

MEDICAL LIBRARY ASSOCIATION

ORAL HISTORY COMMITTEE

INTERVIEW

WITH

MARY L. RYAN, FMLA

Interview conducted by Rick B. Forsman, FMLA

March 2, 2018

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Consent Form for Oral History Interview (2002 version)

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

1. I agree to be interviewed by Rick B. Forsman
on March 2, 2018. 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 _____.

Mary L. Ryan
Name of Interviewee

Mary L. Ryan
Signature

Date 3/2/18

Accepted by: [Signature]
MLA EXECUTIVE DIRECTOR

Rick B. Forsman
Name of MLA Interviewer(s)

[Signature]
Signature

Date 3/2/18

Date 4/13/18



Biographical Statement

Mary L. Ryan, FMLA, spent thirty years at the University of Arkansas for Medical Sciences (UAMS), where she was library director. She is recognized for leading the library's advocacy of open access publishing, projects to improve the health of citizens of Arkansas, adoption of changes in technology, innovative use of space, and expansion of historical resources and archives. Her career is noted for her efforts in scholarly communications and consumer health, her collaborations with public and hospital libraries, and her leadership and contributions to outreach in the South Central area.

Ryan was raised in a small town in Arkansas in a family of nine siblings. She owes her entry into librarianship to her childhood spent reading every book in her public library; this experience also was the impetus for her lifelong ambition to travel widely, often with her twin sister. After receiving her undergraduate degree in sociology from the University of Arkansas, she earned her MLS from Louisiana State University while working as serials librarian at Tulane University Medical Center, where she was also introduced to the profession and encouraged to take advantage of library associations.

In 1978 she returned to Arkansas as assistant director for technical services at the UAMS Library. After a brief stint at the Food and Drug Administration library, she was executive director of the National Network of Libraries of Medicine, South Central Region, 1991-1997, when the contract was awarded to the Houston Academy of Medicine-Texas Medical Center Library. There she oversaw innovative outreach subcontracts to the Resource Libraries and an emphasis on disaster preparedness.

In 1997 she again went to UAMS as library director. Among her accomplishments, she repurposed space and established new roles for the library, including the Active Learning Center and Writing Center. She took a leading role in assuring compliance with the NIH Public Access Policy and promoting open access publishing; she worked with the National Library of Medicine to improve the process for submitting articles to PubMed Central. She also followed her interest in public health with an MPH degree in the first graduating class of the College of Public Health in 2004 that enhanced her understanding of the health needs of the state and her collaboration within the university. Her skills and broad perspective were recognized by the administration with expanded duties as associate provost for student services in the two years before her retirement in 2014.

Ryan served as Medical Library Association president in 2008/09, when her priorities were ethics, environmental issues, and work-life balance. She also was on the MLA Board of Directors and chaired the Section Council during 1990/93. She was elected to the Association of Academic Health Sciences Libraries Board of Directors and to be president of the South Central Chapter and chair of the South Central Academic Medical Libraries Consortium. She was on the PubMed Central National Advisory Committee, and she was a member of the NLM Board of Regents in 2010/14. She was named an MLA Fellow and distinguished alumna of the LSU School of Library and Information Sciences.

Medical Library Association Interview with Mary L. Ryan

[WAV File #1]

RICK B. FORSMAN: This is an interview with Mary L. Ryan. We're in the library at the University of Arkansas for Medical Sciences [UAMS] in Little Rock. And the interviewer is Rick Forsman on March 2, 2018. To begin, Mary, tell me about where you grew up and the circumstances that set the stage for your later education and career.

MARY L. RYAN: Well, I was born and raised in a small town in northeast Arkansas called Walnut Ridge, and I had eight siblings. And we weren't wealthy. We didn't get to go on vacations in the summer. And there wasn't much to do, needless to say, in this small town, especially during the summers. So I spent a lot of time in the one-room Lawrence County public library. It was only a few blocks from my house, so my sister and I walked there a lot. I read practically every book in the library, except the ones they wouldn't let me read because I was too young, so I read some of them more than once. I don't know what I would have done without that library, because it just opened my whole world to stuff outside of Walnut Ridge. That's where I got my love for travel, because I would read books about all these exotic foreign places, and I would think, I have to go there. My sister and I are still trying to go all those places that we used to read about.

When I was in college, my work-study job during the summers when I was home from college was at that same one-room Lawrence County public library. So when I wanted to move to New Orleans two years out of college, I was hired to work in the library at the Tulane Health Sciences Center because I had worked in a library before. They looked at my little, tiny, tiny resume and they said, "Oh, you've worked in a library. We have an opening in the library for a clerk typist. We'll send you over there." But I'll talk more about that later when we talk more about the beginning of my career.

F: So, a very early connection to libraries. And then in 1970, you obtained a BA degree in sociology from the University of Arkansas at Fayetteville, after which you graduated from library school six years later. Tell me what was going on with you during that period.

R: Well, after I graduated from college—I had taken the education block even though I was getting a degree in sociology, because my daddy always said, "Have a backup plan. Have a Plan B." And so my Plan B was, if I couldn't do anything in sociology, then I could teach. I taught my first year out of college at a tiny, little place outside of Fayetteville. I won't really call it a town, because it was in the next county over; it was up in the hills. I call it a hamlet, because there were only a few stores there. There was a post office and there was a combination gas station, restaurant, and grocery store, and about seven or eight houses, and that was it. All the rest of the students were bused in from the hills every day. So, after teaching 175 long days at St. Paul, Arkansas, I decided, maybe I should see if there was something else out there to do.

So I moved back to Walnut Ridge after that first year of teaching to try to figure out what else I wanted to do. I worked as a bank teller. I loved it, because I knew everybody in town, and the population was 3,500. They would all come in. The bank was on Main Street and everybody would come in and chat every day, and I just thought it was wonderful.

But one of my best friends from college lived in New Orleans, and so after she graduated and went back to New Orleans, my sister and I would go down to visit her. And we just thought New Orleans was the most wonderful place in the world. We absolutely loved it. We loved the food, we loved the vitality of the city; there was so much to see and do. This was way before Katrina. It was a beautiful city, and we just thought it was great. We decided one time while we were down there that we should just move to New Orleans, so that's what we did. We moved there in 1972, and as I said earlier, I was hired to work in the medical library at Tulane because I'd worked in a library before.

I was hired as a clerk typist in cataloging. I wasn't sure what that meant when they said that's where I would be. But anyway, I worked in cataloging for six months. My boss was a woman named Mrs. [Elizabeth] Marsh. She had actually been the director here at UAMS fifteen or twenty years before that, and she was a native New Orleanian and had moved back to New Orleans. She was really a sweet lady. While I was in cataloging, I would type subject headings on the top of the catalog cards in red. This was way before any automation. And then I would file the catalog cards in the catalog. And I even, at some point—she started teaching me how to assign subject headings. This was back before you could use OCLC and find a cataloging record and just build on it.

But after six months, I was transferred into the serials librarian position when that person left, because Mr. [William] Postell [Sr.] thought I worked hard, and since I didn't have a library degree, he didn't have to pay me as much as he would have to pay a professional librarian, so that would save a lot of money for his budget. And that job was perfect for me at the time, because I'm a little obsessive-compulsive and I want to have everything in its place, and that's a lot about what being a serials librarian was.

I really developed a love for library work during that time at Tulane, so after a few years of doing a professional job without getting paid a professional salary, I thought, well, there's something wrong with this picture. I decided I should go back to school and get my master's degree so I could make enough money to live on. Several of my colleagues at Tulane and at the LSU Health Sciences Library, which was a block down the street from us—the only thing between us was Charity Hospital—

F: I didn't realize they were that close together.

R: Yes. The only thing between us was the hospital, so we were really a half a block apart. Tulane ended, the hospital began, and in the middle of that block, the LSU Health Sciences Center started. And the library was right there on the other side of the hospital. Our library was literally on one side of the hospital and the LSU library was literally on the other side of it. It was pretty interesting.

I decided to go back and get my degree, and a few other people did, too, maybe five of us all together, I guess. We carpooled to Baton Rouge for two years through the swamp. This was before I-10 was finished from New Orleans to Baton Rouge, so we drove through the swamp in the middle of the night. It was dark, pitch black. It was pretty scary. But anyway, we got our degree in two years.

F: And at least you had somebody to share the commuting with.

R: Yes. And we had a lot of assignments that required us to go find print materials and all those were in the library in Baton Rouge, but we didn't have time to do our assignments there, so we would all run around New Orleans on the weekends trying to find all the resources that we needed for our assignments. So we were this little group of people, and we would tell each other, oh, we found this at so-and-so. It was a nice group to be with, and we didn't have to drive by ourselves.

F: Did you choose Baton Rouge because it was the closest library school?

R: Right. And we didn't want to give up our day jobs. I was fiscally very conservative, very careful, and so I thought, well, there's no way I'm giving up my job. Plus, I loved my job at Tulane. I loved going to work every day. I couldn't wait to get up and go to work. Could be partly because there were a lot of guys [laughter] at the med school who would spend a lot of time at the library. But mainly, I just loved my job. I just thought it was so much fun. And the people I worked with then were absolutely wonderful people—and some of them are still some of my best friends today—so I was not about to give up that job. Plus, we chose LSU partly because it had a good reputation. It had a good library school at that time. So we just thought, well, that would be a really good option. And the tuition was not very expensive back then at LSU. The state of Louisiana at that time was in pretty good financial shape, so their state tuition was relatively cheap. So that seemed to be the logical place to go.

And, of course, this was long before there were any online classes. This was in the mid-'70s, so it was before technology enabled people to take classes online. We had to be in class in order to get credit for it, so we had to show up.

F: So you had to do that commute no matter what.

R: Yes, we did. It was pretty arduous, actually. My car turned over 100,000 miles on the last night of my last class at LSU, so that was pretty momentous—driving back to New Orleans in the dark when the car hit 100,000 miles. It was interesting.

F: This wasn't part of the original set of questions, but I want to back up for a second because from what you mentioned earlier this morning and a couple things you said yesterday, it sounds to me like your father was very important as an influence. It sounded like he gave you a lot of good advice.

R: Well, he did. Actually, he was probably the most influential person in my life until I went away to school. He was very, very smart. He had a genius IQ. He had a photographic memory, which, unfortunately, none of his children really got. I just got a little sliver of it. I could memorize things easily. He was from northern Missouri, and he met my mother during [World War II] when he was stationed at a big training base in Walnut Ridge where they trained pilots. He was very empathetic. He came from a well-educated family. And he was just such a nice person and such a good person. He tried to teach his children to be that way, too. And the fact that he was very smart and intellectual and thought a lot about things—he was very open-minded... He wasn't a saint, but he was a really good person, so he really had a big influence on my life.

F: It sounds like he gave you some really important core values and also some very practical advice.

R: Yes, he did. My mother was just so busy trying to take care of nine little kids that she was just frazzled by the middle of the day. So when Daddy came home, he was kind of the one who was more philosophical and thought about things outside of our little sphere. He was the one who really took on the responsibility for trying to teach us about the bigger world out there and how we should be as people. So he was a really good person.

F: Very important influence.

In 1977, you became certified by the Medical Library Association as a Grade I medical librarian. And I was curious whether this was based on the coursework that you took at Baton Rouge or did you have to do the certification examination.

R: No, I was in the last group before the exam. And, boy, we were scrambling, because we were going, oh, we don't want to study for an exam. We might not pass it. So we tried to get that in before they started the exam. It was based on whether or not you had a degree. And I think you had to have two years of experience or something. [Editor's note: In addition to the degree, the minimum requirements included completion of an MLA-approved course in medical librarianship.] I can't remember exactly what the requirements were, but it didn't require any exams.

F: Did you have any medical librarianship courses at Baton Rouge?

