I think perhaps the faculty here were aware of my involvement in the research policy [at MLA] and the competencies document at SLA. Those activities, I think, gave me an

opportunity to start to create a vision of the profession for the future, which I hadn't really... Up until then, I'd been doing specific things like consumer health information and clinical librarianship, and evidence-based practice was a part of that mix—problem-based learning. But they were more particular to the environments in which I was working. And then all of a sudden, I started getting interested in the profession at large and the kinds of changes that were occurring. So coming here and getting interviewed, I presented a paper that was really kind of futures oriented and outlined a process that I thought would be appropriate for charting a course towards some of those futures.

I didn't hear anything for a long time. I was interviewed in May, I believe. And if they want to persuade someone to come to North Carolina, coming in May, when all the blossoms on the trees are out and the sky is blue and the temperature is lovely, it was phenomenal. And I was so impressed with the campus. I'm so impressed with the way they have left their original library, the Wilson Library... Louis Round Wilson was the founder of SILS and that library was built in the 1930s. The first library school was in there back in the stacks of the library, so there's this history.

And the Health Sciences Library has been so innovative here. I had been down once before, actually, as a consultant on a project that Carol Jenkins and Barbara Moran, the then-dean, were doing on health sciences education. It was funded by NLM. And we had a snowfall, and I was one of the two people who actually got here—somebody from Chicago and myself... The rest of the people had to be conference-called in. But it was really interesting. And, of course, I got to know Carol Jenkins better, and she has been such a wonderful friend and mentor for me here.

F: Absolutely. Great person.

M: Really terrific. Wonderful leader.

F: So thoughtful, and works so well with people.

M: Oh, she does. Very modest. Low key. But very powerful. Ran a great library. Also likes to garden, as I do, we have that in common. And we do quite a bit with Carol and her husband socially and we really enjoy their company. We're good friends as well as colleagues.

F: You came here at a time when, of course, as you were indicating, so much going on in librarianship, so much need to rethink about how library education had been conducted and what needed to be done to retool for the future and to graduate the practitioners that were going to be needed in the future. How did you work with the faculty here on making changes to the LIS [library and information science] program?

M: That was probably the most challenging part because when I came here... I mean, it's a good thing that when you come in, you don't know some of the things that are going on—although I don't think it would have scared me off. But we definitely had the two cohorts of faculty, one group who thought their primary role was educator and

another, newer group of people—Gary Marchionini, our current dean, came in at exactly the same time that I did—but Gary was determined to improve the PhD program and improve the research activities here at SILS. He came from the University of Maryland, and he is a powerhouse of energy and enthusiasm and research ability. So there was this other group who were more research-oriented, who saw the need for that to happen. Because all of the departments at that time were being challenged. They said, if you are going to be here at this Research I university, you need to have a very strong research program, and all of your faculty should be involved in research. And one of the reasons that our program had such a high ranking in the *U.S. News & World Report* rankings was that the teaching was excellent. And we continue to strive for that, even now. But I think we had an especially fine group of professors, and they really didn't—some of them—did not want to change. And the dean prior to me, Barbara Moran, had been wonderful at really working the politics between the two groups. But I think she realized the need for change. And she was the one who was responsible for getting the name professorship for Gary Marchionini and bringing him here. I think that was one of her major contributions, and getting the faculty to support that appointment, because Gary's area is what we might call more information science. But that said, I think he has a really good feeling for libraries and what goes on, and a great respect for libraries, and he's been a great dean for us.

But when I came, this was still... It was very tense in faculty meetings, and there would be standoffs between some of the people who felt especially strong on the education side and the research people—it was interesting, they were not as vocal but you could feel the bristling going on in the room. So you know Canadians—peacekeepers, U.N. peacekeepers. [Laughter] My approach was to say, "You know we're all in the same boat. We've got to be rowing in the same direction. And let's talk about this and let's talk about the strategic priorities of the university." But, "Well, they're not going to govern the faculty. The university IS the faculty." I remember people saying this. And it's true—the university is the faculty. But there are many other constituencies of the university, and in fact, the way the universities are run, as I learned when I became a dean, is that there is a fair amount of autonomy, or some autonomy, for the dean, but a lot of autonomy for the provost, who's the academic head, and the dean of the College of Arts and Sciences. Very powerful. And people had to respond to those changes which were starting to occur.

So I feel I was a very good transition dean. What can I say? I kept things together. I had a very good associate dean in Paul Solomon, who eventually left and went to the University of South Carolina. But he was very calm and he's a very good manager, and we would have good talks. But Canadians, I think, we're somewhat confrontation-averse, maybe because of some of the historical reasons. We never had a revolution [laughter], so we don't have some of those same attitudes. It's all like... What's our motto in Canada ["peace, order, and good government"]? It's sort of good country, good government is what we want, whereas, there's less support for bureaucracy, I think, here, and governmental control or direction. So I kept trying to say, "Let's all agree on a path." And there were times when we just couldn't agree, and I had to listen to those sides and say, "Okay, I think this is the path that we need to take."

I was hired by the chancellor, Michael Hooker, and unfortunately he died of cancer about six months after I got here... He was a real renegade. He was a great-great-great-great-grandson of General [Joseph] Hooker in the Civil War. He was a Union soldier, I think, but in any case, a very powerful general. And this guy really was trying to get us to change. He wanted our school to change to be much more technology-oriented—much more research-oriented but also technology-oriented. And we were not nearly as technology-oriented as we needed to be. So that was another area that we really had to build up here.

We had had this undergraduate minor in information science, and the undergraduate programs here at UNC are very important. To really do something that has a lot of meaning within the university, having an undergraduate program of some sort is really strategically important. So I said to Chancellor Hooker, “I think it’s a good idea, but I would have to get the faculty on board.” That’s the way it works with faculty, [as he knew] because he was a faculty member. And he said, “I know you can do it. I know you can do it.” Well, it took about four years, but we finally did get it. Barbara Wildemuth here was the first—I appointed her associate dean for the undergrad program. I thought it needed very strong direction at the beginning. We currently don’t have that structure anymore—we don’t have an associate dean for the undergrad program—but I think she got it off to a very good start. And I don’t think it’s been harmful.

We have a [bachelor of science in information science], a master of library science program, a master of information science, and then the PhD program, which is joint library and information science. So we really were committed to the idea that nobody should consider themselves a library science person or an information science person. We should all be capable, potentially, of teaching in either program, because there are things that I think anybody could teach.

Now we’re starting another professional master’s program. I think they call it a master’s in professional science. It’s going to be a little different from our other programs in health informatics... I think they’re going to call it medical information management. I tried to get something going, because I could see the potential for health informatics on campus. I got a consultant, and we did a big environmental scan, and a big report came out of it. So I think I sowed the seeds for the health sciences here, which was one of my goals. And I got a lot more collaboration going with the libraries on the campus on various research projects.

F: Yes, certainly.

M: All the grants I applied for... to the Institute of Museum and Library Services were on the education side. Most of their grants actually are in education or program development, program demonstration in libraries. We got some very nice grants from IMLS to support our doctoral students and master’s students, and we collaborated with the Association of Research Libraries on a program that brought in people with master’s in subject areas to do the library information science degree here.

And I really started up much more collaboration. There are five master's programs in library science in North Carolina and one paraprofessional program at a community college. We didn't really talk to each other very much, and so I went out and visited all of the deans. I also went and visited with every other dean on campus. I really wanted to extend our outreach. That was one of my big goals. And the people who liked what I was doing thought it was terrific. The people who didn't said, "Oh, she's spending all of her time outside the school." And at that time I really didn't have a full-time associate dean. Now there's a full-time associate dean and three program directors for the different degree programs.

F: And this is a big school... And a lot of faculty.

M: It's 450 students, yes. But we had never had a proper administrative structure. And I must say, I did not have experience at that level in Toronto... I had not had experience, is what I should say, with creating a new administrative structure. So I did talk to a lot of people about it and argued for more funds to help do it. Funds were in very short supply, as they always are. But I really had a good relationship with all the provosts that I worked with—an exceptionally good relationship—and they were very responsive. I was very picky about the things I would go to them with, because I think if you go to the well too often, the well runs dry. So you have to learn that sort of stuff.

I also tried to attend as many events which were university-wide [as possible]. Deans here have to go to all of the development things. We were starting a big new campaign shortly after I arrived to raise funds, and there would always be events. And they wanted the deans to come. They'd tell us we had to be in Raleigh or we had to be in Durham or we had to be somewhere. And I would always try to go, and the chancellor—who's like the president of the university here—would be there. I would always position myself sort of in the front row, and I would have sent him a list of the things we'd done lately. And he'd say, "Ah, yes, Dean Marshall is here, and she's told me about some of the wonderful things there." And we got elevated to the number one [library and information studies school]—well, we were tied for number one with the University of Illinois, on the *U.S. News & World Report* list. Am I responsible for that? I think not, because it happened fairly early in my tenure as dean. But anyway, I made good use of it.

And you have to go to the football games, you have to go to the basketball games, you have to go around and talk to people. And I'm normally pretty shy, believe it or not, in social situations, or I certainly had been in my lifetime. I didn't see myself as a really extroverted person, which most librarians, I would say we're either a mix or... but we like that introverted part of ourselves, that interior life. We like to read a lot and stuff. But I really made myself get out there. When I have a passion for something, believe me, whether it's clinical librarianship or consumer health information or believing in the importance of the school and its role in national and international LIS education, then I am not shy about going up and telling people as much as I can about it. So I would meet the governor at these football games and the lieutenant governor. She came to visit our school during my deanship.

We had a graduate school review as well as an accreditation review. They told us we should be doing some of the things that we'd been talking about, and that our doctoral program only had five students in it, and they said the cohort's not big enough. So during my tenure as dean, we went from five students to eighteen students, and we're now up to about thirty, I think. And they're really moving through. But it takes many years for that to happen—many years. It's not a fast road anywhere with that kind of program.

And the undergraduate program, when it first started, was tremendously popular. Then there was the dot-com thing, and registration went down. Because there isn't the same push for people in technology to get a degree in it, because Steve Jobs didn't have one and Bill Gates didn't have one. So there's this belief that you don't need it if you're smart enough and creative enough. For a while there after I was dean, the undergraduate program did not get the same level of attention. But Gary Marchionini has really put renewed life and effort in the support behind it, so it's growing again, which is really wonderful. And Gary is really building relationships with a lot of companies for hiring purposes. We now have a career officer.

Like a lot of the things I thought we should have and I started working towards... I think we managed to do a fair amount when I was the dean in terms of partnerships both on and off campus and to get more international programs going and international partnerships with other programs. I felt that was something that we should do—that we should have more money to support faculty and doctoral students going to conferences, or even master's students. That's what I've always given my money for in the school—to the Ed Holley fund, which supports research expenses for students.

It's funny... But after five-and-a-half years, I was getting as much or more pushback as ever. I was reviewed, and it was very mixed, frankly. There were some people who really liked what was happening, but they were also frustrated... I'm sure people are frustrated with Obama. He may have some good ideas—and I won't get into politics here—but people get tired when things are not moving as quickly as they would like. So the provost, who I got along with really well, said, "You know, Joanne, I looked at this." He said, "You've done so much. I know the list of to-do's that you started with—your priorities—and you have exceeded those. And we are so impressed."

I think I had raised about \$3.5 million for the school, but the year I came they had raised \$168,000. So if you look relative to where I started—and I got six new faculty positions—this is incredible. But every time I would get a faculty position, some of the people would complain, "Well, you didn't get any support staff." And I said, "Well, the idea is, if we get more faculty, they'll generate more grants. We get to keep part of the grant overhead. We can hire support staff." But up until that point, when I came, everything was state-funded within the school, which puts severe limitations [on things]. The programs that have really grown—the health sciences programs—they all grow through grant funding. It's a very stressful kind of thing, because you have to keep getting the grants to keep the whole enterprise going. But on the other hand, that seems to be the way of the world in academia.

F: And you increased grant income fourfold. That's huge.

M: Robert Shelton, the provost at the time said, "Joanne, I've seen situations like this where there's a very good person in place doing very good things, but you have to really assess how much more you're going to be able to do in that environment." So he said, "If you want it, you can have it, but my advice would be, you have such a strong research record, why don't you go back to the faculty?" And I said, "Well, I feel you should get more return on investment from me. You brought me down here." I actually did it for five-and-a-half years. I said, "I would feel guilty doing that." And he said, "Not at all. We are so grateful for the work that you've done, and we are even prouder of the school than when you came. It was considered to be a very good school, but now it's better and it's on a good path." So I thought, well, that sounds good to me.

I had very good relationships with the Institute of Museum and Library Services at that point, so I redirected my efforts. [In] my experience as a dean, Carol and I had done this NLM grant together on what became known as Go Local, linking statewide resources to MedLinePlus. That had been the health sciences project I'd worked on..., and there were some publications that came out of that. But I had devoted myself to administration, so my emphasis had not been on my own research, but on the [IMLS] educational grants that I was able to get and mentoring those students. I was very excited about those programs. One of the ones we got funded was collaborative with Joe Hewitt, who was the university librarian at the time. And we were able to find funding for seven doctoral students who came in and worked with the chief librarians of the academic libraries in the area, including the two health sciences libraries—the one at UNC and the one at Duke. There's North Carolina State in Raleigh. There's North Carolina Central University and there's Duke University next door in Durham. And then the two health sciences libraries we got in there too. So these students were supposed to observe and orient their research towards practice. That was really wonderful. It did relate to previous things that I had tried to do—thematically, at least.

F: Very directly.

M: And I had made these contacts at IMLS, and I was looking at their priorities carefully, because I had been writing the educational grant proposals. And I thought, well, the library workforce is a real concern for them, so I started applying for grants in that area. There's more detail to that story, but I think we're sort of focusing more on MLA and the health sciences area, for which I also received grants during that post-dean period as well.

But as I look back on the dean period, in one way I would have liked to continue for a little while longer. On the other hand, I think the provost was very wise in his advice, and I think that I personally would not have been able to make a lot more change, because they knew me by then. They knew how to get around some of my strategies, whereas a new person comes in and they're unknown, and sometimes they have a better chance of doing that.

F: Yes. Resistance to change is a major barrier to diffusion of innovation, as you know.

M: Absolutely.

F: And that doesn't go away easily, especially if people don't change.