R: I did. Actually, they offered two medical courses the summer of my first year in library school. And they taught them in New Orleans at the LSU Health Sciences Library. They brought in an instructor from the University of Missouri library school. I think her name was Nancy Hardy. One was an introduction to medical libraries, and it basically talked about what a health sciences center was, what types of reference questions you might get, and things like that. It was just a general introduction to medical librarianship and medical libraries. And then the second one was a medical bibliography and reference course, so we looked at all the major print resources that were available. This was just about the time that MEDLINE was coming to the forefront, so we were really early in the process of learning about online resources, because it was

about the only thing online that was even available at the time. It was mainly print resources. So those courses were really good. We all really enjoyed those. And there were about fifteen of us in the class. It was most of the health sciences librarians in Baton Rouge and New Orleans who were in the courses. It was a fun group. Elaine O'Connor from Baton Rouge was in that class. She was a hospital librarian. Evelyn Olivier, who was at San Antonio for a long time, was in my class.

F: Oh, yes.

R: She was in my library school class. It was all of us who were commuting back and forth. We were glad that they actually offered these in New Orleans, because it meant we could get two classes without having to drive all the way to Baton Rouge, so we signed up for those in a hurry. But they were really good classes.

F: Certainly, the education for librarians has changed so much since you and I were in library school. New graduates are entering the workforce with pretty much vastly different skill sets than we came out of with. Are there any comments that you'd like to make about differences in your own education and what we're seeing today?

R: Well, my education was very traditional. It was sit in the classroom, listen to a lecture, go out and do a bunch of questions for homework. So it was very different. And we had to be in class for the lectures, we had to turn in our assignments, and we had to memorize a lot, which was okay for me, because it was easy for me to memorize.

But I graduated in library school in 1976 without ever having touched a computer. OCLC was just getting started, and so we would sit in class our last semester and talk about, gosh, what was going to happen with OCLC and the advent of computers. What was that going to mean? But we had no idea what it was going to mean, because we were too early in the process for it. We were just at the beginning of that transition. There were a very few databases, and MEDLINE was new, so it was all something that we saw in the future for us, but...

F: And it was very unclear what that future would be.

R: Right. And I'd never touched a computer. I remember our last semester, the three of us from Tulane who were commuting to Baton Rouge, walked down the street to the New Orleans Public Library, the main branch, which was a block in the other direction from the LSU library. We walked down there so we could actually see an OCLC terminal. Back then, it was a big, old chunky computer. I just remember how fascinated we were by this big, old box that was going to—we didn't know at the time—revolutionize the way we did work in libraries. That was really interesting.

F: And then also, on the education side, while you were working here in the library at UAMS, you obtained a master's degree in public health in 2004. I was just curious, why pursue that additional degree?

R: Well, when I was at Tulane, Tulane had a really good school of public health. It had been around for almost a hundred years. It was really big in infectious disease control. They had a lot of foreign students there because they offered a lot of courses for tropical ecology and human health, which was the first course I took there. I just thought this [school] of public health was so interesting and the students used the library so much, and so I started developing an interest in public health. And it kind of fit in with my undergraduate degree in sociology. Before I went to library school, I was actually tinkering with the idea of getting a degree in public health.

Then, when several of us started talking about going to library school, which my boss at Tulane, Bill Postell [Jr.], urged us to do, I thought, well, so, do I want to do library science or do I want to do public health? I thought about it a lot, and Tulane was very expensive. It was a private school and a really good school, so their tuition was really steep. I could get a big discount for being a Tulane employee, but still, the difference was pretty steep. And so I was thinking, well, if I decide I want to go back to Arkansas, where my family is, or somewhere else, I would probably have a better chance to get a job near my family if I had a degree in library science, because I still wasn't quite sure exactly what jobs people with a degree in public health got. And, I loved libraries; I loved being in the library. So, the library science degree won out over the public health degree.

But that had always stayed in the back of my mind. And actually, when I lived in Houston and worked at the [Houston Academy of Medicine]-Texas Medical Center Library, the University of Texas School of Public Health was right down the street. I considered getting a degree then in Texas, but my job was so all-consuming when I was in Houston. I was the associate director of the Regional Medical Library Program. There was no way I could go back to school while I was doing that job and do them both well. So I passed that opportunity by.

After I came here—I had been here about three years, and lo and behold, with the tobacco settlement, the state of Arkansas decided, after much lobbying by UAMS, that they would use part of their tobacco settlement money to start a College of Public Health at UAMS, because we are one of the least healthy states in the nation. We have a terrible obesity rate; we have a really high teenage pregnancy rate; we're number one or two in heart attack and stroke; and we have terrible diets—a lot of us do. They don't exercise as much as a lot of people do. So, we really needed a College of Public Health to help the state kind of turn around that status that we have as a very unhealthy state. They started a College of Public Health around 2000 here. And I thought [laughter], well, here's my third opportunity. Am I really, really going to let this one go by? And of course, as an employee, I got a big discount. I was so excited about the opportunity for the state of Arkansas to benefit from a College of Public Health that I thought, this is just great. I just have to do this, and I have to see what opportunities there are out there for improving the health of people in Arkansas.

I found the coursework fascinating. It was just so interesting to me. And I learned a lot from the professors and the students that I went to class with. There were so many

benefits for me in my job as the director of the library from going through this program, because I had a very in-depth knowledge about what one of the major colleges was like—how it operated, what the students were expected to do. I made tons of contacts with people in the College of Public Health and the students. I saw the library from a whole different perspective as a student than I had as the library director, so that was very beneficial to me. And that was part of what led me, I guess, to being so interested in the needs of the students and eventually becoming the associate provost for student services here, because I just learned so much from that College of Public Health experience. It was wonderful. And I think the College of Public Health faculty and students got better service from the library because of the experience that I had in the college. Of course, they knew me so well that they just felt like they could walk into my office and tell me exactly what they needed and that I would just miraculously buy all these other databases for them. That was kind of an interesting experience.

But I also think that it helped give me more credibility as the library director not only with the College of Public Health, but with the rest of the campus, because I had a second degree that was a health-related degree. That really helped a lot, I think. And it helped me become involved in a lot more UAMS committees and projects. It was expensive even with the discount and it was very time-consuming to get the degree, but I think it was well worth it and I would highly recommend to others.

F: I bet there were multiple, multiple benefits of you going through that.

R: Yes. I'm sorry that it was only ten years away from my retirement when I graduated, but those ten years—and, actually, from the time I started the degree program—I think it was a huge benefit for the campus. It was fun. And I still keep thinking, gosh, maybe I could go do some public health-related project at some point, but right now I'm not quite ready to go off and do something with that degree—but maybe in the future.

F: Well, turning from education to your career, which we touched on in a few cases, you were the serials librarian, as you said, at Tulane Medical Center Library from 1973 to 1978, during which time you took classes and completed your library degree. And you talked a little bit about the work that you did there. Anything else that you would like to say about that time period?

R: Well, I would like to say that I think I was very lucky to have Bill Postell Jr. as my director for most of [my tenure]. His father was the director there, before he was, at Tulane. He hired me, but he retired early into my time period there, and his son became the director there. [Bill Postell Jr.] was really supportive of the people who worked in the library, and he encouraged us to go back to library school. He also encouraged us to participate in MLA. His father had been the president of MLA, I think in the 1950s [1952/53], back in the days when they rode the train to get to MLA meetings, he said. But anyway, Bill allowed us to adjust our schedules so we could make it to Baton Rouge in time for our night classes. He encouraged us as we worked our way through library school. He introduced us to our MLA chapter, the South Central Chapter, and encouraged us to participate in that chapter, which I think is the most wonderful chapter

in MLA—it's active, and great chapter meetings, and they're a very friendly, warm, and supportive group. He encouraged us to be very active in our chapter. And then he started funding us to attend MLA meetings whenever the budget would allow it. He encouraged us to participate in MLA as well as our chapter. During that crucial time period, my early years in my career, he was very supportive of those of us who were trying to improve our skills and become better librarians.

F: Am I remembering correctly that Bill Jr. took over as director at a pretty young age?

R: Right. I think he was twenty-eight, if I remember correctly.

F: So I think he was very open-minded and willing to do things in a different way than had been done before.

R: Yes. He was young and energetic and still learning himself. We were relatively close to his age—I think he is only two years older than I am. It wasn't just an average librarian-director relationship because he was so close to our age. He was still learning at the same time that we were. But he had learned a lot from his father along the way, because his father was the director at LSU Health Sciences Library for a long time and then became the director at Tulane, so he had been exposed to health sciences libraries and to MLA and professional activities long before he even graduated from high school. And I think that's one of the reasons why he became the director too.

F: When I was at the University of Connecticut, it was a similar situation. The director and most of the key library staff were all pretty young and of a similar age. And it was an interesting time, because, somehow, that changed the dynamic. It was a very integral group. We did a lot together socially. It sets a different organizational tone.

R: Yes, I agree. I think when you're all young and kind of all learning together and everything's new, you're more open to new ideas—because you don't know a lot and so you're out there looking at all the possibilities of ways to do something or ways to get things done. I think it is an interesting dynamic that's different when the top level of administration, when they're in their fifties, feel more confident about what the right way to do something is. So it's an interesting dynamic.

F: Then, in 1978, you became assistant director for tech services here at the library at UAMS, an institution that you ended up serving for...thirty years. While you were running tech services, as you said earlier, there were lots of developments occurring in automation, OCLC being one of the early ones. What were the challenges that you faced and the aspects of work that you particularly enjoyed?

R: I guess some of the challenges were that I was new to the job, so I had a lot to learn. When I got here to UAMS the first time, I inherited an organization chart, I'll say, in technical services that was very traditional. And things were changing so rapidly that there were a lot of changes that needed to be made. As things were being automated and people's duties were changing so much, there needed to be changes and shifts in the

personnel. As things were being automated, we needed less people to do those things, and we needed more people to do the new things related to automation, like database searching. So when I first came here, we made some major changes in the org chart, and some positions were shifted from technical services to public services.

There were a few people who weren't very open to change. They didn't want their jobs to change. They wanted to continue doing things the way they were. So that was a big challenge, to make those changes, because it was hard to figure out, number one, what changes needed to be made, and then to figure out how to make those changes. It took years to make that transition from a traditional technical services setting to the more modern one based on so much automation.

F: Were there influential or key individuals that you worked with during that time?

R: Neil Kelly was the associate director for public services, so I had to work closely with her to figure out what their needs were, compared to what the needs of technical services were, and figure out when the right time was to switch positions over. And Rose Hogan was the director of the library then, so they were the two people I worked with the most closely in administering the library as a whole.

But also, Edwina Walls Mann was the person who had been in my position as head of technical services before I came, and she had stepped down from that position to become the head of the Historical Research Center in the library, which was the history of medicine division, basically. I worked a lot with her, because I was very interested in the history of medicine, too.

When I was the serials librarian at Tulane, I also developed a big interest in the history of medicine. I had been a history [minor] in undergraduate school, and I taught history the year that I taught seventh through twelfth grade in St. Paul, Arkansas. I taught American history, world history, Arkansas history, American government. I had always had a big interest in history. When I was at Tulane, one of the oldest medical schools in the South, they had a phenomenal history of medicine collection. We had an original Vesalius. We had a full run of the first medical journal published in the United States. We had historical journals from foreign countries, because New Orleans was so international in its early history. I developed a huge interest in the history of medicine when I was at Tulane. I worked on a big project there to move the historical resources out of the un-air-conditioned stacks in New Orleans—if you can believe that—to move them into a safe place while I was at Tulane. That was a lot of fun.

When I came to Arkansas, and the library was just starting this Historical Research Center, I thought, wow, this is great. I worked very closely with Edwina to help establish the Historical Research Center. She was great. She gave it such a strong start that is still thriving today, and that's almost [forty] years later. So I worked with her.

And I worked with Jan Hart, who was, at the time, Jan North. She started out as the head of cataloging and has worked her way up to the director of the library today. So she was influential.

And then outside of the library, one of the most influential people that I worked with from my position as assistant director for tech services was Dr. Chuck Winter, who was in the department of biochemistry in the College of Medicine. He was very techie, very technologically oriented, at this very, very early period in the development of technology in health sciences centers. He was one of the early leaders in the adoption of new technology at UAMS. He had to actually push a lot of people along. He ended up being a great support for the library. He went with us on our trips to help select an integrated library system, which was that early system that helped you build an online catalog and things like that. He went with us on the trips to look at integrated library systems in the early 1980s and helped us keep up with technology through the next two decades. He used to come and sit in my office and talk about all the things that were happening in technology and what might be on the horizon for the library in terms of technology. So he was a wonderful support for me. And what was really interesting, in a way, or ironic, was that his brother was working at the Food and Drug Administration as the head of technology when I went there. The Food and Drug Administration. It was really a small world kind of thing.

F: Yes, that's an amazing coincidence.

R: But one of the challenges that I failed to mention was that as we started automating things and trying to incorporate technology into the library, we had some major budget challenges related to that, because it was very expensive to start making that transition to buying all this technology and implementing it. It was very expensive at the same time that we were still doing things in a more traditional way. As we went through that transition, it was much more expensive than it would have been if we were already to a more automated place. It was really a challenge during that period to try to figure out how much money we could spend on technology and then how to get it.

F: Right, because we had no budget for technology.

R: Right. And the institutions as a whole, the health sciences centers as a whole, were struggling with that same issue: how to start implementing those new technologies, how to retrain the people you have, or hire new people. It was really difficult during that time period to have a balanced budget and to figure out how to allocate the resources that we had.

F: It's interesting to point out, as you did, that the institutions struggled with that issue at the same time, because I think many of our institutions were trying to figure out how to implement email and new phone systems that required significant investments, just like we were facing in the library. And there was, again, no budget for that sort of technology at that time, and so everybody was struggling to figure out how to find money to do those things.

R: Yes, and you mentioned email, which makes me laugh, because I can still vividly remember sitting up in my office on the second floor of the library in front of one of only three personal computers in the library. The director had one and the two associate directors had them. I remember sitting in front of that computer looking at my email system, which had very few messages in it, because very few people at that time had a computer on their desk to send email messages. And I remember sitting there thinking, I wonder if this will ever take off. I wonder if people will ever really use email. And twenty years later, I was so inundated with email and so tied to my email every day, and even when I was away from work, checking it on my phone all the time. And I thought, well, I guess it did a lot better than I thought it would [laughter].

F: You mentioned FDA. And that was one of my other questions I wanted to ask you about. In 1990, you did a one-year stint at the library at the Food and Drug Administration in Rockville, Maryland. You surprised many of your friends and colleagues by leaving Arkansas to go to FDA.

R: Yes, I surprised myself [laughter].

F: What called you to that job and why did you only stay for a year?

R: Well, at the time, I felt like I had been at UAMS long enough that I had done a lot of the things that needed to be done, and that in technical services, we had made the transition to a much more online environment. And I just thought, I wonder, if I came back to Arkansas too soon, if there's more of the world that I wanted to see and do and more libraries that I wanted to see and maybe work in. Also, I was dating an old family friend who lived in the Washington, DC area, and so this long-distance traveling back and forth was pretty crazy. And I thought, maybe I should just get way out of my comfort zone and get a job in Washington. I started looking for a job in the DC area. And I had always been fascinated by Washington. I was very interested in history and government from a young age, and I visited there quite often with my sister from North Carolina. It was a short drive up I-95 to DC. We had gone there many times and I just loved it. And so I thought, I have a male friend there.

And then I had a colleague from the UAMS Library [Carol Knoth], who was a pharmacist and a librarian, and she had moved up to Washington the year before to work in the Food and Drug Administration library, which was a great combination for her because she was a pharmacist and a librarian. She loved it up there, too. And she kept saying, "Oh, you just ought to move up here." When a job opened up at the FDA library, she said, "The head of technical services at the FDA is going to be available. You've just got to come." And I thought, hmm, I don't know. But anyway, I decided to apply for it. And being in the federal system, it took them six months at least to hire me *after* they selected me. It's such an arduous process in the federal bureaucracy.

By the time I got hired and moved to Washington, my boyfriend and I were breaking up, but I moved anyway. I thought, well, I'll still see if it was the distance that was keeping

us apart or something else. And I really enjoyed my time in Washington. I loved living there. I loved going to all the museums and all the events all the time. It just has this vitality to it as a city that is so different from any other city I'd ever been in. I adore New Orleans, too, and I still think New Orleans is an absolutely wonderful place, but DC was just so different.

F: Both energetic cities in very different ways.

R: Very different ways. New Orleans is kind of fun and frolicking; the food was incredible—everything. But DC was just so different. It just felt like such an important place, because it is such an important place. It was so interesting to see those developments close up, the things you hear about on the news all the time. So I loved being there.

But there were some disadvantages to it. One was, working in the federal bureaucracy was very frustrating. The *Physicians' Desk Reference* was the most important resource that the FDA scientists had. It was the official record of what the FDA had approved as the wording for patient [package] inserts. When I got there, I was used to working in a library that could order the PDRs from Majors and get them drop-shipped as soon as they were published—and we had them within a few weeks of publication. Well, when I got to the FDA, the first thing that people told me I had to fix was the ordering of the PDRs, because it literally took them six months—the two years before that—to get the PDRs. And the scientists were going nuts, because they said, “We have to ask drug people on the phone to read to us what the PDR says about the drug that we’re discussing with them.” They were just beside themselves, and rightly so. It was absolutely ridiculous.

I remember going to the procurement office there and talking to them about this problem, and they said, “Well, you have to follow the guidelines that we have for procurement.” And I explained to them again what the problem was. I mean, this was procurement at the FDA. They should have understood what the problem was. So we had this big argument; it turned out to be this big argument. And I don't like a lot of conflict. I try to get things done without causing a big scene. But I just remember this one day talking to the procurement person. I was so upset. I just said, “This is ridiculous. I should just call *60 Minutes* anonymously and tell them to check into this. They can do a whole story on this.” Well, that just really—she was just freaking out because she thought I was going to call *60 Minutes*. So about a week later I got a call from her, and she said, “Okay, we’ve decided that you can order them outside of the procurement system. You can order them from Majors or whichever company you want to use.” Wow! I can't believe that really worked. I was just stunned.

F: But what a battle for basic information that was so important to their employees.

R: Oh, I know. But you would have thought I had hung the moon. Those people were so excited that they got their PDRs within two weeks after publication. It was great. But just things like that were so frustrating to me.

Another challenge was that the FDA was very chaotic when I got there. The commissioner had resigned. They were in the middle of the generic drug scandal—this was not long after generic drugs were still a relatively new thing. All these generic drug companies were *trying* to wine and dine people at the FDA to influence them, and a few people had gone to lunch with a drug company person and they got fired for going on a fifteen-dollar lunch with a drug company person. When I was there at orientation, one of the first things I had to do was swear that I would not take any gifts, any money, anything, from anybody who would have any influence over the FDA. And so that day I thought, gosh, I wonder what this is all about. And then I found out very quickly that it was a mess.

The director of the library at the FDA, who was very elderly and had been in the system for sixty-something years, was very traditional, and maybe partly because of the generic drug scandal, she did not want... I had explained to her before I went there that I had just been elected to a three-year term on the Medical Library Association Board [of Directors] and that they would be funding my way to the board meetings, but that I would need funding from the FDA library to attend the annual Medical Library Association meeting so that I could be at those board meetings as well, because MLA didn't fund your travel as a board member to the annual meeting. I had explained all that to her before she hired me, and she agreed to do that. But when I got there, I guess partly because the FDA was in such a chaotic situation then with the generic drug scandal, she wouldn't support my serving on the MLA board or attending the MLA meetings. And nobody else in the library was involved in any professional activities. None of them had been allowed to do anything professionally outside of the library for *years*. And I just remember being so stunned, because I thought federal agencies were progressive and maybe they did things better than the rest of us out there in the rest of the world. Well, I found out in a hurry that that was not the case there. So that was a big issue for me.

Also, it was very expensive living in and around Washington, DC, which I guess I was kind of aware of, but I just thought somehow I could survive anyway. I looked at going to Washington as a part of my education—that I would learn so much while I was there that it would be worth it, living in poverty.

Also, I discovered that switching from TIAA-CREF at the time to the Federal [Employees] Retirement System at mid-career was just a disaster. Why would anybody in their right mind do that? I hadn't really thought about that until I got there and saw that I was starting at the bottom of the Federal Retirement System in mid-career, and knew that by the time I retired, that wouldn't be worth a whole lot because I would only be in the system maybe twenty years. That never crossed my mind, so that was pretty stunning.

And, of course, I missed my family and friends and colleagues in the South Central Chapter, which I just adore. So after living in DC for a year, I thought, I've got to get out of this place [laughter]. It's too crazy, it's too chaotic. The library was not as progressive as I thought it would be. And I missed my family and friends a lot, so I started looking around.

F: And, as a result of looking around, in 1991, you became the executive director of the South Central Region RML [Regional Medical Library] in Houston, where you stayed for six years. Again, this was a time when RMLs were going through lots of changes and facing many interesting issues. So how did you adapt to this very different role, working with individuals spread out over a very large geographic area?

R: Well, I have to say, this was the biggest adjustment in the jobs that I had. It required the biggest adjustment because, like you said, it was totally different from a regular library job. Fortunately, while I was at UAMS as the head of tech services, I had chaired the Regional Medical Library's Advisory Committee when the program was in Dallas at UT Southwestern, so at least I had a good in-depth knowledge of what the Regional Medical Library Program was. Otherwise, I just might not have even taken on this big a change in the job.

But, I just thought the National Library of Medicine did spectacular work and was one of the most wonderful libraries in the world. They did so many good things. And I thought, this program is connected to the National Library of Medicine. I knew some people at the National Library of Medicine because I had worked at the FDA, and so I thought, maybe I can do this.

At the time that I was at the FDA, Dick Lyders was the president of MLA, and he was the director of the Houston Academy of Medicine-Texas Medical Center [HAM-TMC] Library, which had just gotten the contract for the next five years of the RML Program [National Network of Libraries of Medicine]. Dick and I were serving on the MLA board together. I really liked him. I liked his style of management; I liked his personality; we had the same political views [laughter]. I really liked him.

F: He was a nice guy. He really was.

R: He was a very nice guy. So I thought, gosh, it might be nice working at the [HAM]-TMC Library, because he was the director. Since we knew each other, he was trying to convince me to come down there. Also, I had worked with [Dena Plaisted] here in Arkansas before I moved to the FDA. She had moved to Houston and was working in the library there. She was helping the HAM-TMC Library get set up for the RML Program, because she was the interlibrary loan person there. Coordinating interlibrary loan and [DOCLINE training] for the region was a big part of what the RML did at that time. Dena would call me and say, "We just really need you to come down here and work in Houston." Dick was calling, she was calling, and I thought, maybe this is just meant to be.

F: Because things were not great at the FDA.

R: Right. I needed to find a way out. I still had two more years on the MLA board, and I didn't want to have to pay for my trips to annual meetings. And I wanted to work in a place that had a much more professional environment. And, Houston was drivable from

Little Rock, and I thought, well, I can drive home and see my family. And I would be back in the South Central Chapter. I thought, even though it was very different from any other library job I had ever had, I thought, maybe I could do that. So, I said, okay.