M: So I was able to get back into teaching health sciences and research methods, which I really enjoy teaching. And I've had some doctoral students who completed during that time, working on my research projects or on their own. One person did her dissertation—Susan Rathbun-Grubb, who's now a faculty member at the University of South Carolina—out of the workforce... [gap in audio]. Chad Morgan is his name—he's the one who most recently finished. And I had one [Carol Perryman] in between who's now on the faculty of Texas Woman's University... She was a clinical librarian as well, so it was really wonderful to work with her. She did her dissertation looking at hospital librarians and how they solve problems, and she used grounded theory and qualitative [methods]. So I had some really wonderful research experiences with [doctoral] students and with the master's papers here. Those also are pieces of research, and some students do a really excellent job. I mean, you have to do enough to pass it, but some students really went above and beyond. I think we're especially good at preparing some of the researchers for the future in this program. A number of people went on to get NLM associateships from our program over the years.

F: Which always speaks well for the program.

M: Yes—which has been wonderful. And Kathel Dunn, actually, who's the current head of the associate program, is one of our alumni.

F: And now you've moved into this new distinguished research professor role.

M: Well, I have. Yes, there was another research project in there. Do you want me to talk about the value study?

F: Sure. That relates very closely.

M: So then I can talk about the distinguished research professor role. I did this series of workforce projects, the first in North Carolina, a big retrospective career study, of people who graduated from LIS programs in North Carolina from 1964 to 2007. It's probably the largest study of its kind that's ever been done. And then we got a second grant to include more programs and to reduce it to a recent graduate survey, which we could all continue to use, potentially. So we had thirty-[three] programs participate in that, and we have a very large dataset from that as well. Both datasets have been made publicly available, thanks to the wizardry of some of the people I worked with, and the Odum Institute for Research in Social Science. So I've been trying to really look at where, if we're going to go somewhere in research in our field, we need to start doing major

studies and archiving the data, so that people can go back and reanalyze the data. That's what they do a lot in the social sciences. They don't use original data very often.

F: And this is the WILIS Project?

M: Yes. It's Workforce Issues in Library and Information Science. And we have WILIS 1 and WILIS 2, and WILIS 3 is the archiving project. So if people Google WILIS UNC, we have a website which gives all of the details of our research. We published two issues on library workforce in *Library Trends*. The first one is primarily articles about the outcomes of our project, because it was such a large one, but some from outside, too. And then the second one is primarily papers from people around the world around library workforces. Because we are a rapidly aging profession, more so than other professions, just because people go into librarianship and they tend to stay in librarianship. And so we've aged in place. And so many changes have happened. Looking at the history of those people, we don't really have much data on that at all. I would say we provided something that I hope many people will use in the future.

Then, about six years ago or so, I got contacted by Kathel Dunn, who was then with the Regional Library of Medicine—the NN/LM [National Network of Libraries of Medicine] that was headquartered at New York University. All of the directors from that region wanted to replicate the Rochester study. And the Rochester study, as you know, is a study [on the impact of the hospital library on clinical decision making] that was actually published in 1992. We did this study in the Rochester, New York, area, and it was a study of physicians. We asked them to pick a current clinical case, make a request for a MEDLINE search from their hospital librarian, and then evaluate the impact on patient care. That study design came from two sources, really. One was that David King did an earlier, much smaller study in Chicago. The other really big influence was—I knew it had to [look at] outcomes and impacts, which was one of the things I had taken away from McMaster. What you need to look at in evidence-based studies is the patient outcome. You're not just describing the case or something of that sort. You're really looking at outcomes. And so we had to do some research that involved outcomes. And you're working away on this and you're doing your best, and wonderful collaboration... Bernie Todd Smith, who was really instrumental in getting that study going, as was Lucretia McClure and Julia Sollenberger, we worked so hard on the methodology. The methodology was a very robust methodology, as research studies go. We randomly selected the physicians. We sent out all the requisite numbers of reminders about the study, and we got a very good response rate to the study. We were able to show that using the results of the search provided by the librarian had a major impact on diagnosis, the type of care that was offered—all kinds of things. It's all in print so I won't go over those things. But it was one of the first studies to look at the impact of library services on outcomes.

F: A very landmark study in our field.

M: But you never know as you're working on things. Like, I had no idea when I started working on my little consumer health projects in Canada, or the clinical librarian programs, or when we started working on the Rochester study. I would say the consumer health information service in Toronto had more of a province-wide impact and a national impact there, because Canada is very big on health promotion, but not so much a wider one. But the Rochester study, I think, impacted health sciences librarians everywhere, because it showed that we could do it. It showed we could do it.

One of the earlier studies I did at McMaster was a randomized controlled trial as well. So I don't know if I mentioned that earlier, but if people look at the bibliography, they'll see one of those earlier studies. Again, everyone thought you couldn't do randomized controlled [clinical] trials. But I went to Dr. David Sackett, and he told me how to do it. That was the evaluation of the clinical librarian program. So that was exciting. And I had no idea! I thought, of course, you have to do randomization, and you've got to find whatever your outcomes are. They were educational outcomes that we looked at in that study as opposed to direct effects on patient care. I hadn't gotten to that stage in my own thinking yet. They were educational impacts. But it was a randomized design. So it's not easy to do. Scott Plutchak has written very well about this whole business of randomized trials and whether we can do them or not, because there are some around—not a lot—but we've done probably more than any other branch of librarianship by far. By far. And it's because we're so immersed in the medical literature and the rigor of the research that's done in the health field, right?

F: Yes.

M: So anyway, the group in that region wanted to replicate it, because they felt that it was good research, but it was published in 1992; we really need to update this. So we started working, and it took us five years of planning, because we wanted to do it at multiple sites. We wanted to include physicians, residents, and nurses. We wanted to use an online survey instrument that could apply to all these different settings. There were so many different things. We had a wonderful, quite a large planning group, who were all authors of the first article. We called it the Value Study—the “Value of Health Library and Information Services [in Patient Care].” Then finally we had it all planned. We piloted the survey and it seemed to be working, and we got a grant proposal together and got some funding from NLM. And we got a little bit more money, and we were able to add sites to it, so we ended up with fifty-[six] different sites. I think almost all of the NLM regions across the U.S., and there were four sites in Canada, were represented within that study. And we have a broad enough group of sites such that even if people didn't participate in the study, they can find institutions like themselves if they want to look at a subset of results. We've got a lot of specialized reports on the website. There's still a website available for that.

We just published two more articles based on events analysis, one in a nursing journal and one in the *International Journal of Health Care Quality Assurance* aimed at health care administrators and health care researchers and physicians too. I hope some of them read it. So that was one of our goals. It takes a while to accomplish. Research is not the

fast route anywhere. But it's really worth it when you finally get to that point where you have something in the published literature that people can use. So I hope that from this new study people will be able to use the original article on the study results, which was published in JMLA [*Journal of the Medical Library Association*], and then these two new articles—in the *Online Journal of Issues in Nursing*, so it's available online. The other one is in an Emerald [Group Publishing] journal, but I'm sure librarians can figure out how to get ahold of that if they don't happen to subscribe to that licensed journal.

It was such a wonderful project to work on. How many people get that opportunity to go back to an earlier piece of research and then replicate it, I guess you'd say, on an international level?

F: Oh, a much broader level.

M: And broader level, with so much data. And although the methodology was not as pure as in the original Rochester study—we couldn't randomize people... [It] explains it all, why we did it the way we did it. But we got a 10% response rate, and over 16,000 responses from physicians, residents, and nurses. It's the largest study of nurses that's ever been done, I think. Well, maybe of physicians, too, for that matter.

Julia Sollenberger and I went to NLM and presented the results to the Board of Regents meeting at one point. We've given multiple papers on it at MLA as the studies progressed. And I've done some additional work for NLM—the distinguished research professor work now—analyzing some of the results on PubMed only. But we find that people use multiple resources. It's not just PubMed. They're using other things as well. It's hard to isolate an individual resource—even PubMed. But we tried hard.

Throughout the Value Study data collection period—and the WILIS studies and everything ended within the last year—I was also teaching classes. But my husband took retirement last year, and I decided probably it was really time to change paths again. We came in '99, so actually it's been fourteen years.

F: Ah, you're slightly off your cycle.

M: Yes, I am. But I spoke to our dean, and he suggested I become a distinguished research professor. You do not get paid, but I get to keep my office, I get the privilege of buying parking on campus, which is not easy to get, and I can stay as involved as I want to be, which is really wonderful. I'm hosting an international faculty member from Turkey for the next year. And I go periodically to seminars and kind of keep track on things.

But it's time to back off and back away from the day-to-day decision making. We've had almost a total turnover of faculty from the time that I came to now, and Gary has been successful in getting even more faculty positions. I think we maybe had sixteen or seventeen faculty. By the time I left the deanship, we probably had about twenty-three.

Now we're up to 30. So the school has really continued to grow at a time when a lot of programs are struggling to continue to be viable.

But I got greater respect for administrators. I was getting very impatient at Toronto. I thought I could see changes that I thought should be made in a lot of things, and didn't feel particularly empowered to do it. And I got the opportunity to try that and see how difficult it really is, and I hope I learned something from that experience. I hope, overall, as people look back on that period—the faculty who were here then—that they'll also see that it was a useful transition period. Because they got someone who was not good at hammering them over the head with change, which had also been tried here and failed miserably. [Laughs] So I think they thought I would be kind a middle-of-the-road person, which I was. I'm not sure what I could have done differently, so that's what you do—you offer what you have, and then you learn from that, and you go on from that, and you support people who are supporting this wonderful school that I continue to really support and believe in.

And I had this amazing period of very productive research after I left, with access to funding from IMLS and NLM—I wouldn't have gotten the IMLS funding at all in Canada. I became one of the major grant-getters in the school, and I had a research staff. My research manager has gone to do a PhD in library and information science at the University of Illinois, and as I say, one of the research assistants went to the University of South Carolina. Also, we hosted during that period the international conference on Evidence Based Library and Information Practice [EBLIP]. It's actually even stronger in Australia, England, and Canada than it is here in the U.S. That was really great, because it had never been held in the U.S., and it had been held in all of those other places. It will be in Australia next. So that was really rewarding. And I really got to know Jon Eldredge, who has been so instrumental in evidence-based practice.

And so when it came to some of the things I then went on to do at MLA, I just feel that everything I've done in my career, unbeknownst to me—because it was totally unplanned in many ways... But you see an opportunity, and if it's something that you really think you could develop a passion for, you should follow it. And then things start to come together in various ways. Again, there's a wonderful aspect of not overplanning. I'm not one of these people who believes in overplanning. But you want to be ready to seek the next... You know, what's the next big thing, I guess, although I don't believe in just one big thing, I think it's a number of things. And you need to make sure you're scanning your environment, and you need to make sure you're connecting with your institution. All of these things kind of come together, and then you say, okay, this is where I could make the best contribution.

F: Yes. Serendipity seems to have been a major factor in so many important MLA careers. But there has to be the willingness of the person to meet the opportunity and to do whatever it takes to blossom in that opportunity, and you certainly have been successful with that.

M: Well, I've worked with a lot of really wonderful people. None of this could have happened just with me alone, I can tell you that. You have to get together a team and energize them, and they in turn energize you. And it's the group that makes the achievement possible... Are we at a stopping point? Why don't we stop for a while.

[Break]

[Wave sound recording #2]

F: This is the continuation of an interview with Joanne Gard Marshall on November 19th in Chapel Hill, North Carolina. When we stopped, we were talking about Joanne's transition into being a distinguished research professor, and we're ready to turn to involvement in service. When and how did you become involved with professional library organizations?

M: Well, I had a little bit of involvement in my initial job in academic libraries, but I would say the first major involvement came when I went to McMasters, started working in the Health Sciences Library, and Mrs. Robinow insisted that we go to the Medical Library Association meeting. And I have to say it was a life-changer for me professionally, because it made me realize what a richness there was there in terms of continuing education and contacts and meeting people who were doing work like you. Because if you work in a medical library on a campus, you're the only medical library. Maybe there's another one in the town or the region or something, but you don't see those people on the street every day. So it was wonderful to be able to get together with people working in similar organizations with similar values and priorities and who were doing really interesting things... That particular association followed me through the entirety of my career, and I'm still involved in MLA, serving on committees and contributing to meetings and so forth.

F: And you served on many committees and task forces. Were there any that were particularly memorable?

M: Well, it is hard to choose sometimes, but the ones that really stuck out that I think, again, had a big impact on my perspective on the field and on librarianship in general, were the first research policy task force. And I did not serve on the education policy task force, which produced *Platform for Change*. But I was on the board twice, and the first time, Fred Roper was the president, and he had initiated the preparation of the *Platform for Change* report. So I really got sort of a sneak preview of that report, and I realized how important it was for educators and for the field in general. And it was such a really refreshing change from previous educational policy statements, which were very prescriptive to educators and which educators, probably quite justly, did not want to be treated in that manner, shall we say, and resisted greatly. But Fred's approach, and the committee's approach, was just so much more open, and it made ultimate sense. And I think it really helped us affirm our values and our goals and the things that we needed to do to continually educate ourselves, which we certainly have to do in our field. So those two things—one I served on and one I didn't. But they were very influential. And the

writing of the document of that first task force, *Using Scientific Evidence to Improve Information Practice*, I think, it really started to solidify a lot of my ideas around the importance of evidence-based practice in health sciences librarianship.

F: And then your colleagues enthusiastically elected you as president [for 2004/05]. How did you select the goals that you wanted to pursue as president?

M: It was hard because there were so many things that you could do. I was really thrilled to be nominated and even more thrilled to actually be elected. A little intimidated, as I'm sure all presidents are. I really did sort of an environmental scan, and it seems to me the president has the opportunity to now highlight those issues which are of key importance to the future of the profession. There were several goals, but the ones that I ended up focusing on most, and which are closest to my own particular interests, were globalization and the idea that... You know, MLA, even though it's a U.S.-based organization, has, I think, a big international impact on other health sciences librarian organizations throughout the world. We have more going on and more at our annual meeting. We always get a lot of people coming. Hence, the International Cooperation Section of MLA. I wanted to really nurture it and improve our outreach efforts to other countries. And again, I think that comes from my own personal background, now being citizen of three countries—Britain, Canada, and now, most recently, the U.S. I just thought it was such an exciting opportunity for us to reach out in various ways, so I did give priority to some of the things that involved international activities.