That job required a lot of planning and allocation of resources. It required training of health professionals and health sciences librarians to utilize products and services produced by the National Library of Medicine. It required providing support for hospital librarians. And I had worked with the Area Health Education Centers librarians in Arkansas, which were in six hospital libraries in Arkansas. It required reaching out directly to health professionals and community-based organizations. My interest in public health was very useful. So I thought, well, this will be interesting; it'll be fun; it'll be a really important job to help support these other organizations and associations, as well as libraries. This was when the RML Program was making a major shift to a much more direct outreach component, not just to libraries, but to community-based organizations and directly to health professionals, so I thought this would be an exciting thing to do.

We pretty much kind of reinvented the RML Program after we got there. Dena Plaisted, who was the hospital librarian who was working in the Houston library—whom I had known before—was so excited about the project, too. She was such a go-getter and such an energetic person that, together, we just considered this was kind of like a mission in life to do this job. After everybody else had left, we would sit there another hour in the late afternoons talking about things we could do. It was such a good combination of personalities for us to work together on this project. It was just so exciting and interesting for us that we just loved it.

One of the things that our RML Program did, that the other RML Programs in the country did not do in the beginning of this shift to a much more active outreach component, was that when Dick Lyders and Kathy Hoffman and others were writing the proposal for this RML Program, they included outreach subcontracts to the fifteen Resource Libraries—the academic health sciences libraries—in our region. So not only were we going to be doing a lot of outreach, but those fifteen Resource Libraries were going to be doing a lot of outreach, which made a lot of sense, because they were the ones who were going to be providing ongoing services to those other libraries—the hospital libraries, the other health sciences libraries in their region—to the health professionals, and to the community-based organizations in their areas. So it really made a lot of sense to get more of that work done through the local libraries.

F: You cleverly co-opted them into the whole process.

R: Yes. It wasn't my idea; it was Dick and Kathy's, or somebody's, idea, not mine. But I thought it was a brilliant, brilliant idea. And it really worked well. They still have, I think, the outreach subcontracts with the Resource Libraries. That was an idea that was really a brilliant one that worked out very, very well.

F: It makes them so much more integral to achieving the goals.

R: Right. It just made sense all the way around.

One thing that was very different in this job from any regular library job I'd ever had was that I was required to do a lot of public speaking. I remember in college my freshman year, I hated speech class, which was required. And my twin sister and I were very different. We're fraternal twins, so we're not genetically alike in a lot of ways. We were in the same speech class. And she absolutely loved speech class. She would have the students just laughing up a storm. Before I had to give a speech, I would be in the restroom about to throw up. We didn't speak in high school. We sat at our desks and maybe answered a question once in a while, if we were lucky. But besides giving book reports, which were fairly easy for me, we didn't do public speaking, so I had never had to do it. I was terrified, like a lot of people are. Now, I had learned, over the years, before I went to Houston, that I had to do some public speaking and present papers at the South Central Chapter meetings and stuff like that, but I certainly never had to do as much public speaking as I had to do in this job. And it was such an important part of my job that I really had to sharpen my public speaking skills. But once I got in the flow, once you get used to it, and you know you're going to survive, it's a lot easier to do.

Also, in this job, I had to write a lot of reports and updates and articles to inform people about the program. Fortunately, I had taken a semester-long technical writing class when I became the head of tech services at UAMS, because I had to write reports then too, certainly not at the level that I did at the RML. But I had taken this technical, semester-long writing course at the University of Arkansas at Little Rock, because I felt like I needed to be more efficient in my writing. That course is the single most important college course I ever took in my whole, entire life. It changed my life. I had a little bit, I guess, of a propensity for technical writing, but I had never had any training in it, and we didn't write much in high school at my little, tiny high school. I didn't have to write a whole lot in college except in my sociology classes. I just kept thinking, this should be easier to do. I thought, maybe if I take a course in it, I'll be better at it. And technical writing really is something that I think can, in a lot of ways, be learned. It's not like creative writing, where you either have it or you don't. My sister has it and I don't.

F: Right. It's more of a skill that you can acquire.

R: Yes, it's a skill that you actually can acquire, just like public speaking, in a way. You can learn to be much better at public speaking and at technical writing. I can't tell you how glad I was that I had taken that course before I went to the RML. Because, between all the writing I had to do in my everyday job and then the reports we had to write for NLM, and then when they re-competed every five years for an RML—that proposal we had to send in was in a huge binder and was like 150 pages long. I don't think I could have survived that experience nearly as well as I did if I hadn't had that writing course.

So that was another thing that was very different about that job. And then it required a lot more travel than normal library jobs do. We were out on the road. We had five states to cover: Texas, Arkansas, Louisiana, Oklahoma, and New Mexico, which are pretty far-

flung. Texas is humongous. Texas alone is huge. I think we had the biggest RML geographic area; I think we did. It was just huge. And there wasn't much in between a lot of those towns that we went to visit. But, boy, we had to fly all over the place. So I learned to pack very efficiently when I was at the RML.

F: That's a useful skill, too.

R: Yes. And I learned my way through a lot of airports and had to find the best deals on airplane tickets and stuff, so that was really interesting.

Another thing that was very different about that job was that, when we weren't out on the road, we spent a lot of time in our offices planning activities and talking to people on the phone and trying to figure out what things needed to be done. It was not like a regular library job where you get to see your users. We would spend days in the basement of the Houston Academy of Medicine-Texas Medical Center Library without interacting with anybody else except our staff. We didn't even interact a lot with the other people in the library, because they were busy doing their jobs and we were down in the basement. So we didn't even see them passing by. That was really weird for me, because I loved talking to people who came into the library about what their needs were, and suddenly I was in this basement kind of isolated from the people that we were trying to serve. That was really a big adjustment for me. It was for Dena and the other staff as well. It was just very different for us.

I was fortunate in that job in that I had lived and worked in two of the Resource Libraries in the five states that we served. So that helped too, because I already knew a lot of those people.

F: Were there key individuals in the region that you worked with from your desk in Houston?

R: Well, the main people I worked with on a day-to-day basis were the staff: Dena Plaisted—the person I mentioned before, Renée Bougard, who's now in the National Network [Coordinating] Office at the National Library of Medicine, and Carrie Rogers, who was our administrative assistant. She was absolutely wonderful. She kept us all on track. She was so organized. She would order our plane tickets; she would make sure that we were prepared for every exhibit that we went to do; she packed all the exhibit cases. She didn't miss a thing. She could anticipate in advance what we needed. I didn't have to tell her stuff. By the time I would tell her something, she would already have half of it done. She was absolutely wonderful, too. I had a spectacular staff.

And then, of course, we developed a great working relationship with the people at the National Library of Medicine, especially Becky Lyon and Angela Ruffin in the Network Office. We reported to Dick Lyders as the head of the RML Program—because he was the director of the library that had the contract—but we worked a lot with Becky and Angela. We were so lucky to have two people who were so competent and so nice to work with in the Network Office. They were absolutely wonderful. And, of course,

Betsy Humphreys, too, was the [deputy] associate director [for library operations] of the library, so anytime anything had to go up above the Network Office, she was the person that they dealt with, so we got to know her, too.

And then the main people that we worked with in the region were the directors of the fifteen academic health sciences libraries, because they were the Resource Libraries, they had the outreach subcontracts, and so we worked with them a lot, because they were doing a lot of the work that we were responsible for under the program. It's like we were just subcontracting out the work to somebody else. But we were still responsible for it, so we worked a lot with them. And I loved working with the Resource Library directors. I already knew a lot of them before I went there, and two of them were my previous bosses [laughter]. We spent a lot of time working with them. And then, of course, we worked directly with hospital librarians, and eventually, some public library directors, because some of our outreach programs, especially the consumer health programs—

F: Began to touch publics as well.

R: Right, we started working with the public library directors too. And then we had several committees composed of librarians throughout the network libraries who advised us on the different programs. We had a hospital library committee, a consumer health committee, and an interlibrary loan committee, which was composed of staff from various libraries in the regions. We worked with them a lot too. Then we had an outreach committee, and each of the fifteen Resource Libraries, with their outreach subcontracts, had a designated person in their library who was their outreach contact to us, and so we had a committee of those fifteen—it was always, I think, a reference librarian. I think all of them had a reference librarian who was their outreach subcontract. We worked a lot with them too.

Dick Lyders was the official head of the RML Program, and so of course I worked with him a lot on a daily basis. We just saw outreach to health professionals and librarians as a mission. And we loved our jobs. It was like a calling, kind of, for us. It was a great job.

F: And I think it wasn't part of our recorded conversation, but you mentioned to me that one of the philosophies that Dick Lyders brought was that he was the director, but he hired smart people and would get out of their way. So I suspect he was a good resource to you in terms of problem solving and thinking and things, but I think he let you pretty much run things.

R: He pretty much did, and that was his philosophy, which I thought was a really interesting philosophy—because I had never worked for anybody who had that philosophy before, and I *liked* it. I tried to kind of adopt that as my philosophy when I became a library director—hire good people and then let them do their jobs. We, as directors, aren't experts on everything, and we hire people who are doing the day-to-day work, so they know more about the day-to-day work than we do. We can't possibly know more about it than they do. And so, hire good people and just get out of the way

and let them do their job. Of course, you have to check every once in a while to make sure everything is okay and that things are being accomplished, but most of the time you just need to stay out of the way. So that was a philosophy that I really appreciated learning from him. He was great.

F: One of the interesting things that you did while you were at the RML was to help advance disaster preparedness in the region. Talk about that a little bit, please, because I think that that was an interesting aspect of additional work that the RML picked up.

R: Well, it was interesting. NLM was becoming more interested in it at the time, so they saw a need for it and asked us to look for ways to help improve the disaster preparedness status of our libraries and of the health professionals and others who respond when there's a disaster.

Unfortunately, the South Central Region, which is the same region as our South Central Chapter of MLA—Texas, Arkansas, Louisiana, Oklahoma, and New Mexico—seemed to us to have a larger amount of natural and man-made disasters than a lot of other parts of the country, partly because we're in the middle of Tornado Alley. Tons of tornadoes. Oklahoma? They send them right over to Arkansas. And the South, our part of the country, just has the majority of the tornadoes.

And then, of *course*, the hurricanes that hit from Texas to Louisiana, which was the extent of our southern boundary. It just gets pummeled. And flooding—we have flooding along the Mississippi River in Arkansas and Louisiana, and then we have the flooding that hits all along the Gulf Coast whenever there's a hurricane or a lot of rain. That just wreaks havoc on the libraries and their services. So we have a lot of historical resources that could be destroyed in a flash.

F: Yes, very vulnerable.

R: Very vulnerable. And so that was one of the things we tried to address immediately: was how to help the libraries be better prepared for disasters that would affect their historical collections. And also, that would affect their ability to provide information services in the event of a disaster that would require a medical response. If there's a hurricane or a tornado, the health professionals, the medical corps, and all those other people who respond to natural disasters or man-made ones needed to be better prepared to respond to those. They needed quicker access to information. They didn't need the libraries to be out of commission in the middle of a disaster, because they needed to have access to the databases and to the librarians who were skilled in providing quick access to that information. We really looked at that as a two-pronged thing. One was to prepare the libraries to better preserve their historical resources, and to be able to provide services to the responders in a disaster.

The region also tends to have a lot of man-made—I guess you would call them—disasters. We have a lot of oil refineries in the southern part of the region, which can have explosions or spills and stuff. We have chemical spills out in the Gulf and all

around, a lot of agricultural problems. We have a lot of railroads and chemical spills from railroad derailments. So those disasters really require an organized response from the responders and then the libraries, too.

So NLM ramped up their development of databases that could respond to those natural and man-made disasters, and they wanted us to be able to promote those products and services out to the libraries and the health professionals. We did a lot of exhibits on the disaster preparedness resources. We provided training for health sciences librarians and health professionals on the databases and resources that were available from the National Library of Medicine to help them respond. We provided training to the hospital and academic librarians in the region, who would be responding to the first responders.