I got some very wise advice from Carla Funk, the executive director of MLA, who I know has guided so many presidents to do a better job during their presidency. She's just a real Rock of Gibraltar when it comes to that year, which is your crucial year to try to make an impact of some sort, make a difference of some sort. She said, "Pick two areas among your priorities. You know that we know that all those priorities are things that are important to you. But what two? Let's say there are two that you really want to focus on." So, again, it was research and education. It had been quite a number of years since *Platform for Change* and the original research policy document were created, so I established task forces to examine those documents and update them, or write entirely new ones, if that's what they thought was appropriate. Because I think that they do have a big impact, particularly on educators. They are the thing through which we make this—if we have a commitment to evidence-based practice and to encouraging librarians to do research when they're able to do so and to use research in our practice—then when you write a policy document, it's the thing that makes it real throughout the association. And the whole world sees it and hopefully uses it, and likewise the education policy statement. There's just something about the things that MLA has done along those policy lines that I think has set us apart from the way, perhaps, ALA [American Library Association] or SLA or other associations would have handled it. And I think we're seen as very innovative and doing some really solid work in those areas. So those are the three areas.

But there are so many things, and you always end up with a theme. I think I wanted to build on the theme of the meeting which was held in San Antonio that year. So, too, you

sort of tend to phrase things around the themes for each conference year where you will be the president. And you, of course, have a chance to give an inaugural address at the beginning and then a closing address at the end. There were several opportunities to speak. I felt I was speaking personally to members of the association. Once I got over my nervousness at speaking in front of a group—and I was really passionate about the things that were going on and what we should be doing and thinking about and what we could do—it seemed relatively easy to get up. I always felt that I wanted to reach out to each and every member as best I could and not keep it too formal or too inaccessible. So I approached it with that in mind. And I hope that I achieved some of that, because I certainly enjoyed doing it. MLA is of such a size that you really can get to know a great many members in the association.

F: We are fortunate in that regard.

M: We really are. People often comment about that—that it's not as big as SLA or ALA and that they really feel they can find a place within MLA more easily. That said, you can't be everywhere at the meeting. You only see a small fraction of what's going on. But it's a wonderful association to be the president of.

F: Were there issues, other than your priorities, that came up during the year that you and the board had to deal with?

M: We didn't have any really serious issues like right now, where we're searching for a new executive director, and Carla Funk will be a very difficult act to follow. We didn't have anything that was that major. There's always the perennial problem that we know that things are changing rapidly and that the role of hospital librarians, in particular, is changing. How do we best support and advocate for those hospital librarians as these changes are taking place, and how do we help to explore new roles for librarians in health care settings? Because it's one thing just to say, well, the roles are changing and the libraries aren't there the way they were, because we were one of the first into databases and online full-text journals. And it has come back to—not exactly haunt us, but we are in a situation where we can operate without print collections. There are a number of libraries that operate without print collections. So that's a total change. And also, more of the databases and other expensive electronic services are being offered centrally through some kind of consortium. So then you have to ask again, what does the hospital librarian do? So I think that has been a constant source of challenge for the board as how to best advocate.

It certainly did steer some of the subsequent research that I did, because I think it's very important to demonstrate the value of what we do, both personally but also through the services we offer electronically at the bedside or in the clinical areas. We're much less connected now directly with the user, often. So how do we get our feedback? How do we get our rewards? Because we're people who like to help people. We're one of the service professions—high-level service professions. So where do we get that sense of satisfaction from? So thinking through, I think, some of those issues and responding to members' pleas for help in that area—I think pricing of electronic journals and some of

the changes in collections and the copyright issues, all of those continue to be ongoing things.

And trying to support the National Library of Medicine in its very important role, not only in the U.S. but worldwide... We have the Governmental Relations Committee, and I was able to go around and visit some of the people in Congress and found out what it's like to be a lobbyist—I have to say I never, ever thought I would do anything like that—and presented an award to one of the legislators. I went with the award in hand when I went to visit. And then, deepening my relationship with the National Library of Medicine, that was also very nice during that period of time.

...A lot of [the accomplishments] were of a global or a partnership nature—the education and research task forces. You chaired the education policy task force and did a great job. Now we have renewed, current documents for people to use.

F: I think of your year as having been very practical, because you did, as you say, refresh the research and the education policy statements, and the focus on global contact, I think, was very important in that era for MLA. Those were very concrete things to move forward.

M: Those were the areas where I felt I had something maybe a little bit more to offer.

F: You had a great background for those things.

M: I could effectively advocate for them, and advocate if I traveled in other countries, and encourage NLM and its international efforts too. Because NLM was originally designed to serve the NIH [National Institutes of Health], but also to serve the health care community in the United States. And they've made some significant changes in their policies.

And then, of course, the research, in my mind, is under the umbrella of evidence-based practice. I was thinking even back then of ways to encourage both the use of research and the doing of research, where that's possible, in the field, so that we could build our own knowledge base and that that would really help us to sustain... Sustainability, I think, is just such an issue for us. We don't want to just maintain things that we're already doing for the sake of maintaining them, but we do want to maintain our role as providers of quality health information in the system, because that's really important. It's complex. Information seeking and use and provision of the best available information so people don't have to sort through anything, the role of librarians as filters, and the systems that we offer as filters of this huge amount of health information that's out there, all of this continues to be very important.

But we're not as visible in health care centers as we used to be, where we had more hospital libraries and more clinical librarians and all of these things. So looking for other ways in which to be useful, whatever the situation. We have to be nimble, we have to see the possibilities of that situation. I think no environment has been more changing than

the health care environment generally, and we have to survive within that, adapt. The secret of survival of any species is adaptability. I see a big role for MLA helping everyone and supporting people in that adaptation process.

F: Because, as you say, it is a very difficult, challenging environment, and we can't often succeed by ourselves. When you were on the board of directors and working on your priorities, were there any other people on the board who were particularly good partners for you?

M: Oh, gosh, there were so many. M.J. Tooey was the president after me, and she's always a force in any environment in which she is present.

F: Quite the energizer.

M: She's really quite the energizer, definitely. Carol Jenkins was a past-president at that point, but I still relied on her. And Fred Roper, too. It's people who had been on the board. It sort of gets to be one big family of people who have been on the board, and yourself as well. I always looking forward to hearing the Doe lecture because so far it's always been someone that I know. I hesitate to mention names on that board when I was president, because I don't want to leave anyone out. I just want to say that everybody made a very significant contribution.

F: MLA is fortunate. It gets really good board members.

M: We really have had excellent board members. There was a huge influx of people coming into the profession generally in the '70s, and when I was president, a lot of us were kind of reaching our peak, so to speak, in terms of professional involvement and contribution. I think our boards have really had a wonderful group to choose from, and that continues to be the case. I think we do have something of a gap in the field in general, because not as many people were hired after a lot of those of us were hired in the '70s and early '80s. And I don't know if in future decades we'll have quite the same selection of people. But you'd look at the list of people who wanted to be on the board, and you couldn't go wrong. They were all great people. And once I became a Fellow of MLA, going to the Fellows meetings, too, and really getting to know some of these names—the people behind the names that I had known for so long. And many of the Fellows keep coming back year after year.

F: You became a Fellow in 2002. And you mentioned the Doe lecture, which you gave in 2013.

M: Yes. Oh, that was really one of the highlights of my career, as far as I'm concerned, and of my work at MLA. There's part of you which would like to be the Doe lecturer, and there's a part of you which is completely petrified at the possibility. And I followed Mark Funk, who is probably the most engaging and amusing speaker that I've ever heard, and he gave a brilliant presentation, and did research. His comments about his lack of research ability were hilarious. And then, of course, he comes up with this great piece of

research called “[Our Words, Our Story],” where he gathered all the text of all the BMLA and JMLA articles over a very long period of time and put them in a database, and they were there to be analyzed. He showed us his analysis of that text, and it was fascinating. You could really see the rise of things, the rise of technology. We’re talking less about buildings and more about health information environments in which information resides and is used, where it just doesn’t have to be within a building anymore or within a physical space. And fortunately he showed the rise of research. When I heard all of that—he talked about technology, management, environment, and then research. Those were the four themes that he identified. And he talked least in his Doe lecture about research, and I thought, thank you, Mark.

F: That opened the door for you, which was perfect.

M: So he’s another person who I greatly admire. He’s just the perfect example of someone who... He’s never been a library director. I don’t know if he ever wanted to be, but I don’t think so. But he’s made an amazing contribution. It just shows the different kinds of contributions that people can make within the field.

It was a thrill to be the president, but if I hadn’t been the president, I think I would have felt really good about being in the field anyway. I hope that everyone who’s in MLA will feel that—that there are so many important things that you can do, both within your own institution and within MLA, that will benefit everyone, and all of that is what makes the association so great. And so if these things happen to come along, terrific. If they don’t, they don’t.

F: Again, I think we’re very lucky, because the size of MLA allows more members to be involved in things, which is really delightful.

M: And I’m not aware of any other library associations certainly, or associations in general, which have as one of their plenary speakers one of their own, who is asked to give a plenary talk on the history or philosophy of the field.

F: When you did your discussion of “Linking Research to Practice,” Joanne, was it an easier task for you given your teaching and lecturing background? It’s still daunting, isn’t it?

M: It’s still daunting, yes, it is, because you don’t usually look at it from that aerial view. You’re involved in either doing it or, in my case, doing research or writing policy statements. But that’s very different from really saying, well, how did this all get started? What were some of the landmark events that marked the history? Can I really say that this movement is on the rise? What evidence do I have? If I believe in evidence-based practice, then darn it, if I’m going to give a Doe lecture, it better be evidence-based. I started by doing further analysis on the dataset—Mark made his dataset available with his article, which was wonderful. We did additional analysis on the research section of that. It did really give a more detailed picture of exactly what’s been happening with research and the rise of different kinds of terminology over time and supported the idea that, yes,

this is indeed on the rise. Then I looked at the research-related activities within MLA and looked at the international activities that had been going on. I came up with several sources but started with the literature itself. I never would have done what I did if I hadn't had that opportunity to prepare the Doe lecture. You get told a year in advance that you've been selected, and you need that year to prepare it, and it really did take the whole year. I was able to get a research assistant to help me. I didn't think I could do all of the work that would be required to gather all of the evidence myself, and fortunately I had some funds that I could use for a research assistant, and we went to work on it. And it was really a pleasure to work on it. It was insightful for me, and I'd like to think that it really added to the knowledge base of the field and to librarianship in general, because this was really the cradle of evidence-based practice in the profession, what happened with health sciences, and looking at its relationship and growth beyond evidence-based medicine into something that's our own version of evidence-based practice.

F: Yes. Very important. You also received the Marcia C. Noyes Award just this past May [2014].

M: That was a big surprise—talk about two years in a row of incredible things happening.

F: What does that kind of honor mean to you?

M: Well, I've been really fortunate. I also received the Eliot prize for the article that came out on the Value Study, so how lucky can one person get—although all of the authors of the article that was in JMLA on the Value Study were the recipients of the Eliot prize, of course. But it's just something that you never dream of. [Emotion] It's the sort of thing that if you really reflect on, it brings tears to your eyes because you didn't really anticipate something like that, nor did you necessarily personally strive for it. When I was called by the nominator [for the Noyes award]—and I was so honored that she would nominate me because I have great respect for her—she said, "Of course you realize that often it takes multiple nominations," and I said, "Well, sure. Absolutely. There are so many people who are deserving of this." To my surprise, I did get it. And my daughter came and my husband came, and a lot of people were there in spirit. So it's one of those things [when] you realize how much your career has meant to you, and it's wonderful that it seems to have meant something to others, too—although you have to do what you do without an expectation that you're going to get an award, *per se*. It has to have its own reward for you, personally, and you do your best for it to be rewarding for others. But ultimately, it seems like a lot of things that happened in my career, they weren't specifically planned, but if I saw an opportunity and I really felt it would be beneficial, and it would be more benefit than some other things I could do at that point, then I would follow that path. And I was just lucky that it all kind of added up to something that people would say is a good career.

The first time I got the Eliot prize, which was way back when—I can't believe that I've had it three times during my career for the best article of the year or the best publication. [Editor's note: The Ida and George Eliot Prize is awarded for the published work judged

most effective in furthering medical librarianship. Marshall received it in 1982, 1993, and 2014.] I guess [mine] were always journal articles. But I couldn't believe it at all. I just thought, are they kidding? They've never heard of me. I'm just here in Canada. But they have really been instrumental in deepening my enthusiasm for and commitment to the field. We give many awards in MLA, and also through the chapters and sections, and we give many more awards in the U.S. than we do in Canada. We are a little skimpy, I think, on the awards in Canada. But I think—and it would be interesting to check this perception out with other people who've won awards—that they play a very important role in reinforcing and encouraging people to move ahead. They don't slow you down, and you don't say, "Okay, well, I've done it now," so to speak. It just makes you want to do more to repay the honor that people have given to you. And you have won awards in your career, too. You've been a Doe lecturer, and you're very prominent in the field. You've done many things.

F: The other thing it always seems to me the awards do that is maybe not the intent, I think it's oftentimes an early marker of people who have leadership potential for the association, who are going to do things that have a broader impact and that have a special meaning for the association, like the publication that you did... I think that's an indication of, oh, here's someone who's doing really interesting, important work that has broader application. And probably that person's going to continue on that same trajectory into the future, oftentimes doing similar important work.

M: Well, research is like that. It's like links in a chain, and one thing leads to the next and to the next and to the next. So you're just a link in the chain. But thinking back again, I learned so much that first time on the board, and I was not a good board member, in retrospect. I was so new at it and so inexperienced. But Fred Roper, who was the president, just let me learn. And if it had not been for that first experience on the board, and feeling that I probably did not do what I really could have done, ...but it gave me the experience I needed then to feel relatively confident in accepting the nomination for president. But if I hadn't had that first experience... And I think there are a lot of people where it's their second time on the board when they get elected as president—they've either just been on the board or sometime earlier they were on the board. I think that's a very good idea. And MLA is a very good training ground for leadership.

And the thing is, in my cohort so many of us were hired in the early '70s, and not all of us could be directors of health sciences libraries. When I applied to be the director of the McMaster library, by that time I'd been seconded and I was working in this health information research unit in epidemiology. But I really wanted the library to become a research center too. So I applied. All of us in the Health Sciences Library who were working there at the time, all the librarians applied. None of us got chosen. And again, some of these things turn out to be blessings in disguise, because then I went and did my PhD, and all these other things emerged that would never have emerged otherwise. So what I'd like to emphasize is that, throughout your career, you're going to have bumps in the path, and some of them will seem to be pretty big bumps. And you will think, oh, I didn't do a good job of that, or obviously I haven't been doing the right thing or something would have happened. I would have got the job or whatever. But you just

have to not take it personally. Move forward and look for other opportunities. And sometimes there's something even better around the corner. And this is life. We will not necessarily have a smooth ride. If we can just get ourselves through those and go on, then often there are surprising things that will happen.

F: Yes. Well, you've certainly had a very rich and deep involvement in the Medical Library Association, but you've also been a participant in significant ways in the American Library Association, Special Libraries Association, Canadian Health Libraries Association, international librarianship. How do you see the commonalities and differences between the branches of library science and the organizations that serve them?

M: Well, the SLA involvement really started when I was teaching special libraries at the University of Toronto. We had a very strong SLA chapter in Toronto, and I really liked a lot of the people in that chapter. And of course, some of them were health sciences librarians as well. I joined SLA when I was teaching the course, and then I started going to the meetings. I realized it was very different from MLA. But it also had a kind of a liveliness and energy to it that I thought, you know, I would like to stay involved with this for a while. Then I got involved in the Research Committee. They had something called a research agenda, and they wanted to redo it. We had already written the research policy document for MLA, the first one, so I was quite instrumental in doing that. [SLA was] not as interested in a policy document. They were real doers, SLA people. They wanted a list of things to do, things for research that people should do, as opposed to more of a statement of the importance of research and how we could use research. We don't all have to do it, but we could use it, and the different ways in which research could play into our practice. So I tried to bring some of that into SLA, too, and I think with some success. And then in the competencies document, SLA is also a very international organization. And that particular competencies document really got a lot of visibility in SLA itself. It seemed to speak to some of the things we had to do to survive as special libraries continued to change. So I got involved in some things that really interested me. I think that's why I did that.

Then when I made the move to UNC, I realized I can't do everything and I had to become more active in ALA, because that is such an important national association in the library science area. So I decided at that point that I would minimize my involvement with SLA and get more involved with the American Library Association and in ALISE—the Association for Library and Information Science Education. So that's what I did. And I was involved in the [ALA Library] Research Round Table. You can see I'm always gravitating towards the research. And then there's an [ALISE] Council of Deans that meets there. It was interesting, but I never, I don't think, developed the depth of involvement in any of those associations that I had developed and continue to have in MLA. It's obviously my home professional association.

And the international conference on Evidence Based [Library and Information Practice]—there isn't an association of evidence-based...librarians as such; we just have

this conference every two years somewhere in the world. I continue to be on the international planning committee for that. We held the conference here in [2007].

F: Is there any kind of umbrella organization that keeps that planning committee active?

M: Just the international program committee.

F: It's a little bit more free-form.

M: Yes. We talked about the idea of going in as something in the International Federation of Library Associations—IFLA—but that has not happened so far. It's hard to know what will happen. A lot of these movements end up almost getting integrated into the practice in such a general way. Like, there used to be separate online searching courses in library schools, and now every course has online searching in it. And I taught here a couple years a separate evidence-based librarianship course, and now I would say our core research methods course—at least the way I taught it, and I think that others do, too—we talk about evidence-based practice here within the faculty as one of the principles that should be one of those crosscutting principles across courses. I like the concept of evidence-based practice in the context of teaching research methods, because I think it makes more sense to professionals like librarians. People think of research as something out there that other people do, where the results sit on a shelf somewhere. But if you think, well, I'm going to use it to make better decisions, it's evidence, it's the research that produces the evidence. Then all of a sudden sometimes the light goes on, and they say, "Maybe this is more than we thought it was."

And, of course, when I was in Canada, I was very active in the Canadian Health Libraries Association [CHLA] and worked very hard on some work with them on benchmarking. I had taught an MLA continuing education course on benchmarking with Holly Buchanan and took that experience and developed a benchmarking approach that could be used in health sciences libraries. We did administer this survey, and we did a little study with it. I think the most important thing was, we came up with a manual on benchmarking, which CHLA was able to sell. They did very well with that manual. It preceded the work that was done in MLA, which was also very excellent, by Roz Dudden and her group with the hospital library benchmarking initiative.

Again, benchmarking is one of those things that came along. And now I think the idea that we're going to compare data has started to become infused within the profession. So whether MLA should be the one that collects the benchmarking data from the hospitals, it's something that you have to really consider, whether that's the most appropriate thing for a professional association to be doing. But we certainly got the ball rolling, which I think is often what professional associations should do. They get the ball rolling, and either it gets enough momentum to be integrated fully into the profession as one of the principles of practice, or if it's not as useful an idea as we thought, then it kind of disappears. But you can see that with all of these things.

F: So I hope you get some deep satisfaction out of the fact that benchmarking and evidence-based practice have become much more incorporated into the educational process, the practice that goes on. Those are big signs of success.

M: Yes, absolutely. Because it used to be people's view was that you'd go and get a professional education. You find out what you need to know. You know how to run a library, in our case, and you know how to search databases or indexes, it used to be, when I first started out. You know what to do, and you know how to do it. And you do it, and that's it. But now we realize that we have to continue to learn and change, that what we learn in our professional education, say a master's program, in our case, is just the beginning. It's the tip of the iceberg in terms of what's going to happen within our career, in terms of what we learn and what we do. And we'll just continue to morph and change.

I think I've just been part of that big process of morphing and changing, and hopefully we're changing based on better evidence. Because it used to be that we just thought that the professional had the answers. They were a professional. Therefore, they knew. Therefore, we would do what they told us to do. But now that's not good enough. The professional, whether it's a doctor, or an engineer, or a librarian, or anyone, why should we believe that? What is the evidence that this works or that works? And if there were some studies, well, has there been a recent study that confirmed that? So I think we should be embedding that kind of thinking, not only in our users, but also in ourselves in our own practice. Unfortunately, it's just like the shoemaker who doesn't mend his own shoes. We were not the first within the health care system to start doing evidence-based practice, but I think we've got a really solid foot in the door now. We're thinking quite differently about the way in which we do things, and we're thinking more about, well, show me the evidence—which we should all be asking about so many things in our society.

F: It's come up several times in our conversation that you have a really unique background in terms of your depth of involvement and perspective in both the American and the Canadian library communities. So I'm curious, since ALA oversees accreditation in both countries, what are the differences that you see between how the two countries educate for and perform library work? Are they significant?

M: Good question. There definitely are some similarities, especially since, like in health sciences, the medical schools are all accredited by AAMC [Association of American Medical Colleges], and the Canadian directors are part of AAHSL, the Association of Academic Health Sciences Libraries. So that's an important organization with MLA. That trio, I think—MLA, AAHSL, and NLM—are very important in the field—that we've got all of those things. It's made us as strong as we are, that partnership. So there's more that brings us together than divides us—let's put it that way. But Canada doesn't have anything like the National Library of Medicine. We have a Canada Institute for Scientific and Technical Information, but it really is serving more science than medicine, per se. So we just don't have the same infrastructure.

One of the last things I did before I left Canada is that I did a value study at Health Canada—our national ministry of health—looking at the impact of the Health Canada libraries on practice. There was a scientific library and there was the one for health policy. In the process of doing that study, which got published in a chapter in a book by Elizabeth Connor... But in any case, I was asked by the minister of health, who got very interested in our study on what was happening in health sciences libraries and what did I think should happen in Canada. I said, “Well, if you look at the U.S. and the National Library of Medicine, we do everything...” In health care in Canada, the federal government divvies the money up among the provinces, and the provinces manage health care delivery in their province. So they haven’t done a lot centrally in the way of services like they have in the U.S. And I said, I think, particularly for libraries, since information is meant to be shared, and we really need to work together to provide the most efficient information services and make the information available to everyone—regardless of whether they’re in a major academic health center or whether they’re in a rural area practicing—we need to have some consistency. I really think it would be a good idea to think about some sort of national health care library in Canada. So he asked me to prepare a report, which I did with Jim Henderson. Carolyn Lipscomb helped with this as well, because, by the time I finished it, I was down here, and she was tremendously helpful in gathering information for that. We submitted it. It wasn’t until... I want to say about four years ago, maybe five, that they actually set up a national electronic library for health—somewhat similar to the one in the U.K., in the National Health Service. [Editor’s note: The Canadian Virtual Health Library operated 2009-2013, when it closed due to lack of funding.] But I don’t think any country will be able to replicate what NLM has done and continues to do, and the innovation and the things that go on at the Lister Hill Center and so forth. It really is the world hub of advancement in health information.

F: It is. And fortunately, they have the resources and the staff to fulfill that role.

M: Yes. But that said, some of the goals I thought they should have for making health information more accessible in Canada, I think, have been addressed by this. Now they’re trying to get more funding beyond the initial funding that was provided in that start-up grant. But if you went into a health sciences library in Canada and you looked and you didn’t know if it was in the U.S. or Canada, I’m not sure there were that many distinguishing features. We search a lot of the same databases. We serve the same sorts of clientele. We have the same sorts of educational programs. So as I say, there’s more that is similar than is different.

F: When I’ve done accreditation visits in Canada, it seems to me that the educational content and approach are very, very similar. And the practitioners that I talk to who are out there in the field commenting about the education that they receive do talk about basically the same things you hear from U.S. practitioners.

M: In Canada, in the educational programs, the master’s programs, they have not gone as extensively into the online, especially the entirely online master of library science programs. That would be a major difference. And McGill was the first one to go from

the bachelor of library science to the two-year master's program. More of the programs in Canada have the two-year master's program.

F: And certainly you hear the LIS faculty in Canada talk about the much smaller opportunity they have to do funded research, because Canada doesn't have the NIH kind of...

M: That's true. No, well, they have a CIHR [Canadian Institutes of Health Research], but there's no specific... The National Library of Medicine is one of the institutes of the NIH in the U.S., but because there is no equivalent national library of medicine in Canada and it's not part of the CIHR, then there's no way of generating research funding like there is through NLM. So that's a big difference, actually. It is very restrictive, I think, to the development of a lot of research done in Canada. There is some. Ann McKibbin and Brian Haynes have done a tremendous amount. There are some other people there as well...in different places who have done some. But I think it's much harder to do because of the lack of funding.

I have to say that was one of the things that attracted me to the U.S. was that there were some major funding sources here for library-related research, specifically. You could apply to the Social Sciences and Humanities Research Council of Canada for research funding, but then you're not competing specifically, again, in a library competition. It would be in an innovations funder, it would be something else. You'd have to find a theme within their programs that you could fit into and then apply that way. There are people in schools of library science or information science that do get funding that way. But all faculty in Canada are on twelve-month salaries, and so, unlike the U.S., where you're on a nine-month academic salary—unless you're in administration, in which case you get your summer salary also, and you become a twelve-month employee. You can't charge salary money up through any grants received in Canada. That's just not part of the thing there. So it's hard to generate...

F: You can't buy yourself release time to do the research.

M: No, not directly. You can try, but it's not such a common thing. Here, faculty are almost expected... If they want more salary, then the dean will say, "Go out and get summer salary through a grant." If we want more release time, then the summer term when we don't do regular teaching, we have to come up with—here it's 25% of your annual academic salary you have to come up with for each course release you get.

Most of the research in our field is done by librarians practicing in academic libraries, where they have to do research for tenure and promotion. And I would say that's also the case in Canada, because the library schools are not that many, and the size of the faculty is limited. But there are a lot more practicing librarians. So that's another reason we have to promote evidence-based practice in the profession and people doing research. We really need that for our knowledge base.

F: Amidst the many roles that you've had, you've always made time to publish and to do significant presentations about the research work that you're doing. How do you find time, or make time, to do that?

M: Well, I probably haven't done that as much as I should have, because there are certainly things that I've done that I haven't published. And that's been really bad. I've just run out of time or energy. But I tried hard to do as much as I could.

F: How important is it for librarians in general to do publishing and presentations?

M: Well, you have to look at it. Certainly for the people who need to do it for tenure and promotion, obviously it's going to help them keep their jobs, so that's very important. For others, where they can keep their job without doing it, I think it has to be kind of something that they really want to do that would give them greater professional satisfaction. I think at one point I started talking about this cohort, and maybe didn't finish my thought earlier—but that so many of us were hired and we couldn't all be directors. So some of us had to find other routes, and that's how I found the research route. And the research route provided me with a lot of exciting projects to do that I could choose to explore myself. Then there were many rewards associated with that, because, in the original system, the only way up in the field was to have more and more administrative responsibility.

I'd like to think that the other thing about evidence-based practice is that it can perhaps produce more of these stimulating intellectual opportunities which allow you to make a significant contribution to the field. But it's just not necessarily the same contribution as an administrator would make. Both are essential, but you could say they're equally valuable. I'd like to think that they're equally valuable. It's wonderful to think that there are some other ways of making a contribution that's bigger than your particular job in your institution.

And that's what a lot of us who were baby boomers in the field who came in... There were only so many administrative jobs and directorships out there. Now we're really looking hard for directors, so if you want to be a director, I think there are more opportunities than there were when I was at that stage of my career when I was interested in something like that. But looking back, I don't think that was my forte. Who knows exactly how these things happen? Maybe it's just that I happened to say, "Research is where I'm going to have the opportunity, so I'm going to do research." But I think overall, looking back, that I have been much happier being primarily in a research career. I've had some administrative opportunities in my career, both in health sciences libraries and in education, and I have enjoyed those, and I have learned from them. But I feel, ultimately, the things that have been most rewarding have been the research experience and the sharing of that research with my peers.

MLA's every year, you can sort of plan for a paper or poster. The sections often organize the programs, and there are chapter meetings. So there are a lot of opportunities within MLA to present a paper or a poster, and a lot of people are doing it. And I see many,

many good things coming out of that. We all need to have some sense of accomplishment in our field, and when we're doing things every day, and especially when we don't see users as much as we used to, just because of the electronic nature of the use of the resources we provide... Research is one of the things that when you do go and present it in front of your colleagues, or participate in a webinar or something of that sort, it's really nice to do it. You really feel a sense of accomplishment.