We also provided training and grants to help the libraries better protect their historical resources. We provided funding, and they would provide proposals for funding to scan historical resources in their collections, so that there would be a copy in another place. We had agreements between different libraries that they would support each other in a disaster.

I had an agreement with Marty Thompson, who was my big buddy at the University of Oklahoma Health Sciences Center library and who was one of my most influential and supportive colleagues in the region when I became a director. But anyway, we had an agreement later, when I was a director, that my library would do anything to help them that we could, and he would be my backup in case my library for some reason got wiped out in a tornado. We would support the people at the University of Oklahoma Health Sciences Center.

We tried a lot of different ways to make sure that there wouldn't be a big lack of support for the responders or the libraries that were having a natural disaster. Those were just some of the things that we did to try to respond to the disaster preparedness initiative that NLM had.

F: So the RML for that TALON [Texas, Arkansas, Louisiana, Oklahoma, New Mexico] region, I think, took a leadership role in demonstrating how to do disaster preparedness.

R: Yes, partly because we had had so much experience with natural disasters.

F: But I think it was also a key time, because libraries had had to function very independently prior to that, but the technology then allowed more remote service. So you could help Oklahoma if they needed it.

R: Right, that's a great point, because we could not have done a lot of those things ten years, or certainly not twenty years, before that, because we didn't have the technology that enabled us to do that. And the first responders didn't have the technology that would enable them to easily access them out of the library.

F: Online resources. Interesting times.

Then, in 1997, after six years in Houston, you returned here to the UAMS Library to become the director. And so you had done a couple of very interesting, very different jobs after leaving. So what was it like to come back to a frontline library after seven years in those other settings?

R: Well, it was certainly different. And in a way, it was a relief, because I really missed that more day-to-day interaction with a lot of people. But I really missed the RML Program. It was just such an interesting and exciting and unusual experience that it really was hard to walk away from that. But it was great to be back home. My parents were getting older, and my father passed away six months after I moved back. I couldn't believe it.

But it was great to be back in a regular academic health sciences library, where I could be a Resource Library and still do a lot of the things that the RML Program was doing, but I could have the regular library experience back, too. For me, it was a wonderful thing that I could come back to the library but still do a lot of that outreach stuff. And we would not here have been able to justify doing a lot of the outreach, because our budget was so limited without that support from the RML Program. We used to say, "It's only \$15,000 a year," but, golly, it helps you justify it to your administration. And you can do a lot of outreach in a state like Arkansas with \$15,000 a year.

And then they had those other funding programs. We could apply for more funding. We got a really high-end scanner, because we have some important and unique historical resources here as well, especially on the history of the health sciences in Arkansas. We're the archives for UAMS. And we had some unique Civil War medicine resources that were only available in a few parts of the country. I don't know how we ended up with those, but we had them, so we needed to protect them. We depended a lot on the RML Program when I was the director here to get funding for a lot of things that we needed to do that we would not have been able to do otherwise.

It was quite an adjustment to be back in an academic health sciences center. It had its own set of major challenges, but it was a good move for me at the time.

F: Were there particular challenges that you faced coming back with staff or institutional issues or information services?

R: I had mentioned that the technical services org chart was out of whack when I got here before. It was just so overloaded with people who were doing manual work that, when I came back, there were even more changes that needed to be made, because technology had advanced so much in that time period. It was such a critical period in the transition of libraries to an online environment. I still had work to do to make some of those transitions from technical services to more public services. But we needed to add more positions in reference, because there were so many things that we needed to be doing in reference. As a result, partly of the changes in technology and the changes in requirements from the NIH [National Institutes of Health], like the requirement to deposit

articles in PubMed Central within a year of publication [NIH Public Access Policy] that came along about ten years after I got back... There were a lot of changes that still needed to be made. We still had too many people in circulation and ILL, because the automation had so affected those two departments. We really had too many people in those two departments, because the automation had reduced a lot of their workload. We had to deal with those issues, too. When we needed to eliminate a position, we tried to move that person to another position in the library, and so that usually worked out pretty well for us, or we did it by attrition the first few years. So that was a challenge.

Another big challenge for me was that the administration at UAMS sometimes struggled, like I mentioned before, to fund the implementation of new technologies. That, of course, affected the budget that the library got. It was sometimes difficult for us in that transition to an online environment to have enough funding to have the technology we needed, and the additional training that we needed to provide the services we needed to do.

Of course, at the same time, not only was the technology changing, but the health care environment was changing so much that the academic institutions that depended on federal reimbursements for Medicare and Medicaid services—it was like the perfect storm for the academic health sciences centers, because at the same time that they were trying to automate and needed all this additional money to get to an automated environment, they were also experiencing cutbacks in reimbursements. The whole federal reimbursement system was getting so much more complex that that was much more expensive to administer. That really caused a strain on the budget, so it was difficult to get budget increases.

And at the same time, as we were automating to online journals and databases, our resources budget for journals and databases just got slammed by the increased cost of those online journals and databases. A lot of people in our institutions just assumed that since journals were going online that they would be a lot cheaper [laughter], that the subscriptions for them would be a lot cheaper. As one administrator told me one time, “Well, you know, those publishers aren’t having to publish print journals and mail them anymore. Surely it’s a lot cheaper to get them in an online environment.” I spent a lot of time trying to explain to various administrators along the way that, no, it’s even more expensive. That was an interesting challenge for us, and, needless to say, we had a lot of practice deciding what journals to cut and what few new ones we could pick up.

We had to cut costs in a lot of other ways, too, in order to make that transition to an online environment. And as you’re aware from having been in academic health sciences libraries for a long time, academic health centers are very complex environments and they’re also very political environments. They have many complicated issues to address. And the library is just one of the many challenges that they face. We had to work very hard to survive financially and still to be able to provide the services and resources that would keep us central to the mission of UAMS. So that was a huge challenge for us.

And, of course, space became an issue for a lot of academic health sciences libraries. As we became more automated, the administration saw the library as a place where they could rip out the stacks and take over that space for other things. I had to work very hard to keep the library's space before it was repurposed for other campus needs. It's not that we didn't want to give that space away, but we thought that we had needs and could provide services to the students that were just as important as adding more offices for some department or something. We fought for it not because we were territorial and didn't want to give up any space; we fought for it because we thought we should be providing resources in that space that were just as important, or more so, than adding more offices for somebody.

We managed to keep the library space by repurposing it ourselves to better meet the needs of the students, especially, and by introducing new services in those spaces, such as an Active Learning Center—which we had a discussion about this morning as we came into the library. Active learning was a big push from the Liaison Committee on Medical Education [LCME], which accredits the colleges of medicine in the country. They wanted the curriculum of the colleges of medicine to include more active learning experiences for the students. I was on the accreditation committee, and so I knew that that was one of the requirements that was coming up for us and that we had not done a lot since the last accreditation review to implement active learning activities. And I knew from my friends at Tulane that they were ahead of us in implementing active learning in their curriculum. People here were talking about it too. The administration knew that they needed to figure out a way to build an Active Learning Center or put one in existing space.

And so we were going, “Here we are, here we are!” We lobbied very hard to have the library be the space for the Active Learning Center, because we were afraid that if that and other student services went further away from the library, then we would become marginalized on the campus and that the students would not come here. They would be over in the new education building and wherever the Active Learning Center ended up, and we would see even less of them.

We already didn't see the faculty very much anymore, because they could get all their stuff online—which was great; that's the way we wanted it, because it made it much more efficient for them to do their research. Then we were saying, we need to focus on the students, for a while, more and see what we can do for them. We lobbied hard to get the Active Learning Center in the library, and they decided to put it here. It was a great thing, a great thing, to have the Active Learning Center in the library, because it brought the students in so much more—because they had to be there for those classes, so then they would just stay in the library.

We did rip out a lot of the stacks and put more study space there, because the students needed it. That was kind of a challenge for us with some of our administration, because a few of them didn't see the need for the library to be providing a lot of study space for the students—that they could study at home. And I informed them that when I was a student in the College of Public Health, I paid tuition and I expected to have a library to study

in—that a lot of people can’t study at home. That was an interesting little discussion that I had with a few people on campus. Unfortunately, they were very important people to the funding of the library.

The Active Learning Center was a big success. And then we had been providing writing support for some of the students, especially the ones in the College of Public Health, for several years, because some of the students would get to UAMS without having much writing experience. And we did have some foreign students in the College of Public Health whose first language was not English, and so they really struggled with writing. They struggled with proper citations. Partly for that reason, the library was kind of a logical place to help them with citations and just general formatting and things like that.

As the need to write became more and more of an issue for some of the colleges, they were sending more students to the library. And we thought, we’re really not giving them very much support, and they need a lot. They really need to learn how to write better. Their curriculums were so full already that we had talked to some of the colleges about maybe working up a class in conjunction with them, a writing class or something. But most of them just felt like they couldn’t afford the space in the curriculum for it, that they wanted us to be able to provide it for the students who needed it outside of the regular curriculum.

So, we established a Student Success Center which helps the students. It includes a Writing Center. We have staff in the Writing Center who are trained writers; they have degrees in writing. They help the students by reviewing drafts of their papers and making some general recommendations. They won’t rewrite anything. The students need to learn. But we see it as an educational process for them to review their papers and say, “You need to work on this section.” It needs to be more organized and clarified or something—just some general recommendations. We helped them find the right format depending on what the purpose of their writing was. And we helped with resumes, other things too that they need to do—letters for applications for residencies, even, and stuff like that. There are a lot of different writing needs they have that we address in the Writing Center. And then there’s an academic counselor who’s in the Student Success Center who tries to help students who are struggling with various aspects of their curriculum.

We were also early providers of support for the faculty, who were required by the National Institutes of Health—and I think the requirement went into place in [2008]—to deposit their published articles in PubMed Central within a year of publication. That was a big to-do on this campus because, number one—I think this was true around the country—a lot of the researchers saw this requirement as just one more thing that the federal bureaucracy was requiring them to do that they didn’t have time to do. They needed to be focusing on their research, and they were having to figure out how to use this manuscript submission system.

F: Which was not easy at the beginning.

R: Which was not easy in the beginning. And that reminds me—I was at, I think, an AAHSL [Association of Academic Health Sciences Libraries] Scholarly Communications [Committee] meeting, and I sat next to a guy from Harvard in the Countway Library. He said they were working with NLM on the manuscript submission system, trying to make it easier to use. And I went, “You *are*?” He said, “Yeah.” I said, “Boy, that’s great, because that really needs to be done.”

I still had a lot of contacts at NLM because I had worked in the RML, and so I just emailed one of them and said, “We would be glad to help. Our researchers might not be as well supported in this effort as the people at Harvard are, and if you want to experiment with an institution that might be different significantly from the one at Harvard, just let us know.” They were so excited. We worked with the people at [NLM including Ed Sequeira]. Gosh, they were so nice. We got in on the experiment with Harvard and Boston University, and there was one other school; I can’t remember who it was. And then my friend Julie [Sollenberger] at Rochester—I was telling her about it and how exciting it was to be working on this project, trying to improve the manuscript submission system. She said, “Well, I want to be in on that project, too!” She contacted NLM, and I think they got in on the project, too. But it was near the time that I was leaving when we were working on that.

We had to spend a huge amount of time and effort with the researchers trying to help them figure out how to do that. We told them, there are different ways you can handle it. You can have one person in your department. We met with a lot of the different departments individually and said, you can have one person in your department be trained to submit the articles for everybody in your department, although the actual PI on the grant has to be the one who approves the submission and hits the button. But somebody else can do—

F: Do all the background work.

R: —the background work before they hit the submit button. So, they chose different ways to do it in different departments. Susan Steelman in the library in the reference department here was very involved in that. She and I started doing it in the beginning, and then she took the main responsibility for it; she worked a lot on it. Then we had to put another reference librarian on the project, too, because we had such a backlog of articles that had to be submitted within a certain period of time, or those researchers would be blocked from applying for future funding. We had to get that backlog taken care of pretty quickly. So that was an interesting challenge for us.