Or you teach an MLA CE course. There's another great outlet. You can become an educator, and you don't have to teach a whole course, but really getting a good course going. Connie Schardt, who recently retired from Duke, is still teaching her evidence-based medicine for the medical librarian course here at SILS. She's taught that at MLA for years, or variations on it, because it's such an important thing for us to support—evidence-based practice of all health professionals within our institutions. She has made a huge contribution in that area. She even goes to Tasmania and teaches the course. They love her over in Australia and Tasmania. So it provides you with international travel opportunities.

So I think where there's a will, there's a way. Where there's a will to be creative and innovative and to survive and to thrive, there is a way to do it. It's just a case of figuring out what your little spot is in history, what things are happening, what opportunities there are, and then just find something and go for it. And it's somewhat risk-taking, but on the other hand, I think there's a bigger risk of not doing something like that, which is boredom and disillusionment over time. You really need to create those opportunities for yourself and others, because you could never do any of these things alone, so you have to get others enthused, and they will then have the satisfaction of being part of the team. You can tell I'm very enthusiastic about being a researcher and building research teams. And it is so much work, but there's nothing that brings people together more than working together on a really tough problem or project. That's, I think, what brings us all together.

And when we can come to a meeting like MLA and share the experience that we've had, oh, my gosh, it's fabulous. Then you learn from other people who've been doing similar things and maybe had similar experiences or different experiences. MLA facilitates all of that. It creates a structure within which we can share our knowledge at various stages of the production and application of that knowledge. And long may the good ship MLA live and sail. We have to support our professional associations. We don't pay licensing fees, big licensing fees, like all the other health professions. The only claim to professionalism that we have once we finish our master's degree education is that we have an active professional association which helps us to maintain our continuing education and gives us an opportunity to continue to learn and grow and contribute to the knowledge base. So we should support MLA through personal membership, whenever possible, as well as institutional membership, depending on your situation. But, boy, I really hope that we all continue to support MLA, because it's not an easy time for professional associations. For a lot of younger people, I think that perhaps they don't see quite the same benefit in it as maybe our generation saw at the time. I was desperate to just get out there into the wider world, and MLA provided that opportunity. But you can get out into the wider world

through Twitter, through blogs. There are so many ways to get into that world. But coming together in an association is quite a different experience.

F: Yes, so much more focused. You're very thoughtful about your role as an educator, researcher, and active participant in the association. And I have to ask you, because you and I share an active involvement in and commitment to yoga, and we've cut off the tape about this a couple of different times yesterday and today. I know you're continuing to teach yoga and tai chi here on campus.

M: I am.

F: And enjoying that for a lot of reasons. So I'm just curious. What do these practices bring to your life, and what might librarians at large gain from them?

M: Well, I think everyone in our society, whether they're working for pay or working at home but not for pay, but we all have stresses that we accumulate. And we have crazy minds that are always spinning all these stories about things, and weird interpretations and reactions to things that happen in our lives, which may or may not be appropriate. But our mind loves to spin these stories. And yoga is a very unusual thing. It is a physical practice of movement. The poses in yoga are just like a little stopping place, a little bus stop along the path that you're going on. But it's really the movement between. Somehow, when you start to focus within, and you feel the effect of the physical movement in your body, it starts to open and release and create more space in the body. It takes a while to start feeling that, and you start to realize the importance of body alignment—having a long spine, letting the crown of the head float up toward the sky, so that you can keep your spine nice and long. And it feels so much better. Your whole presentation of self starts to change.

I was under significant stress for a good part of my career, and I just found having that time when I could go to a yoga class, or even at home, just do ten or fifteen minutes of lengthening the spine or doing a few poses, that it just brought me such relief and a sense of perspective on all of these thoughts that tend to whiz through your mind when you're under a lot of stress. And I could look at those things, and say, well, yeah, there goes my mind again, interpreting these things like somebody hates me or somebody disapproves of me or something like that. Something happens and the thing happened. But it's the way we react to it. It starts to give you a perspective, and you can step back from some of these reactions that we all have to events that occur in our worlds and just find a different way to approach things. And honestly, if I had not had that—and I had been doing yoga a year or so before, while I was still in Toronto before I moved here. Gradually, I found my recognition of the significance of yoga as a body-mind connector. It's not spiritual in a religious sense, but just feeling that there was another part of me that was connecting with the universe, that was part of everything, if that makes any sense, was just something that was very beneficial. And it took me through the most stressful times. If I would wake up in the night and I couldn't sleep—because usually your body is really contracted and tense—I could get up, and I knew what to do, which movements would help me to just kind of open and release that, without taking any drugs or without

having a drink of alcohol, or whatever people sometimes do in reaction. Not without having a piece of chocolate. Of course, a piece of chocolate is very nice from time to time. [Laughter]

But people who haven't tried yoga, or tai chi is another form that's been outstanding... They're all based on Eastern philosophies, linking the body and the mind. I just think they have tremendous health value and personal value, and I like to share it with people. Anything that I've really loved that I have done, I've wanted to teach eventually, so I had an opportunity to teach, and I've done lots of teacher training-type things since then. And it just continues to deepen. I think as one gets older, you want to be able to reflect on your life, on your career, on the meaning of all that you've been through, and it helps to do that in a way that you can step back and see things. The breathing really helps you to focus and concentrate the mind. I think all of us have some version of attention deficit disorder because there are so many things to distract us.

F: Our society encourages that.

M: Oh, gosh. And all the technologies, all the things that are going so fast around us. We need a place where we can just draw in and just be as we are in our bodies and just let the mind relax for a while. And you just realize there's something very special that we are, regardless of who we are or where we are, that there's something very special in there. And that's reassuring, because sometimes life does not always treat us well, and we feel like we're not very special, and maybe we wasted some time, or we've done some things that aren't right. But it just helps you to get perspective on all of that. I don't know, Rick, if that is the same for you, but...

F: It is very much so. I have come to appreciate more and more, in stressful situations in the midst of the day, that I can take some direct control of my own body and lower my tension levels because of having practiced. And that's very nice. It's also nice for me because, going back to our theme of evidence-based practice, clearly the evidence is mounting that both a glass of wine and a piece of chocolate and some yoga are really good for you.

M: They absolutely are. And if anyone should undertake beneficial practices for health, it should be us. We should practice what we preach in that area too. I notice more and more meetings are having early morning yoga or something, including MLA, in some of the chapter meetings and things. When I was president, I did ask in at least in one of my talks, how many of you do yoga, and there were a lot of hands that went up.

So I think it's good, and I think it's another way of relating to other cultures globally. Yoga, of course, comes from India, and tai chi comes from China. And you can tell when you go to India and China that they have a slightly different way of relating to the world. There's a calmness there. Even when people are in very crowded cities or circumstances, there is a calmness and a centeredness that I don't see so much in the West.

F: We're moving to the other end of the spectrum—more frenetic.

M: Yes. And that is really hard on the body. As you say, there's more and more research that's demonstrating the relationship between stress and chronic or acute health problems. I guess one of the things as a distinguished research professor that I want to do is continue to work with all this data that I've been able to collect in my workforce and value studies. But I also want to continue to explore these practices and their benefits, and I've been doing some work with the... There's a program in integrated medicine here, and they do some studies on yoga. So I'm sort of keeping my eye out for things there. It would be really interesting to do. But I don't feel the stress of having to do it now. If the opportunity arises, I can do that. If it doesn't, I'll just keep practicing, because I think it's beneficial, and I think I would like to share that with others. It's lovely to do that. I've made so many friends through yoga and tai chi. I feel I have a very nice community of... I may not even know these people all that well, but there's a bond there because of what we share in terms of our seeing the value in these practices.

F: And I find many of them for me, whether I even know them well or not, they're calming people. You feel that sense of centeredness and calm coming from them, and that's always nice.

Well, let's wrap up with some general reflections. We've talked a fair amount earlier about Beatrix Robinow. Were there other people who were significant influences for you?

M: Certainly, I think I've mentioned Fred Roper any number of times here—but certainly Fred. And I would have to say, too, Carla Funk, executive director of MLA, has been a big influence. Roz Dudden—she and I did similar work. Holly Buchanan. Jon Eldredge, because he's also involved in evidence-based practice. And Andrew Booth, who really started that movement in health sciences librarianship in the U.K. Really put a lot of work into it for many years. And all the people [in evidence-based practice]. There's a journal, *Evidence Based Library and Information Practice*, that comes out of the University of Alberta, my home province in Canada, and I really encourage people to consider contributing to it. It's a very good journal, peer-reviewed and all, and very valuable information. The person who founded that, Denise Koufogiannakis—she's a librarian at the University of Alberta—did a wonderful dissertation recently on implementing evidence-based practice in academic libraries and has come up with a new model that I've referred to in the article based on the Doe lecture. People can get the reference there for her work. Alison Brettell, from the U.K., has been very involved in that. Rowena Cullen, who's a colleague from New Zealand...

F: Oh, New Zealand. I know Rowena. Lovely person.

M: Yes. I have been in touch with her over the years and been to New Zealand a couple of times to work with her, and that's been really great. Shared rooms at conferences and things of that sort. And my friend Margaret Haines, who was in England for quite a long time. There are a lot in the U.S.—many of the people at NLM.

F: And then the flipside of the coin is always a hard one to answer. Are there any people that you think you particularly influenced?

M: I think you would have to ask them. I didn't particularly go out to influence people, but I'm hoping for the best in terms of the students who've worked with me. They'll forgive my flaws and see some of the good things that came out of that work.

And I have to thank my husband and my daughter, Emily. They've been constant supports. I think if you don't have support in your home environment, then it's very hard to give of yourself in other environments too. Often we just take that as a given, but Victor in particular, he's an academic himself, and he really gave me confidence in my academic ability that I could do a PhD, and did not interfere at all with my choice of dissertation topic and gave me free rein. But he always thought I could do it. That's what you need—people who think you can do things. You want to think you can do things yourself, but it's sure nice if you have a few other people who think you can do it too.

And of course, Lucretia McClure, just the inspiration for us all. But there are so many people, honestly, just so many people. I feel badly that I could mention a lot more here.

F: Of course. You've had a lot of interaction with some great people. How would you like to be remembered by the library community?

M: I guess just as someone who wanted to make a contribution and did her best to do that over the years. But I'm not sure that I've done anything really extraordinary. I think I just took advantage of situations that existed, and I was very fortunate to have really good people to work with. And some of it turned out to be very good. Bernie Todd Smith, actually, is someone I should have mentioned, too, and Julia Sollenberger. These were amazing people to work with. Some of my very best friends and deepest relationships are people I have worked with.

F: On research projects.

M: Absolutely. And I really enjoy now going to the secret lunch that's organized for Doe lecturers every year. It's really fun going to that. I had no idea it existed until I was invited to the first one, and I hope I'll be able to go to many more.

F: People who've all passed through the fire.

M: Yes, exactly. We swap stories. And it really de-stresses you a lot, because it's on the day when you've given the lecture. So you just breathe a big sigh of relief and absorb the support of your colleagues, and, boy, that's terrific stuff.

F: We've talked a lot about the fact that there's so much change going on and has been for the last twenty years in librarianship. Where do you think things are heading and what does MLA need to do to help with those?

M: That's so hard to say, isn't it? Predictions—I'm not sure they're worth a lot these days. I think we have to be prepared for even more major change and not be too disappointed if that directly affects our own working situations, and look for opportunities to maybe make contributions in different kinds of ways. It's often hard to let go, say, of print collections or older ways of communicating or doing things...

I would really like to see us advocate, experiment with more new types of roles and then to share the information about our experience in those roles with each other so that we can all benefit from it. It's one of those things that we need to almost develop a brain trust around that stuff. I think the MLA president's priorities are important in helping guide us through this. And we've had very good boards, I think, in recent years. We continue to have good candidates. So it is nice to have a group like that that is really thinking broadly about the profession and how we can best promote it. I think promotion and advocacy are very, very important. But most of all, doing it—just getting out there and serving on these committees or taking on new roles if we get the opportunity. And I've seen a lot of people in a lot of different roles in the research I've done and just in what I've heard at MLA too. But they're not the roles that you and I started out with, necessarily, at all, and not to be surprised when that happens.

F: I don't know if you would agree, but it seems to me that there's a parallel between the library schools and the library practitioners. The library schools that have not succeeded over time are the ones that allowed themselves to be too isolated. The ones that have thrived are the ones that have really networked themselves into the activities of their institutions. It seems to me that that's one of the situations facing librarians as well. Part of it is finding those new roles and acceptance by the health care community that we serve.

M: And I think seeking as many opportunities to get together for mutual support. Like, here at UNC, there's a LAUNC-CH organization—it's the [Librarians' Association at the University of North Carolina at Chapel Hill]. But they invite all the academic librarians in the region to join them, and they have kind of a research day. To do things on a small scale like that and to bring people together not only from the health sciences libraries but other types of libraries, all of these things really add up to a stronger profession. And looking for those opportunities, not only to set up blogs or electronic ways of sharing, but sometimes when you really get together in person. Because those times are especially valuable, I think.

F: Is there any particular advice that you'd give to your LIS students or new graduates?

M: Well, be ready to change. It's probably one of the first... Assess the situation and... It's almost like we give them... At McMaster medical school, they had this image of a kind of Daniel Boone-type character paddling a canoe. His canoe looked like it was

about to sink, because he had all these supplies and everything. And basically it was, do you want to travel that way, or do you want to dump all that stuff and then learn to fish or learn to do what you have to do to get your food along the way?

And just because it is so hard, we hold onto things physically. That's why there's so much holding in the body, it seems to me. We hold onto things because there's a certain aversion to change in all of us. And if we can support each other as these changes start to occur and stay together—find a reason to kind of stay together and support each other—I think that's going to be really key for the future.

So I tell students, a lot of the things that we're going to talk about are tools that you can use to help you cope with the changes you're going to experience. When you leave here, hopefully you'll have some job skills that you can apply immediately, but you need to keep learning your entire life. If you're going to enter this field, you are a lifelong learner. That's going to be as important as the food that you eat—the things you continue to learn. And continue to observe the world around you and learn from that. Just don't let it faze you. Just keep going. Interesting things will happen, leaving out what you expected. But that's, I think, the attitude that I certainly took in the classes that I taught here. And I see research skills as so important in this whole thing, because the better the evidence you can gather about what's going on and what would be the appropriate... You never have all the resources to do everything, so you have to make choices about what you're going to do. So that is a very important skill, and it's just one of those tools—creating a toolbox of things that you're going to need as you go on your way.