F: It was a huge challenge for everybody. So much resistance from researchers, as you said, who already felt overburdened.

R: Right. And I would disclose at the beginning of every presentation to a department or to a group of people here that I supported open access publishing. I had been a supporter of it for several years, and I thought they needed to know that. I would explain the reasons why I thought open access publishing was so important and why I thought

making those articles available, even within a year of publication—which is what NIH was trying to do—it was very, very important to have that information available within a year of publication. I still remember a few meetings were pretty—the researchers would get so upset that—I came out of one meeting of one department, which shall remain nameless, and somebody I knew out in the hallway said, “Well, what was that yelling about?” Because this one guy was so upset. He just went on this tirade about how the government and NIH were just adding so much burden to them that it was just awful. It was pretty tricky there for a while to stay sane in the middle of the chaos.

F: Yes. It was one of those typical early technology situations, where, if the system to upload had been better designed and better functional to begin with, but when it was so difficult and people already felt so overburdened, there was huge resistance.

R: Yes. It really was complicated to use in the beginning when we got in on the project to try and improve it. It was a lot better within a short period of time. Those people at [NLM] were working really hard, and we were working hard to give them feedback on it, too. They were great. Those guys who were working on it were under the gun, too, and they were very determined to get it fixed as quickly as possible. They were wonderful to work with; we really enjoyed those people up there. I wish I could remember their names so I could mention them. I can see them, but I just can’t remember their names. But anyway, it was an interesting challenge. There were a lot of challenges to deal with.

F: A lot of challenges when you came back.

R: The biggest challenge was to figure out how much time to spend on each challenge, because we only had a limited number of hours in the day, and we had to figure out what were the most important things to work on.

F: Were there changes in the role of directors from what you had observed as an assistant director to when you came back and actually stepped into the job of the director?

R: Well, that’s an interesting question, because that’s kind of like, the grass is always greener on the other side. I just remember when I became a director, thinking back to when I was an assistant director, and I thought, gosh, life was so much simpler then. And maybe it wasn’t, but it surely did seem like it to me when I became a director and things were so much more complicated, because we were transitioning to an online environment. When I first came to UAMS as an assistant director, things were so traditional. We basically knew what our day was going to be like, and we came and we just did those routine things that we had done for many years, and did them the same way we’d done them for many years. But when I came back, it was in the middle of this stunning transformation of libraries.

F: On many levels.

R: On many, many levels—every level. It was a stunning transformation for researchers and students and everybody else who was trying to incorporate all this technology, too,

that it just seemed like it was a totally different world from what my previous boss, as the director of the library, had to go through. I remember thinking, gosh, she had it made in the shade. I'm sure she didn't. I didn't know everything she went through. And she did have budget struggles like I did, but for different reasons. It was before automation.

F: It seemed to me that directors for many, many years had three primary issues they dealt with repeatedly: budget, personnel, and inflation in serial subscriptions. And when you and I became directors, there were suddenly a whole host of other in-transition kinds of things that heaped up on our desks. And as you say, it was a challenge to figure out, how do I allocate my time amongst these.

R: Yes. And it wasn't just that—I don't want to make it sound like automation was the big, bad [bugbear] of the whole thing. It wasn't just that. But it was these huge changes in the whole health care environment that were just—like I said, it was the perfect storm. It was such a chaotic time for our institutions.

And the big changes in education because of technology and other things. As more and more knowledge got generated, students had to learn more and more, and it was just like, all of these things, there were so many complex issues that just came together, crashed into each other at the same time, causing it to be a huge, chaotic, swirling storm of issues that had to be dealt with.

I still remember my friend, Chuck Winter, who I had mentioned before, who was so supportive to the library in the '80s when we were first looking at integrated library systems—he was on the search committee for the directorship when I was hired, and so he talked to me, interviewed me before the search committee made their decision. He interviewed me individually. He said, “Are you really sure you want to take this on? It's an enormous task and a very complicated environment that's getting more complicated by the minute. Are you sure you want to do this?” And then he would come in periodically after I was here and say, “Well, how's it going? Was I right?” “Yes.” “I told you, didn't I? I told you so.” And he was right. He was very right.

F: As director, one of the things you did concentrate on was advancing consumer health information access and outreach, especially within Arkansas.

R: Yes. Well, this was an interest to me, partly because of my interest in public health. There were a lot of reasons why. It's not that I came up with the idea. NLM had a big push for consumer health information too. But, boy, I jumped right on the bandwagon, because I knew that Arkansas was one of the least healthy states in the nation—and still is, for a lot of reasons. I guess somebody has to be at the bottom, but golly, why does it always have to be us? When it comes to health, all the major indicators were like forty-eighth, and so I knew there was this big need for informing people.

On a personal level, I had some health issues in my twenties and had to have major surgery, and I remember asking the doctor before my surgery what was going to happen: what was the procedure going to be like and what could I expect afterwards? And he

couldn't, or didn't, really explain it to me, and neither did the nurses. So I just thought, well, that's really stupid. How can we know what to expect and really even know how to make the decision to go through it?

F: And there was no patient information.

R: There was no patient information. I actually asked, "Do you have a video or something I can look at on this procedure?" It was a hysterectomy at thirty-one. I wanted to know before I did it whether or not I wanted to do it. But I really had to, because I had endometriosis. I was just so appalled that there was so little information available. And I worked in a health sciences library, and I came back here and couldn't find very much on it. So I went to the bookstore—a bookstore—to try to find stuff on it. Nothing there. And I thought, well, this is pretty stupid. On a personal level, I just had this concern about it too.

When I came back here to Arkansas as the director, I already knew the two public library directors in Little Rock and North Little Rock—and one of them had worked at UAMS in the library before, and the other one had lived down the street from me when I lived here before. I thought, there's this push from NLM to start providing more consumer health information to the public, and we could probably get some funding to help us set up a network or something of the public libraries—because they're the ones who get the questions first from most people about health issues.

People were starting to use the Internet to get health information, too, but there was a lot of not-too-reliable health information out there. It was kind of in the beginning of, where do we go to find information, especially when it's going online, too.

We had this big meeting with community-based organizations and the public library directors and public health people to talk about how we could provide better health information for the public. We set up this network [Arkansas Consumer Health Information Network (ARCHIN)], and we had an advisory committee that had people from the [Arkansas Department of Health] and the Cooperative Extension Service at University of Arkansas because they... The county extension agents—I knew this because I read my hometown weekly newspaper once a week. I still got the Walnut Ridge paper. They would have articles on health issues from the Cooperative Extension Service, which was interesting. I thought, where did they get this information from, because they didn't cite at the bottom where they got their information—because they weren't librarians. So we had this really broad assortment of people who got together to try to improve their services to the public to provide health information.

We did workshops around the state, and NLM was developing MedlinePlus and other resources, so we shared those with the group. And then we applied for some funding from NLM—and we called it ARHealthLINK, which was our [website] in the state. We did a MedlinePlus project. We worked on that for several years, and we worked with the health department—they were one of the main people we worked with—on a website that the public could go to, and the public libraries and others would lead users to the website

to find good sources of information. And they could find out where all the county health units were. Arkansas has seventy-five counties, and every one of them has a health unit run by the health department. All kinds of information like that was in this database, where they could see where they could go to get resources as well as information. They could get their flu and other shots in the health department unit and things like that.

We worked on that for, gosh, close to ten years, I guess. And then, as more and more information became available online through the Internet, people got laptops and tablets and cell phones, and so they started using those online resources, either directly or went to other sites like WebMD.com. People started going to these resources. We saw the usage of our website start to fall away as the technology advanced and resources became more readily available from other sources. Then, NLM decided to stop the development of MedlinePlus, because they were seeing the usage drop dramatically too. When they decided to stop that, then we decided to stop working on our website as well, since the use of it was going down too. But I think they served a purpose at a significant period of time.

F: When there was nothing else.

R: When there was nothing else. But we had to see the handwriting on the wall and look at the usage, and then we had to change as well and focus our resources on other services that would potentially be more useful.

F: The library business has become much more changeable.

R: Yes. We used to say a lot in the library, “We’re dancing as fast as we can.” We were changing as quickly as we could foresee a need for it, and so, as we used to say, “We have to be ever vigilant.” We had to constantly be scanning the environment and seeing what was coming at us, and what the needs and resources were, and determining how to shift things around.

F: Right. And I think that’s one of the difficulties for library directors: to not only figure out how to allocate their time amongst different things, but to see what are the cycles of sunrise and sunset, and when do you need to sunset some products and services.

R: Yes. And for one that you had such an interest in and spent years developing, it was hard. It was hard to give up that website, but we just had to do it, and to move on.

F: So, speaking of moving on...

R: I gave you that little segue, didn’t I?

F: That was a perfect lead-in. After those many years of supporting the university, you began a well-deserved retirement—December of 2014. You’ve always been very generous with your time and talents. Your vita lists a long series of working groups. You contributed all over the medical center here. Tell me about any of the more

memorable committees or other working groups you contributed to within the medical center or across the university as a whole.

R: There were a lot of them. Golly, this was a busy place. Boy, am I glad I don't have to go to all those meetings anymore. One of the most important committees that I served on the whole time I was here was the Academic Computing Advisory Committee. This was a committee of people from IT. It was run by a person in IT. It had representatives from all the major academic units—one from each college and the library and academic services, and all the units that dealt directly with education. We met every two weeks and addressed issues related to the implementation and support of technology throughout all of the educational units on campus. That was such an important committee for this campus, because we really tried hard to maximize the resources that the campus as a whole had. We tried not to compete with each other for resources, but to cooperate with each other to make the best use of the resources that we had. That was really an important committee—and for a long time it provided free lunch, so it was really nice, because we had to meet at lunch and we got a free lunch while we were there. But it was a great committee, and it really helped all of the people on the committee to know about the needs of the other units so well. We learned so much more about the curriculum of the different colleges that we would not have known otherwise. To me, it was one of the most important committees on campus. It was just a great committee that was very productive and very useful, so that was great. I didn't feel like we ever wasted our time in all those committee meetings.

And then a temporary committee that I served on, which was very important, was the LCME accreditation committee. As you know, every [eight] years, colleges of medicine have to be reaccredited by the Liaison Committee on Medical Education in order to grant MD degrees. If you don't get reaccredited, you have to shut down.

F: It's a big deal.

R: It's a really big deal. And people get really antsy about their accreditation visits. All of the other educational units have to be accredited, too, but the LCME one was just so much in the forefront for a long time here, because the colleges of medicine were struggling to keep up with the very stringent requirements that the LCME had for the curriculum.

The committee was in the accreditation process. The committee was responsible for doing this big self-study of the College of Medicine—of its curriculum, of the resources that were provided for students, including not only the library but financial services, mental health counseling, all kinds of services that were provided for students. This was a huge and very complicated committee because it had all these subcommittees—one on resources, one on the curriculum, one on counseling and financial aid. It was a very complex committee, which required a lot of organization on the part of the poor person who got stuck with coordinating it all, which, fortunately, was somebody in the College of Medicine.

I somehow got roped into chairing one of the five major subcommittees [Educational Resources Committee] of the LCME accreditation committee. Oh, my gosh. I kept saying, “I’m so busy. I don’t want to do that.” And I knew it was a very political thing, too, because you don’t want to say a lot of bad things in this report, even if you think... It’s kind of an ethical dilemma, in a way, to do your own self-study.

F: How honest do you need to be?