F: Any other thoughts about what we talked about this morning or anything we've talked about this afternoon? Anything we've forgotten to cover that you wanted to comment on?

M: Well, I just feel very fortunate to have had so much time to talk about these various aspects of my career. Again, it's not something that you get the opportunity to do very often, and I'm very grateful to the MLA Oral History Program and to you for providing this opportunity. It might be something for other groups, even at the chapter level, to consider. There's a lot of people who are retiring right now, and to do some of these, not just through MLA—because MLA can only do a certain number—but locally in the chapters and sections. We should be archiving a lot of material through MLA, making sure that we are doing good archival practice with our own materials. Because I do think this will be looked upon in the future as a very crucial time for the profession, and we should be documenting some of this as we go along. It doesn't have to be formally documented in an article, but there should be other things.

We have that Center for Research and Education [CORE] on the MLA website, and we keep trying to find ways to use that. That's a nice thing to do. When we asked in our workforce study whether people would be interested in volunteering in libraries after they retired, 75% said yes. So if that's the case, what an incredible resource that is of retired librarians. And what could we do with that valuable time? Is there some way during that period that people could give back to the profession through mentorship or some other

things? And it will be needed, because they're going to miss us. [Laughter] I am sure they're going to miss us. You can completely control the amount that you want to be involved. But it is something to consider.

F: And as you said earlier, we're at an era where there are a lot of us retiring, more than I think the MLA Oral History Project can possibly interact with. So to lose that cumulative wisdom would be a shame.

M: And everybody has wisdom from their experience. It's not just the people who've gained some visibility in the field or any association. Everybody has had really interesting experiences.

F: Well, thank you.

M: Thank you.

F: This concludes the interview with Joanne Gard Marshall by Rick Forsman at the School of Information and Library Science on November 19, 2014. Joanne, thanks so much for your time and the very enjoyable conversation about your career and the history of MLA.

M: Thanks, I've enjoyed it.

Index

A

Abram, Stephen, 22
 American Library Association (ALA),
 35,36,42
 Library Research Round Table, 42
 Association for Library and Information
 Science Education (ALISE), 42
 Council of Deans, Directors, and
 Program Chairs, 42
 Association of Academic Health
 Sciences Libraries (AAHSL), 44
 Association of American Medical
 Colleges (AAMC), 44
 Association of American Universities
 (AAU), 22
 Association of Research Libraries, 25
 Auster, Ethel W., 18
 Awards, value of, 40-41

B

Bank of Montreal, 1
 Bell Canada, 16
 Benchmarking, 43-44
 Booth, Andrew, 51
 Bradley, Jana, 20
 Brettle, Alison, 51
 British Commonwealth Air Training
 Plan, 1
 Buchanan, Holly Shipp, 13,43,51

C

Callaghan, Claire, 4,5,13
 Canada Institute for Scientific and
 Technical Information (CISTI), 17,44
 Canada-US comparison, 24,44-46
 Canadian Health Libraries Association,
 42,43
 Canadian Institutes of Health Research,
 46
 Canadian Medical Association, 16
 Canadian national health library, 45

Canadian regions, interest in, 2,22
 Canadian Virtual Health Library, 45
 Career decisions, 1-2,3-4,10,14-15,22-
 23,33,40,41-42,47,48
 Chedoke Hospital (Hamilton, ON), 14
 Clinical librarianship, 6-
 8,10,20,23,26,31
*Competencies for Special Librarians of
 the 21st Century*, 22,42
 Connor, Elizabeth, 45
 Consumer health information,
 6,8,10,11,19-20,23,26,31
 Consumer Health Information Service
 (ON), 19-20,31
 Consumers' Association of Canada, 19
 Critical appraisal, 9,11
 Crohn's disease, information for
 patients, 8
 Cullen, Rowena, 51
 Cummings, Martin M., 17
 Curry, Lynn, 16

D

Dalrymple, Prudence W., 20
 Diffusion of innovation theory, 16,18,29
 Dudden, Rosalind F., 43,51
 Duke University, 28
 Dunn, Kathel, 29,30

E

Education, graduate, 2-3,6,7-8,15
 Education, undergraduate, 1-2
 Eldredge, Jonathan D., 33,51
 Evidence Based Library and Information
 Practice (EBLIP) international
 conference, 33,42-43
 Evidence-based medicine, 6,8-10,11-
 12,18,48
 Evidence-based practice,
 20,23,28,33,35,37,39-
 40,43,44,46,47,51

F

Family, 1,12,16,40,52
 "Famous Four," 14
 Fitzgerald, Dorothy, 4,14,19
 Flexner Report, 12
 Forsman, Rick B., 4,37,41,50
 Funk, Carla J., 35,36,51
 Funk, Mark E., 38-39
 Future of librarianship, 23,53-54

G

Gates III, William Henry (Bill), 27
 Grants, 8,9,10,11,19-20,25,27-
 28,29,31,33,45,46
 Guyatt, Gordon H., 9

H

Haines, Margaret [Taylor], 14,18,51
 Hamilton, John, 7,10
 Hamilton (ON) Public Library, 10
 Haynes, R. Brian, 9-10,46
 Health Canada, 45
 Henderson, Jim, 45
 Hewitt, Joe A., 28
 Holley, Edward G., Student Research
 Fund, 27
 Hooker, Michael K., 25
 Humphreys, Betsy L., 20

I

Information seeking behavior, 15,16-18
 Institute of Museum and Library
 Services (IMLS), 25,28,33
*International Bibliography on Palliative
 Care*, 14
 International Federation of Library
 Association and Institutions (IFLA), 43
 International influences, 1,2,3,15-16,35

J

Jenkins, Carol G., 23,28,38

Jobs, Steven Paul (Steve), 27

K

King, David N., 30
 Koufogiannakis, Denise, 51

L

Lamb, Gertrude H., 6
 Laval University, 2
 Leatt, Peggy, 15
 Librarians, role of, 6-9,10-11,36,37,53
 Librarianship, selection as career, 1-2,3
 Library and information science
 education, Canadian. *See* Library
 schools, Canadian
 Library education, changes, 43,44,53
 Library experience, early, 1-2
 Library school education, 2-3
 Library schools, Canadian, 2,45-46
 Library schools, North Carolina, 26,29
 Library services, impact on clinical care,
 30,31,45
 Lifelong learning, 1,34,44,48,54
 Lipscomb, Carolyn E., 45

M

McClure, Lucretia W., 21,30,52
 McGill University, 2-3
 McKibbin, Kathleen Ann, 9,13,46
 McMaster University, 3,19,22
 Department of Clinical
 Epidemiology and Biostatistics,
 6,8,9-10,41
 Environment, 6-7,10
 Evidence-based medicine, 6,8-
 10,11-12
 Health Sciences Centre building, 4,5
 Health Sciences Library, 4-14,34
 Clinical librarianship, 6-
 8,10,20,31
 Consumer health information,
 6,10,11
 Director selection, 10,14,41

Employment, 3-4
 MEDLINE, 17
 Master of health sciences degree,
 6,7-8,15
 School of Medicine
 Problem-based learning, 8,9,10
 Marchionini, Gary, 24,27,32
 Marshall, Emily Gard, 8,40,52
 Marshall, Victor W.,
 3,8,10,15,19,22,32,40,52
 Medical Library Association (MLA),
 42,44
 Advocacy role, 21,37-38,53
 Benchmarking, 43
 Board of Directors, 34,38,41,53
 Bulletin, 9,39
 Center for Research and Education
 (CORE), 54
 Code of ethics, 21
 Continuing education instruction,
 13,43,48
 Cunningham fellowship, 4,13
 Educational policy statement, 20-
 21,34,35
 Fellows, 38
 Governmental Relations Committee,
 37
 Hospital libraries, 36,43
 Ida and George Eliot Prize, 40-41
 Initial interest, 4,6,11,34
 International Cooperation Section,
 35
 International impact, 35,37
 Janet Doe Lectureship, 38-40,51,52
 Journal, 32,39
 Marcia C. Noyes Award, 40
 Oral history, 54-55
 Presidency, 35-38,39,41,50,53
 Research policy statement, 20-
 21,22,34-35
 Research Task Force, 20,34
 Value of, 20-21,34,39,40,41,43,48-
 49
 Medical Library Association annual
 meetings
 International aspect, 35

Presentations, 20,36,47
 San Antonio, 2005, 35-36
 Value of, 6,13,20,34,48
 Medical schools, Ontario, 9
 MEDLINE, 7,12,14,17-18
 Physician searching, 16-18
 MedlinePlus Go Local, 28
 Mentors, 3,12,15,21,51-52
 MeSH, 9
 Hedges, 9
 Mind-body connection. *See* Yoga, value
 of
 Montreal Museum of Fine Arts, 1
 Moran, Barbara B., 23,24
 Morgan, Chad, 29

N

National Institutes of Health (NIH),
 37,46
 National Library of Medicine (NLM),
 9,37,44-45,46,51
 Associate Fellowship Program, 29
 Funding by, 31,33,46
 Importance, 12,17,37,44-45
 Lister Hill National Center for
 Biomedical Communications, 45
 National Research Council-Canada
 Institute for Scientific and Technical
 Information. *See* Canada Institute for
 Scientific and Technical Information
 National Science Library. *See* Canada
 Institute for Scientific and Technical
 Information
 Netter, Frank H., *Atlas of Human
 Anatomy*, 5
 Neufeld, Victor R., 7
 North Carolina Central University, 28
 North Carolina State University, 28

O

Ontario Health Insurance Plan (OHIP),
 17
 Organizational goals, contribution to,
 8,11,22

P

Palliative Care Foundation, 14-15
 Panton, Linda, 13
 Parents, 1,3
 Perryman, Carol, 29
 Pink, George H., 15
Platform for Change, 20,34,35
 Plutchak, T. Scott, 31
 Policy statements, value of, 21,34,35
 Problem-based learning, 8,9,23
 Impact on library use, 9
 Professional associations, value of,
 20,21,34,48-49
 PubMed, 32

R

Rankin, Jocelyn A., 9
 Rathbun-Grubb, Susan R., 29
 Rees, Alan M., 6
 Research
 Education of researchers, 29,43
 Importance to profession,
 12,16,24,29-30,31-32,37,39-
 40,41,43,46,47,48,54
 Outcomes, 30,31
 Methodology, 9,16,30,31
 Role in career, 8,9-
 10,15,18,33,36,37,47
 Retirement of librarians, 30,38,54-55
 Robinow, Beatrix H., 4,5,6,7,10,11,12-
 13,14,17,19,20,34,51
 Rochester study, 30-31
 See also Value Study
 Rockefeller Foundation, 4,9
 Rogers, Everett M., 18
 Roper, Fred W., 4,20-21,34,38,41,51
 Rutgers University, 3

S

Sackett, David L., 8-9,31
 Schardt, Connie M., 48
 Shaking Tent, 20
 Shelton, Robert N., 27-28

Smith, Bernie Todd, 30,52
 Social Sciences and Humanities
 Research Council of Canada, 46
 Sollenberger, Julia F., 30,32,52
 Solomon, Paul, 24
 Special Libraries Association (SLA),
 21,22,42
 Competencies document, 22,42
 Differences with MLA, 35,36,42
 Research agenda, 42
 Strategic priorities. *See* Organizational
 goals

T

Tai chi, 50-51
 Taylor, Margaret. *See* Haines, Margaret
 Teams, interdisciplinary, 6-7,8,10,11
 Teams, value of, 34,48
 Tooey, Mary Joan (M.J.), 38
 Toronto (ON) Public Library, 19

U

University of Calgary, 3,5
 Education, undergraduate, 1-2,22
 Employment, 3
 University of Montreal, 8
 University of North Carolina at Chapel
 Hill
 Health Sciences Library, 23,28
 Howard W. Odum Institute for
 Research in Social Science, 29
 Librarians' Association at the
 University of North Carolina at
 Chapel Hill (LAUNC-CH), 53
 School of Information and Library
 Science (SILS), 3,23,48
 Achievements, 24-28,32-33
 Administrative structure, 25,26
 Collaboration, 25-26,27
 Deanship application, 22-23
 Degrees offered, 25
 Distinguished research professor,
 29,32
 Doctoral students, 27,28,29

Faculty conflicts, 23-24,28-29,33
 Faculty, number of, 27,32-33
 Fundraising, 27-28
 Grants, 25,27-28
 Health informatics, 25,28
 Information science, 24,25
 Outreach, 26,27
 Ranking, 24,26
 Relations with university
 administration, 26,27-28
 Return to faculty, 28-29,33
 Students, number of, 26,27
 Undergraduate program, 25,27
 University of Toronto, 10,22
 Division of Community Health
 PhD studies, 15-16,18
 Faculty of Information Studies,
 15,18-19,20,26
 Courses taught, 18-19,42
 Faculty of Library and Information
 Studies. *See* Faculty of
 Information Studies
 Faculty of Medicine, 9
 Continuing Medical Education,
 16
 Science and Medicine Library, 19
 University of Western Ontario, 4,9,13,14
 Upstate New York and Ontario Chapter,
 20
U.S. News & World Report rankings,
 24,26
*Using Scientific Evidence to Improve
 Information Practice*, 20,35

V

Value Study, 31-32,40
 Health Canada, 45
 Methodology, 31,32
 Publications and presentations, 31-
 32
See also Rochester study
 Team, 30,31

W

Western University. *See* University of
 Western Ontario
 Wildemuth, Barbara M., 25
 WILIS, 3,28,29-30,32
 Datasets, 29-30
 Publications and website, 30
 Wilson, Louis Round, 23
 Workforce Issues in Library and
 Information Science. *See* WILIS

Y

Yoga, value of, 49-51

CURRICULUM VITAE
JOANNE GARD MARSHALL

The University of North Carolina at Chapel Hill
School of Information and Library Science
103 Manning Hall, CB# 3360
Chapel Hill, NC 27599 3360

DEGREES

D.Litt.	2005	McGill University
Ph.D.	1987	University of Toronto
M.H.Sc.	1978	McMaster University
M.L.S.	1968	McGill University
B.A.	1966	University of Calgary

APPOINTMENTS

Jan 1999 to date	<p>Distinguished Research Professor July 2014 to date Alumni Distinguished Professor 2004-June 2014 Dean and Professor Jan 1999- June 2004 School of Information and Library Science University of North Carolina at Chapel Hill</p>
July 2005 – Dec 2013	<p>Senior Research Scientist UNC Institute on Aging</p>
Sep 1987-Dec 1998	<p>Professor 1996-98 Associate Professor 1992-96 Assistant Professor 1987-92 Faculty of Information Studies University of Toronto School of Graduate Studies, Full member, 1990-1998 Cross appointments (Status only): Department of Health Administration, 1989-1998 Centre for Health Promotion, 1991-1998 Institute for Human Development, Life Course and Aging, 1993-1998</p>
Sep 1983-Aug 1987	<p>Librarian/Researcher (Part time) Continuing Medical Education Faculty of Medicine, University of Toronto</p>
Jan 1983-Aug 1983	<p>Director of Information Services Palliative Care Foundation, Toronto, Ontario</p>
Jan 1982-Dec 1982	<p>Librarian/Researcher Program for Educational Development</p>

Faculty of Health Sciences
McMaster University

Sept 1970-Dec 1982 Librarian
 Health Sciences Library
 McMaster University
Positions held:
 Serials and Acquisitions Librarian 1970-71
 Public Services Librarian 1972-77
 Information Services Librarian (Clinical Services) 1978-82
 Health Library Network Coordinator Jun-Oct 1974; Jul-Aug 1977.