R: Yes, how much do you really need to tell them? I don’t know; maybe because I was raised Catholic and got used to going to confession as a child, I just felt like... There weren’t a lot of bad things to confess, but I had a different opinion about how candid we needed to be, compared to a few other people on the committee. We would have these long, involved discussions about, okay, have we answered the question adequately or do we need to tell them this other stuff, too? And where do you draw the line between making your institution look really good—and I’m sure committees all over the country struggle with this every time they’re doing their own self-study. You want to put your best foot forward, but then you struggle with how many things to confess that they might not really have to know about. That to me was a humongous challenge on that committee. Plus, we had to generate so much information. We had to do surveys of the students and surveys of the faculty and all these other things, and you generate so much information that you have to be extremely well organized in order to do that and put the report together. It was just a huge amount of time and effort. I would never want to go through that experience again, because it was just huge.

F: Especially for medicine. It’s very complex and very political.

R: Yes. And it’s very expensive to run a school of medicine. We’re the only medical school in Arkansas—well, we were at the time. There’s an osteopathic school now that’s being established. But it was extremely important to the whole state of Arkansas that this College of Medicine not lose its accreditation. It wasn’t in any imminent danger of losing it, but I think one of the main things that we struggled with was the active learning requirement in the curriculum. That’s why we established the Active Learning Center as quickly as we did, because we had that review coming up—staring at us in the face—so we didn’t have very long to get that thing ready in order to meet the requirements.

F: To demonstrate compliance.

R: To demonstrate compliance, yes. It was a pretty wild and woolly time here. It was pretty chaotic for months. But we survived it, got a good review [2015], and I think we have a good College of Medicine here. But it’s a constant struggle to keep it good as things change and budgets wax and wane, and the external environment changes like crazy. It was a good experience, but I wouldn’t want to ever do that again—never, ever, ever.

Probably the most enjoyable committee that I served on was the UAMS Arts Council. We had gotten a new chancellor, and he and his wife [Lana Rahn] came from an

institution where she had been very active in the arts council on that campus, so she wanted to establish an arts council here. The library had had this big exhibit backdrop for years, and we had photograph exhibits and watercolors and all kinds of art exhibits on this big backdrop that had been funded by the head of the psychiatry department, who was very interested in art. Since we had been one of the main providers of art at UAMS, I got asked to be on the Arts Council when it was being established.

It was so much fun. I learned so much, because it was just so different from anything else I had to do. Selecting art for the hospital... We had a brand-new hospital, a huge, new hospital, and we needed artwork for it. That was one of the first projects we worked on. We got some funding, a couple of hundred thousand dollars, to start buying some artwork for the hospital and the other public areas at UAMS. What I learned was, there's a whole body of literature about what kind of artwork is appropriate in a health care setting, where people may be very emotional. They're dealing with life-threatening issues. There are types of artwork that you want to have in a health care setting that are very soothing and not disturbing. You want to have things like landscapes that are very calming.

F: Provocative art is not appropriate.

R: You do not want to have provocative art. You don't want to have things that have fire in them or anything that would cause people some kind of distress, anything that they might interpret or misinterpret as something very dangerous or something. That was just fascinating to me, because I had never thought about that. It was really interesting to choose the artwork, because we would sit in these meetings and look at all these different works of art, mainly by Arkansas [artists]. When we got funding for the hospital, a foundation provided money for some artwork in the hospital, so some of it had already been selected. And they bought from artists around the country. So we thought, well, okay, there's enough artwork by people outside of Arkansas. We want to focus our efforts on artwork mainly from Arkansas artists. We looked at so many beautiful works of art. Oh, my gosh, it was incredible. It was really hard to decide which ones to get because, of course, we had a limited budget. We got funding several more times to finish different floors of the hospital. That was a whole lot of fun.

Besides selecting the artwork for the hospital, we organized exhibits, not just for the one in the library. We folded the library under that one, too, because there was always a representative from the library on the Arts Council who could coordinate the library exhibits. But we started other exhibits throughout the campus, other places where we could have an art exhibit. There's one in the main lobby of the old hospital building. And then we purchased some artwork for other outside spaces on campus. That was a lot of fun.

And then, near the end, we even ventured into the performing arts. We really felt like we were moving along there. Well, let's go to the performing arts. And this was funny, because we started sponsoring an event three or four times a year. It was kind of like a talent show, and different people on campus would perform. The students would perform. We would put out this call for acts. Who wants to perform in the next Arts of

UAMS talent show? We were amazed at how many talented people there were on this campus and where they came from. Some of the students were so musically talented. They could sing; some of them could dance. They would choreograph their own—there was a budding choreographer in the College of Medicine group. She was a great dancer, too. And she would choreograph these different shows with some of the students who were dancers. They could sing and play musical instruments. It was incredible. We had a grand piano over in the performance hall, we called it—a big room over in the new hospital. We renovated it so it would be acoustically correct. And people from physical plant would perform who were so talented, you would think, golly, where did these people learn to be so talented? Because it wasn't their education or their job; it was just that there were so many talented people in places where you just didn't expect to find people who were so naturally gifted that they could perform without having had a lot of training. It was amazing. But then, of course, we had people who played in the Arkansas Symphony, because the Arkansas Symphony is not a full-time job. We had several musicians from the symphony. One of them studied at Juilliard—at least one of them did—and they would perform, too. It was just such an interesting mix of people from different parts of the campus that it was a lot of fun, and people looked forward to it. And sometimes they were funny. It was a really fun experience. That was my fun committee.

F: Okay. That sounds like a very fun committee. What feels the most rewarding to you, in summary, from all the years that you've spent here at UAMS?

R: That's a really hard question. It really is, because there were a lot of rewarding things, as well as frustrating things, and it's hard to choose. But I think it probably would be that we had a library—faculty and staff—who were able to do their jobs well in the ever-changing and sometimes very challenging environment that we lived through, and that the library survived, and sometimes even thrived, in spite of the challenging environment. I think the library was considered important to the various entities on campus. I think we were considered important, not just because we were required for accreditation, but because we provided services that were strongly needed. And I think we played an especially strong role in the educational mission of UAMS. I think that was probably what was the most rewarding to me—that we had a great staff that provided really good services that were central to the mission of UAMS.

F: And what lies ahead for you in retirement? I know that you've embarked on more travel, you're coauthoring a book on a family of physicians, and you're spending more time with your extended family, because you do have a large family.

R: Yes. Well, more travel has been a big part of my retirement activities. I'm trying to travel while I'm physically able to really enjoy it. I'm trying to see all of the continents and, after this year, I'll have one to go. Haven't been to Australia yet. I'm trying to see at least a hundred foreign countries, so I still have about twenty to go there. And all fifty states, and I still have about five to go there, because I haven't been to Big Sky Country yet—to Montana and Wyoming and North Dakota, South Dakota, and Idaho.

I'm also spending a lot more time with my extended family, as you mentioned. I have seven surviving siblings. My older brother just passed away a few months ago. I have nineteen nieces and nephews whom I adore, and almost all of them live in Arkansas. I feel like I didn't have a very good work-life balance when I was working. I tended to be a workaholic. I feel like, in a way, I'm trying to make up for some lost time with family and fun, because I didn't do as much of it as I probably should have when I was working.

And as you mentioned, a very time-consuming project that I've been working on almost ever since I retired three years ago is a book about six physicians in my fiancé's family. He was showing me all this stuff that he had on his family. He had been doing genealogy research on his family for over forty years. He had accumulated all of these resources from different branches of his family, like scrapbooks, and a collection of 150 letters that were written during the late 1800s, and all kinds of resources—diaries by one of the physicians who practiced in Little Rock. He had this huge amount of resources. I have practically nothing in my family on my family history. Either they didn't write letters or they didn't save them, or they didn't do diaries and scrapbooks and save newspaper articles about their family. I have practically nothing, and he has this huge amount of resources, and I was just blown over.

I said, "Golly, there's so much stuff here, we could write a book on this family." There were six physicians in a direct line in this family, and so I said, "We could write a book focusing on these six physicians, and it could be a history of medicine book," because I was so interested in history of medicine from my experience at Tulane and here, with the Historical Research Center. And I said, "We could write this book about these six physicians, and it could be a look at the evolution of medical education and health care through the lives of these six physicians."

F: Mm-hmm. Through one family.

R: Yes, through one family over a 170-year period. It seemed like a good idea at the time. Of course, I'd never written a full-blown, scholarly book, and I had no idea how much time, effort, and money it would take to do all this research to write this manuscript. But, naively, my fiancé and I prepared this proposal for the [University of Arkansas] Press...

The way I met my fiancé was that he and his cousin came to meet with me, one day several years before I retired, to talk about how to get a book published, because they were writing a book on one of their cousins in another branch of the family—one of their great-great-great grandfathers in another branch of the family who had practiced medicine in northwest Arkansas for most of his career [Wilson R. Bachelor, 1827-1903]. He had left behind a treasure trove of stuff. He was like a Renaissance man. He was a physician, he was a philosopher, he wrote all these articles for the local newspapers on politics and women's rights. He was very progressive for his time. He was a free thinker, so he would write articles about religion and things like this. Left diaries. He was a musician. He was just really this amazing man.

The U of A Press had just published that book [*Fiat Flux*]. I'd put them in touch with U of A Press, because they had contacted some people and weren't sure... They contacted a foundation here in Little Rock that publishes things, and they had done an initial inquiry with the U of A Press, but their proposal wasn't far enough along, so it got turned down. So I worked with them to get this book published by the U of A Press. And it was published by the press. It was very successful, especially for a university press book. They normally don't have a huge audience, because they're scholarly and pretty narrow in scope, but this book did very well. We had this big book signing at the library.

That was one of the reasons why I so easily came up with this idea to approach the U of A Press again about publishing a book on these six physicians. From the stuff I initially looked at, it looked like they had very interesting lives, and there were so many primary resources there that it was just a treasure trove for somebody. It was just waiting for somebody to come along and say, "Write my story."

Bill [Russell] and I drafted this original proposal. And then his cousin, who had written the other book along with Bill, said, "Well, I'll be glad to help with this project, too." He's a good writer, and he was already a known author to the U of A Press. So we said, "Hmm, well, this might help us get this proposal approved much more quickly if he's one of the coauthors." And it worked. They said, "Yeah, take it and run with it." We signed an agreement in late 2014 or early 2015, and here we are. Let's see, it's 2018. Oh, my gosh, we thought it would take us about a year or two.

Bill and I ran all over half of the country doing research, gathering even more letters, more pictures, more information from the surviving relatives of these six physicians. We've sent the initial manuscript to the U of A Press. We already know it's too long, so we're going to have to rewrite, which is sometimes harder than writing. But at least we're making progress. We hope to have it published either by the end of the year or early next year.

After the book is published, hopefully I can have a life again. I hope to do volunteer work in the UAMS Library's Historical Research Center processing the backlog of archives. They already have two volunteers who used to work in the library who are processing archives, but they still need more help to get rid of the backlog. Then I'll hopefully help them with other projects, as needed. They're already waiting for me to come and help.

Then I might volunteer either at the public library, because I'm in the Friends group for the public library and they're always asking for volunteers, especially for the big book sale three times a year. I love their book sale. It's one of my major, little events of the year that I do just for myself. I just go and I just buy a ton of books. And then I've thought about the Humane Society, too, because I love dogs and cats, but I don't know. I'll have to decide that, I guess, after the book gets done, because we still have a lot to do.

F: Yes, you do, and lots of opportunities. Should we take a break here before we jump into MLA?

[WAV File #2]

F: We are back after a short break. This is a continuation of the MLA Oral History interview with Mary L. Ryan on March 2, 2018. Mary, turning to involvement in professional service, when and how did you become involved with library organizations?

R: Well, when I first started working at Tulane in the 1970s, I became involved with the South Central Chapter [SCC] of the Medical Library Association. I did a little bit with the Louisiana Library Association, but not very much because I thought that the medical library chapter would be more useful for me. The director, Bill Postell, who was my biggest early mentor, encouraged all of the librarians in the library to be professionally active, and he funded us to attend SCC meetings whenever possible.