Sept 1968-Dec 1969 Reference and Orientation Librarian
 University of Calgary

RESEARCH INTERESTS

Value of library and information services; Health sciences libraries; Workforce issues in library and information science; Community-based collaborative research; Linking research to practice.

HONORS AND AWARDS

Marcia Noyes Award, Medical Library Association, 2014

International Keynote Lecturer, Japan Medical Library Association, 2014

Janet Doe Lecturer, Medical Library Association, 2013.

Associate Research Fellow, National Library of Medicine, 2012-2013

Donald A.B. Lindberg Research Fellowship, Medical Library Association, 2010

Honorary Doctor of Letters, McGill University, Montreal, Canada, 2005

Factiva National Leadership Award, Special Libraries Association, 2004

Fellow, Medical Library Association, 2002

Fellow, Special Libraries Association, 2001

Winifred Sewell Prize for Innovation in Information Technologies, 2000. Biomedical and Life Sciences Division, Special Libraries Association.

Life Membership, Canadian Health Libraries Association, 2000

Member, Board of Scientific Counselors, National Library of Medicine, 1999-2002

John Cotton Dana Award, Special Libraries Association, 1998. Given in recognition of exceptional service to special librarianship through research, student support and development of the document "Competencies of Special Librarianship for the 21st Century".

H.W. Wilson Award, 1997. For the best article appearing in the journal *Special Libraries* during 1996. [Harris G, Marshall JG. Building a model business case: current awareness service in a special library. *Special Libraries* 1996; 87(3): 181-94.]

Special Libraries Association Certificate of Achievement, 1995. Given in Recognition of Outstanding Service to the Library and Information Science Profession.

Eliot Prize, Medical Library Association, 1993. For the work published in the previous year judged most effective in furthering medical librarianship. [Marshall JG. The impact of the hospital library on clinical decision making: the Rochester study. *Bulletin of the Medical Library Association* 1992 Apr; 80(2): 169-78.]

Member of the Year Award. Special Libraries Association, Toronto Chapter, 1993. [For the monograph, Marshall JG. The impact of the special library on corporate decision-making. Washington, DC: Special Libraries Association, 1993.]

Angus Mowat Award of Merit, Ontario Ministry of Culture and Communications, 1992 [Accepted on behalf of the Consumer Health Information Service, a joint project of the Faculty of Information Studies, University of Toronto, the Consumers' Association of Canada (Ontario), the Toronto Hospital and the Metropolitan Toronto Reference Library.]

Award of Outstanding Achievement, Canadian Health Libraries Association, 1992.

Research and Development Award, Medical Library Association, 1991.

Distinguished member, Academy of Health Information Professionals, 1991, Renewed 1996, 2002, 2010.

Invited member, Institute on Research Libraries for Library and Information Science Faculty sponsored by the Association of Research Libraries (ARL), 1988

Doctoral Fellowship, Medical Library Association and Institute for Scientific Information, 1987

Doctoral Symposium Paper Prize, American Society for Information Science (ASIS), 1987

Doctoral Fellowship, National Health Research and Development Program, Health and Welfare Canada, 1985-87

Open Fellowship, University of Toronto, 1984-85

Eliot Prize, Medical Library Association, 1982. [For the work published in the previous year judged most effective in furthering medical librarianship. Marshall JG, Neufeld V. A randomized trial of librarian educational participation in clinical settings. *Journal of Medical Education* 1981; 56: 409-16.]

Scholarship in Library Science, Province of Alberta, 1966-1969

PROFESSIONAL SOCIETIES

American Library Association, Member, 1999-2009

Member, President' Task Force on Library Workplace Wellness, 2006-2008.

American Society for Information Science and Technology (ASIST), member 1987-95

Chair, SIG/MED (Special Interest Group/Medical Information Systems), 1991-92

Liaison to the Medical Library Association, Inter Society Cooperation Committee, 1990-92.

Association of Library and Information Science Educators (ALISE), member 1988 to date

Member, Advisory Committee, Kellogg ALISE Library and Information Project for Educational Reform (KALIPER), 1998-2000.

Canadian Association for Graduate Education in Library, Archival and Information Science,

Member 1987-98.

Canadian Health Libraries Association, Member 1977-

Lifetime membership, 2000

Member, Board of Directors and CE Coordinator, 1988-90

Chair, Consumer Health Committee, 1981-84

Co chair. Benchmarking Task Force, 1997

Council of IT Deans, Computing Research Association, 2002-2004.

Librarians' Association of the University of Toronto, member 1987-1998.

McMaster University Professional Librarians' Association, member 1970-83.

President, 1977-78

President's Committee on the Classification of Librarians, 1979-80.

Medical Library Association, member 1971-

Member, Awards Committee, 2014-

Chair, Medical Library Education Section, 2006-2008.

President 2004-2005

Member, Vital Pathways for Hospital Librarians Task Force, 2007-2009

Member, Research Policy Task Force, 2005-2008

Liaison, Educational Policy Task Force, 2005-2007

Member, Informationist Taskforce, 2001-2003

Member, Online Education Taskforce, 2001-2003

Member, Benchmarking Taskforce, 1999-2001

Member, Nominating Committee, 1999

Co-chair, National Program Committee, 2000, Vancouver, BC, Canada

Chair, Consumer and Patient Health Information Section, 1997-98

Liaison to the Canadian Health Libraries Association, 1997-2000

Member, Board of Directors, 1994-97

Chair, Implementation Task Force for the MLA Research Policy Statement: Using Scientific Evidence to Improve Information Practice, 1995-99

Member, President's Task Force on the MLA Research Policy, Sept 1992-May 1995

Member, Think Tank on the MLA Research Agenda, May 1992

Chair, Ad Hoc Committee on the Role of the Hospital Librarian in Patient Education and member, Nominating Committee, Consumer Health and Patient Health Information Section, 1992

Section Council Alternate, Library Research Section, 1991-93

Consulting Editors Panel, Bulletin of the Medical Library Association, 1989-92

Nominating Committee (elected position), 1989-90

Chair, Library Research Section, 1985-86

Member, Library Research Committee, 1982-84

Chair, Relevance Group, 1978-79

Canadian representative, Membership Committee, 1975-76.
Medical Library Association (Mid-Atlantic Chapter), member 1999-
Medical Library Association (Upstate New York and Ontario Chapter), member 1971-1998
 Annual Meeting Planning Committee 1988 and 1993, CE Chair
 Chair, Ad Hoc Research Committee, 1990-91
 Chair, Continuing Education Committee, 1988-90
 Chapter Chair, 1983-84
 Continuing Education Committee Member, 1981-83/ Secretary, 1981-83.
North Carolina Library Association, member 1999-2008
Special Libraries Association, member 1988-2003.
 Chair, Special Committee to Revise the Competencies for Special Librarians, 2001-03
 Chair, Research Committee Subcommittee on the Research Agenda, 2000-2001
 Member, Research Committee, 1998-2000
 Advisory Committee, Competencies Survey, 1997
 Chair, Special Committee on the Competencies for Special Librarians, 1995-97
 Faculty of Information Studies Liaison, SLA Toronto Chapter Executive, 1990-98
 University of Toronto SLA Student Group Advisor, 1991-98
 Invited Member, Senior Management Roundtable, SLA Toronto Chapter, 1993-98.
Toronto Health Libraries Association, member 1977-98

GRADUATE FACULTY EXPERIENCE

GRADUATE COURSES TAUGHT:

School of Information and Library Science, UNC Chapel Hill

INLS780 Research Methods, Fall 2010 to 2014
 INLS748 Health Sciences Environment, Fall 2007
 INLS515 Consumer Health Information, Spring 2007, Spring 2009, Spring 2010.
 INLS890 Library Effectiveness, Spring 2007
 INLS890 Evidence Based Library & Information Practice, Fall 2005, Fall 2008, Spring 2009 (online)
 INLS890/ HPM768 Informed Decision-Making in Cancer Care, Spring 2010
 INLS554 Cultural Institutions, Fall 2008, 2010, 2011
 INLS795 Field Experience Coordinator, Fall 2005 to 2007 (including summers)
 INLS110 Information Entrepreneurship, 2000-2001 (with Tom Miller, NC State)
 INLS310 Oxford Summer Seminar, 2002
 INLS210 Prague Summer Seminar, 2003

Faculty of Information Studies, University of Toronto

Ph.D. Courses

LIS3000Y Advanced Topics in Information Studies
 LIS3015H Advanced Studies in Online Information Retrieval
 LIS3730Y Information Organization and Retrieval, 1992-93
 LIS3110Y Libraries and Their Publics, 1993-94
 LIS3005Y Advanced Seminar in Research Methodologies, 1993-94

Master of Information Studies Courses

LIS1520H Introduction to Resources and Collections
 LIS2250H Health Sciences Information Resources
 LIS2660H Online Information Retrieval
 LIS2895H Management of Corporate and Other Special Information Centres

Master of Information Science Courses

LIS1518H Origins and Uses of Information for Databases

Other Courses Taught

McMaster University, Faculty of Health Sciences
Principles of Learning in the Health Sciences
Fundamentals of Clinical Epidemiology

GRADUATE COMMITTEES:

SILS Ph.D. Supervisor

Carol Perryman, completed 2011
Chad Morgan, completed 2014
Susan Rathbun Grubb, completed 2009

SILS Ph.D. Committees

Laura Sheble, 2012-2014
Debbie Travers, 1999-2003

SILS Master's Paper Supervisor

Molly Cahall, 2002
Elizabeth Appleton, 2007
Lyn Batty, 2007
Megan Van Noord, 2008
Laura Saslaw, 2009
Xiaomei Gu, 2010
Brian Leaf, 2010

Toronto FIS Ph.D. Supervisor

Caroline Haythornthwaite, 1992-96
Cheryl Buchwald, 1993-99
Donna Chan, 1997-99
Christine Marton, 1997-99

Toronto FIS Ph.D. Thesis Committees:

MH Taylor, M. Loranger, J Pabbathy, X Zhang, S Shubert, G Sigen.

Toronto Qualifying Examination Committees:

J Pabbathy, F Hebert, J Wang, X Du, C Haythornthwaite, G Sigen, C Buchwald.

Other Ph.D. Thesis Committees (completed):

G Moore, Department of Sociology, University of Toronto, 1990
L Baker, School of Library & Information Science, University of Western Ontario, 1992
L Crichlow, Ontario Institute for Studies in Education, 1994.
J Tam, Mechanical and Industrial Engineering, 1997.
S Davis Mendelow, Social Work, 1998.

Other Master's Thesis Committees (completed):

JE Burton. MLS, Victoria University at Wellington, New Zealand, 1994.
P McDonough, M.Sc., Community Health, University of Toronto, 1987-88.

FUNDED RESEARCH PROJECTS

Value of Health Library and Information Services in Patient Care. National Network of Libraries of Medicine, Middle Atlantic Region. Lead Principle Investigator. 2009-2014.

North Carolina Collaboration on Lifelong Learning and Engagement: Reinvigorating Adult Services in Public Libraries. (2009-2010) Planning grant, UNC Vice Chancellor on Public Service and Community Engagement. \$20K. Center of Excellence Award, Lifelong Access Libraries program, Libraries for the Future \$16K. Grant submitted to IMLS for further funding, February 2009. Lead Principal Investigator.

Workforce Issues in Library and Information Science II: Developing a National Alumni Tracking System. (2007-2010) Institute of Museum and Library Services, \$564K. Role: Lead Principal Investigator.

Lifelong Access Libraries Evaluation. (2006-2009) Americans for Libraries Council/ Libraries for the Future. \$230K. Role: Lead Principal Investigator.

Workforce Issues in Library and Information Science I. (2005-2009) Institute of Museum and Library Services. \$804K. Role: Lead Principal Investigator.

Workforce Aging in the New Economy. (2002-2007) Social Sciences and Humanities, Research Council of Canada. \$3 M Cdn over five years. Role: Co- investigator on the US portion of the international study of aging workforce issues in the IT sector.

North Carolina Health Information Online. (2000-2006) National Library of Medicine. Role: Co-principal investigator.

Library Support Services for the Environmental Protection Agency. (1999-2004) Environmental Protection Agency. \$3.5 M over 4 years. Role: Principal investigator. Achieved two 4 year contract renewals.

The impact of information on community and long term care: Redefining the role of the hospital library in the changing health care environment. (1997- 98) OVID Technologies, \$10,000. Role: Principal investigator.

The use of MEDLINE and computer conferencing by dentists. (1996-99) U.S. National Library of Medicine. University of Michigan/University of Toronto. \$66,000. Role: Co investigator.

Development and Evaluation of a World Wide Web site for the Health Sciences Library, University of the West Indies, Trinidad and Tobago. (1995-96) Faculty of Health Sciences, UWI. \$2,500. Role: Co-principal Investigator.

Information policy in Canada. (1995-97) Social Sciences and Humanities Research Council. \$77,000. Role: Co investigators.

A project to explore joint collaborative initiatives with the Medical Sciences Library, University of the West Indies, Trinidad and Tobago. (1995) University of Toronto/University of Toronto Collaborative Committee, Office of the Vice President, Research and International Relations. \$1,750. Role: Principal investigator

Issues of an aging workforce: A study to inform human resources policy development. (1994-97) \$1.5M. Funded by Human Resources Development Canada. Role: Co-Investigator.

AIDS information resources research project. (1994) Funded by the Community AIDS Treatment Information Exchange (CATIE) with a grant from Health Canada. \$14K. Role: Principal investigator: Joanne Marshall.

Health information for all: The consumer health information service. (1991-95) Health Innovation Fund, Premier's Council on Health, Well being and Social Justice. \$417K.

Ontario Tobacco Strategy Behavioral Research Unit. (1993) Ministry of Health. Role: Collaborating investigator.

Pilot study on the diffusion of nursing innovations. (1993-94) Quality of Nursing Worklife Unit, University of Toronto and McMaster University, \$8,000. Role Co-Investigator.

The impact of the special librarian on corporate decision-making. (1991-92) Special Libraries Association, Washington, D.C. \$15K. Role: Principal Investigator.

A study of library use in traditional and problem-based medical curricula. (1991) Grant in aid, Office of Research Administration, University of Toronto. \$300.

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Comparison of the provision of legal and health information in Ontario public libraries. (1990-91) Ontario Ministry of Culture and Communications. \$2K. Role: co-investigator.

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Consumer health information needs: Health Sciences Library, McMaster University and Hamilton Public Library. (1981-82) Regional Service Program, McMaster University. \$2,000. Role: Principal Investigator.

An evaluation of the librarian's educational role in patient care settings. (1980-81) Ontario Ministry of Health, Demonstration Model Grant 378. \$23,000. Role: Principal Investigator.

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I. DISSERTATION AND CLINICAL STUDY

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VI. OTHER PUBLICATIONS

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VIII. CONTINUING EDUCATION COURSES AND WORKSHOPS

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IX. PRESENTATIONS AND POSTERS

Marshall, J. G., Morgan, J. C., Marshall, V. M., Barreau, D., Moran, B., Solomon, P., Thompson, C. A., & Rathbun-Grubb, S. (2010, June). *Workforce Issues in Library and Information Science (WILIS): Preliminary Findings from a Shared Recent Graduates Survey*. Paper will be presented at The Library Research Roundtable at the American Library Association's Annual Conference, Washington, DC.

Marshall, J. G., Morgan, J. C., Marshall, V. W., Barreau, D., Moran, B. B., Solomon, P., Rathbun-Grubb, S., & Thompson, C. A. (2010, February). *Assessing Program Effectiveness through Alumni Feedback: Preliminary Results from the Workforce Issues in Library and Information Science 2 (WILIS 2) Project*. Poster presented at the iSchools Conference, Urbana-Champaign, IL.

Marshall, J. G., Morgan, J. C., Marshall, V. W., Barreau, D., Moran, B. B., Solomon, P., Rathbun-Grubb, S., & Thompson, C. A. (2010, January). *Workforce Issues in Library and Information Science 2 (WILIS 2): Preliminary Results from the Recent Graduates Survey*. Poster presented at the Works in

Progress Poster Session at Association of Library and Information Science Education Annual Conference, Boston, MA.

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Marshall, J. G., Morgan, J. C., Marshall, V. W., Barreau, D., Moran, B. B., Solomon, P., Thompson, C. A., & Rathbun-Grubb, S. (2009, October). *Workforce Issues in Library and Information Science 2 (WILIS 2): Implementing a Model for Career Tracking of LIS Graduates*. Poster presented at the UNC Aging Exchange, Chapel Hill, NC.

Farrar, B., Morgan, J. C., and Owens, I. (2009, October). *Meeting the needs of older workers: The case of Library and Information Science*. Poster presented at the UNC Aging Exchange, Chapel Hill, NC.

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Marshall, J. G., Morgan, J. C., Marshall, V. W., Barreau, D., Moran, B. B., Solomon, P., Thompson, C. A., & Rathbun-Grubb, S. (2009, May). *Workforce Issues in Library and Information Science 2 (WILIS 2): Implementing a Model for Career Tracking of LIS Graduates*. Poster presented at the Annual Conference of the Library Association of the University of North Carolina, Chapel Hill, NC.

Barreau, D., Marshall, J. G., & Rathbun-Grubb, S. (2009, June). *The Changing Terrain of Special Librarianship: A Report from the Workforce Issues in Library and Information Science (WILIS) Study*. Paper accepted for presentation at the Special Libraries Annual Conference, Washington, DC.

Marshall, J. G. (2009, June). *An Evidence-Based Approach to Studying Workforce Issues in Library and Information Science (WILIS)*. Paper accepted for presentation at Evidence Based Library and Information Practice International Conference (EBLIP 5) conference, Stockholm, Sweden.

Patillo, E. J. (2009, April). *The job itself: The effects of functional units on work autonomy among public and academic librarians*. Paper presented at UNC School of Information and Library Science Doctoral Seminar Series, Chapel Hill, NC.

Moran, B. B., Solomon, P., Barreau, D., & Rathbun-Grubb, S. (2009, March). *Where Have All the Librarians Gone? The Academic Library Workforce of Today and Tomorrow*. Paper presented at the Association for College and Research Libraries National Conference, Seattle, WA.

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Rathbun-Grubb, S. (2009, February). *What happens to iSchool graduates? Using career data to support iSchool engagement initiatives*. Poster presented at the iSchools Annual Conference, Chapel Hill, NC.

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Rathbun-Grubb, S. (2009, January). *Leaving Librarianship: Career Paths of Librarians Who Exit the Profession*. Poster presented at the Works in Progress Poster Session at Association of Library and Information Science Education Annual Conference, Denver, CO.

Morgan, J. C., Marshall, J. G., & Marshall, V. W. (2008, November). *Age and the Meaning of Work: Facing Demographic Change in One Feminized Occupation*. Paper presented at the Gerontological Society of America Meetings, National Harbor, MD.

Morgan, J. C., Rathbun-Grubb, S., & Thompson, C. T. (2008, October). *Themes in Workforce Aging and Retention Issues for Two Feminized Occupations*. Paper (three paper symposium) presented at the North Carolina Conference on Aging, Greenville, NC.

Marshall, J. G., Morgan, J. C., Marshall, V. W., Barreau, D., Moran, B. B., Solomon, P., Thompson, C. A., & Rathbun-Grubb, S. (2008, October). *Workforce Issues in Library and Information Science 2 (WILIS 2): Implementing a Model for Career Tracking of LIS Graduates*. Poster session presented at the UNC Aging Exchange, Chapel Hill, NC.

Rathbun-Grubb, S. (2008, October). *Leaving Librarianship: Turnover and Retention in an Aging Library Workforce*. Poster presented at the UNC Aging Exchange, Chapel Hill, NC.

Marshall, J. G. (2008, October). *Workforce Issues in Library and Information Science (WILIS): Preliminary Findings from a Career Tracking Study of LIS Graduates*. Paper presented at Canadian Library Association's Workforce Summit, Ottawa, Ontario, Canada.

Marshall, J. G., Rathbun-Grubb, S., Marshall, V. W., & Morgan, J. C. (2008, October). *Workforce Aging and Retention Issues for Library and Information Science Graduates*. Paper (three paper symposium) presented at the North Carolina Conference on Aging, Greenville, NC.

Morgan, J. C., & Konrad, T. R. (2008, October). *Workforce Aging and Retention Issues for Frontline Health and Healthcare Workers*. Paper (three paper symposium) presented at the North Carolina Conference on Aging, Greenville, NC.

Marshall, J. G., Marshall, V. W., Morgan, J. C., Thompson, C. A., & Rathbun-Grubb, S. (2008, May). *Canary in the mine: Results from the Workforce Issues in Library and Information Science study*. Paper presented at UNC Institute on Aging Seminar Series, Chapel Hill, NC.

Marshall, J. G., & Rathbun-Grubb, S. (2008, April). *What happens to SILS graduates? Preliminary results from the WILIS study*. Paper presented at UNC School of Information and Library Science Colloquium Series, Chapel Hill, NC.

Marshall, J. G., Marshall, V. M., Morgan, J. C., Barreau, D., Moran, B., Solomon, P., Winston, M., Thompson, C. A., Borasky, D., Rathbun-Grubb, S., & Morgan, C. (2008, January). *Careers of Library and Information Science Graduates: Preliminary Reports from the WILIS Studies*. Paper presented at the Council of Deans and Directors at the Association of Library and Information Science Education's Annual Conference, Philadelphia, PA.

Marshall, J. G. (2007, October) *Overview of the WILIS project and the aging workforce*. Paper presented at the North Carolina Central University Diversity Fellows conference, Durham, NC.

Marshall, J. G., & Moran, B. B. (2007, October). *Workforce issues in library & information science (WILIS)*. Booth at the North Carolina Library Association Biennial Conference, Hickory, NC.

Marshall, J. G., Marshall, V. W., Morgan, J. C., Thompson, C. A., & Rathbun-Grubb, S. (2007, October). *Careers of library and information science graduates: Preliminary results from the WILIS study*. Paper presented at the Library Research Seminar IV, London, Ontario.

Marshall, J. G., Marshall, V. W., Morgan, J. C., Thompson, C. A., & Rathbun-Grubb, S. (2007, September). *Transitions in the careers of North Carolina librarians: Preliminary results from the WILIS study*. Paper presented at the North Carolina Conference on Aging, Winston Salem, NC.

Rathbun-Grubb, S. (2007, May) Why librarians leave: A proposal to study the factors that influence librarians to exit the profession. Paper presentation at the Evidence Based Library and Information Practice International Conference (EBLIP 4) conference, Durham, NC.

Marshall, J. G., Morgan, J. C., Madden, A., Thompson, C. A., & Rathbun-Grubb, S. (2007, May). *Where are they now? A study of careers of library and information science graduates*. Poster session presented at the EBLIP4 conference, Chapel Hill, NC.

Marshall, J. G. (2006, October). *Overview of the Workforce Issues in Library & Information Science (WILIS) project*. Paper presented at the North Carolina Conference on Aging, Research Triangle Park, NC.

Marshall, J. G., Marshall, V. M., Barreau, D., Moran, B., Solomon, P. Madden, A., & Morgan, J. C. (2006, May). *Workforce Issues in Library and Information Science*. Poster session presented at Annual Conference of the Library Association of the University of North Carolina, Chapel Hill, NC.

X. ACADEMIC COMMITTEES AND OTHER CAMPUS ACTIVITIES

University of North Carolina-Chapel Hill

Member, SILS Personnel Committee, 2009-2010, Chair 2010-2011.

Member, SILS Search Committee, 2008-2009

Member, Undergraduate Advisory Committee, 2002-2004

Member, University Priorities and Budget Advisory Committee, 2000-2003

Member, Deans' Council, 1999-2004

Member, Subcommittee of Professional School Deans, 1999-2004

Member, Case Statement Committee, Campaign Carolina, 1999-2000

Member, Faculty Information Technology Advisory Committee, 1999-2000

Chair, Standing Committee of the SILS faculty, 1999-2004

Chair, SILS Administrative Board, 1999-2004

Ad Hoc member, SILS Alumni Association, 1999-2004

Faculty advisor, SILS Student Association, 1999-2004

Member, SILS Personnel Committee (fall only), 2005-2006

Member, Research and Doctoral Committee (Full year), 2005-2006

Chair, Search Committee for SILS BRIC position. 2005-2006

Member, SILS Master's Committee, 2006-2007

Faculty liaison to EPA libraries, 2006-2007

Chair, SILS Personnel Committee, 2007-2008

Faculty liaison to EPA libraries, 2007-2008

Faculty of Information Studies, University of Toronto

Coordinator of the Library and Information Science Stream, 1996-1998

Coordinator of Collaborative Programs, 1996-1998

Chair, Doctoral Studies Committee, 1995-96

Member, Academic Appeals Committee, 1995-96

Chair, Academic Computing (Organized FIS Technology Update, Oct 21, 1994 to celebrate the new name of the faculty and to make FIS more visible on campus). Chair, Library and Instructional Technology Committee Member, Executive Committee, Faculty Council Member, Appointments Committee, 1993-94

Member, Library and Instructional Technology Committee, 1992-93

Member, Subcommittee on Faculty Evaluation, 1992-93

Member, Awards Committee, 1991-92

Member, Executive Committee, Faculty Council, 1990-91

Chair, Research Committee on the Use of Human Subjects, 1989-98

Chair, Library and Instructional Technology Committee, 1989-90

Member, Planning Committee, Database Users Conference, 1989

Panel moderator, 60th Anniversary Symposium, 1988-89

Member, Degree Committee, 1988-89

University of Toronto Libraries

Member, Implementation Committee for the Information Commons, 1995

Member, Review Committee for the Reference Department, 1994-95

University of Toronto

Academic Advisory Committee of the Computing Management Board, 1995-99

FIS representative, Collaborative Program in Alcohol, Tobacco and Other Psychoactive Substances, 1995-99

Member, Advisory Board, "Healthnews", Faculty of Medicine, 1995-98

McLuhan Program in Culture and Technology

Member, Advisory Board, 1989-90

Co organizer, Seminar Series on the Social Aspects of Information Technology (with B Wellman), 1987-89

XI. OTHER COMMITTEES OUTSIDE THE UNIVERSITY

Toronto, Canada

Member, Advisory Committee, Ontario Cancer Information Service, 1995-1998

Member, Advisory Committee, Ontario Breast Cancer Information Exchange Pilot Project, 1993-1998

Member, Advisory Committee, Interlink Nurse Consultants, 1993-1998

Member, Advisory Committee, Consumer Health Information Service, Metro Toronto Reference Library, 1993-1998

Member, Information Technology Committee, 1991-92

Premier's Council on Health, Well being and Social Justice, 1991-92

Member, Planning Committee, ISU Library and ISUNET, 1991

Toronto proposal to be the permanent site for the International Space University (ISU)

Chair, Management Committee, 1991-93

Consumer Health Information Service, 1991-93

Metropolitan Toronto Reference Library, 1991-93