We loved the South Central Chapter of MLA. It has great meetings full of CE and speakers and exhibits and parties, and it was just a great group of people. It had a lot of committees, which were active in planning activities for the association. It was a really good place to learn leadership skills and learn how organizations work, and it helped us all build a network of SCC members in other libraries who did the same jobs that we did that we could communicate with. We knew we could contact our colleagues in the other libraries whenever we needed help to answer questions and share ideas. So that's how I got started. It was a great experience. I was lucky to be in a region that has such a good chapter.

F: And then how did you first make the transition out of the South Central Chapter into MLA activities?

R: I was trying to remember exactly how I made the transition. I learned about MLA because Bill Postell's father had been president of MLA, and he would regale us with these stories in the library about how he used to ride the train to the MLA meetings, and that he was president and how much he enjoyed it and got out of it and learned from it. That was how I first learned that MLA even existed.

And then, of course, we got copies of the *Bulletin of the Medical Library Association* in the library, and since I was the serials librarian, I was the first person to get my hands on it. I would read all the stuff in the *Bulletin*. Then later, I'd read the *MLA News* when that was available.

I was lucky that I started attending MLA meetings even before I got out of library school. The 1975 meeting was in Cleveland, and so for some reason, the other people in the library, who normally would have been expected to go to the meetings—and we had to kind of take turns—but the ones who were professional librarians who had been there for a while normally went. But for some reason that year, none of them could go. So Bill Postell asked me and Cindy Goldstein—and I forgot who else went to that and who normally didn't go—if we wanted to go to Cleveland to the Medical Library Association meeting.

F: Beautiful Cleveland.

R: And we said, “Okay, we’ll go.” It was so funny, because we weren’t used to having our meals paid for by somebody else. I remember when we first got there, we went, “Golly, we can order food, and Tulane’s going to pay for it.” That was such a funny thing for us, because we’d never done that before. But anyway, so we went to the first meeting in Cleveland, and after that we were hooked. We just thought, wow, there was so much to do. So that was really interesting.

F: Tell me about some of the memorable committees and task forces that you served on as you became involved in MLA.

R: Oh, gosh, I think I started in bylaws or something like that, because it was easy to get on the Bylaws Committees. A lot of people didn’t like bylaws. But being a tech services obsessive-compulsive person, I thought bylaws would be okay to start with. I think I started with the bylaws, and then I got on the Murray Gottlieb Prize Jury [renamed Erich Meyerhoff Prize in 2016]. I think they chose me because I had won the award in ’78 for a paper I wrote on the historical [journal] resources in the library at Tulane. I really enjoyed that, because I got to read the historical papers that people had written and vote for the one that I thought was the best. I learned a lot from reading the papers, and I thought that was a fun committee. So that’s how I got started early on.

I was just lucky that I kind of fell into some of the big committees pretty early on, or some big opportunities. I was on Chapter Council, because I was chosen from my chapter to be a representative on Chapter Council. And I happened to get to the first meeting early [laughter]. The chair of Chapter Council came in—I think it was Madeline Taylor—gosh, that was a long time ago—and she said, “Oh, you’re the first one here,” and I went, “Yes, I guess so.” And she said, “Well, do you want to be the secretary?” and I went, “What?” And she said, “Do you want to be the secretary?” I said, “Oh, sure.”

Anyway, I loved being on Chapter Council. This is in the early days when the Chapter and Section Councils were first—brand-new, and I think only one—it had either been in existence... I guess three years. [Editor’s note: The Chapter Council was established in 1980 and first met in 1981; Ryan served as secretary 1984/87.] It was still really in the formative stages. We were trying to figure out what things Chapter Council should and could be doing. So that was really interesting.

I was active in the Technical Services Section—which, you were, too. Then I got on Section Council as the representative from the Technical Services Section. And then I was elected chair of Section Council. Those were really pretty early on, pretty interesting and formative experiences for me with MLA, because I learned so much about all of the sections; I learned so much about all of the chapters, being on the Chapter Council, too. It was really a good experience for me, and I think they did some good work. And it was interesting to watch the councils evolve over the years after that, too.

F: And being chair of one of the councils was a lot of work.

R: Yes, it was a huge amount of work. I remember thinking, what was I thinking, because I just had no idea it would be so much work. It was crazy. But it was a good experience.

And then one of my favorite committee assignments—this is the fun one—was the MLA Centennial Coordinating Committee. I think June Fulton was the chair of that one. We just had so much fun on that committee, planning activities to celebrate the hundredth anniversary of MLA [in 1998]. I actually learned a lot about MLA history in that committee that I didn't really know much about before.

F: Sure. That would feed directly into your history interests.

R: Yes. So it was perfect; it was great. I was really lucky that these things kept popping up that were related to the interests that I already had.

F: Exactly. Your colleagues enthusiastically elected you to serve on two different Nominating Committees over the years, and to the Board of Directors, both from 1990 to 1993 and 2007 to 2010. Who was on the board with you in those periods and who were the executive directors of MLA?

R: Well, there were some great people on these boards. It was really a great experience. I became a member of the board from 1990 to 1993 when I was elected chair of Section Council.

F: So even more work besides being chair.

R: Yes. It was like a double whammy. You had to have the Section Council meetings at MLA; you had to have the board meetings at MLA. I just thought, well, I'm committing to too much stuff here, because I have a job to do. But it was a great experience. Being on the board was an educational and rewarding experience, and I loved meeting so many people who were leaders in MLA at the time.

I was just in awe of some of these people, because I'd seen them kind of from afar, and then, poof, I'm on the board with people like Dick Lyders and Jo Anne Boorkman. Jackie Bastille—she was a hoot. Karen Brewer, Kathy Hoffman, Michael Homan, Carol Jenkins. Rosanne Labree; gosh, I really liked her. Henry Lemkau, he was a funny guy. Fran Bischoff, who was really a neat person. Wayne Peay. I loved Wayne. He was so outspoken. I thought, gosh, I wish I could be more like that. He just told it like it was. Carolyn Reid and Dan Richards, who was a great cook and he only talked about food. I'm a foodie, too. Fred Roper, who I just thought was great. And Frieda Weise and Sandy Wood and Joan Zenan. [Editor's note: In the few cases above where the term of office did not directly overlap with Ryan's 1990/93 term, this is likely due to the practice of incoming members attending board meetings.]

And then, of course, my dear friends, Jacque Doyle and Julie Sollenberger. We met when we started serving together on the board, and we started rooming together at board meetings. And then we thought, well, we'll just room together at MLA, too, because we all had limited budgets in our libraries. We roomed three in a room at MLA meetings until Jacque retired. It just started a lifelong friendship that we still have today. I have the Board of Directors experience to thank for that, because they've been great friends.

Ray Palmer was the executive director of MLA when I started on the board, but he resigned—I think it was within the first year, probably, that I was there on the board. [Editor's note: Palmer was executive director, 1982-1991.] Then we had to choose a new executive director. Dick Lyders was the president, and by then I had moved to Houston, so I got to work with him on the search committee for the new executive director. We selected Carla Funk, which I think was a great choice.

F: Great choice.

R: She turned out to be a long-lasting and very, very good executive director. [Editor's note: Funk was executive director, 1992-2015.] She was still the executive director when I served on the board again in 2007 through 2010, and she was a great help to me when I was president [2008/09]. I could not have done that job without her help. She was so easy to work with, and she anticipated what I needed to do and what I would need in order to do something. She was great.

The other members of the board during 2007 to 2010 included Jane Blumenthal from Michigan, Margaret Bandy. Judy Burnham, fellow Southerner; love her accent. Gary Freiburger. Mark Funk, who was the clown of the board at that time. He was always doing funny things. He was a hoot. And Julia Kochi, Beverly Murphy. T. Scott Plutchak, who was kind of the cerebral thinker of the bunch.

F: Philosopher.

R: Yes, the philosopher. And Paula Raimondo; I loved her spirit. Connie Schardt, who kept us all in line technology-wise; she was great. Laurie Thompson and Linda Walton, Kathleen McKibbin, Tovah Reis. We had a good bunch of people. It was a lot of fun to work with all those people.

F: Were there particular noteworthy aspects of serving on the board?

R: Well, I learned a lot about the complexities of an organization like MLA that helped me to better understand *my* job in the RML Program and prepared me for organizing and working with the Regional Medical Library board of advisors—that we had in Houston—and with committees and boards in my job at UAMS. Because the MLA board is a very active and complicated unit that deals with a lot of challenging issues, so it was quite a revelation and learning experience for me.

Back then, the board members also received public relations and media training. I think they wiped that out of the budget one year... It was an expensive thing to provide that training for us. But that training really helped me a lot to be a better speaker and to choose very carefully what I say. Because when you're interviewed by the press or somebody for an article, you're lucky if they get what you say right. You really want to get that part right, because sometimes they kind of mix things up and say things that you said that you really didn't say. That was an interesting experience.

And then I think probably the most beneficial aspect of serving on the board was to get to know other board members so well and to learn from them. We would break from a meeting and then have these casual conversations in the bathroom or the hallway about something that was going on in our library, and we just learned all kinds of stuff from each other just in those casual conversations and at dinner and stuff. That board experience was really very educational.

F: I always think when you're involved in something like MLA, you get back so much more. It's not just giving to the association.

R: Yes, you really do. It's such a good learning experience.

F: What do you feel were your major contributions as a board member?

R: Oh, gosh. Well, I like to do my homework, so I usually was very organized and well prepared. I had worked in a private academic health sciences center, in a public academic health sciences center. I had worked with hospital librarians closely in Arkansas, and I had worked in a government agency library before I served on the MLA board my first time. A lot of people on the board had been in their jobs at the same place. So I think I brought a breadth of experience to the board that was a little bit unusual.

F: A broader perspective.

R: Because I moved around quite a bit in the beginning. I think that was one thing I brought to the board. And besides being pretty well organized and well prepared for board meetings, I tried to talk only when I had something important to say, because I learned that from my daddy. He used to say, "If you don't have something important to say, then don't say it." I had eight brothers and sisters, so when we were at the dinner table, if we all talked at the same time, it would be wild. We learned to talk when we had something important to say.

And then I think my job as an RML associate director further broadened my perspective when I served on the board the second time, because I knew so much more about NLM, which, of course, is very important to MLA. Their relationship is very, very important. Also, in my job at the RML, I learned to proceed carefully and consider many varied perspectives before forming an opinion about the best way to proceed in various situations. I also learned how to conduct effective board meetings in my RML job, which helped me to be a better president of MLA. I think those were the kind of unusual things

that, because of my experiences, I could bring to the table. I knew *Robert's Rules of Order* very well [laughter].

F: That's always helpful. And, of course, your second time on the board was because you had been elected to be MLA president for 2008/2009. How did you select your priorities and goals for that year and how easily did those targets come to mind?

R: Well, that was one of the hardest things I had to do as president. I really struggled, because there were so many things I was interested in and so many things that I thought could be good priorities for MLA. But the problem was narrowing them down. And so I struggled for months. And I really think that I chose too many priorities. I think I would have had more success if I hadn't chosen quite so many. The main three were ethics, the environment, and work-life balance—which I was not very good at [laughter]. And so, yeah, can you tell I have a degree in sociology? Those sound like big sociological things, don't they?

F: Mm-hmm, they do.

R: I chose priorities that seemed to be important to me in my library and to my colleagues in other libraries, but also that were important to the larger world as well. That's why ethics and the environment and work-life balance came so readily to mind. But it was really hard to set specific goals for those priorities, because they are so broad and kind of vague, and so I'm going, well, okay, these are the things I'm really interested in. What kind of priorities can we make for those?

Ethics was probably the easiest one, in a way, to select, but the hardest one to implement in any way, because we revised the ethics code for MLA. That was one of the priorities. But the ethics code just gives broad guidelines on being a librarian and a professional.

But I didn't get much traction with convincing members of the association to stop accepting dinners, gifts, and contributions from publishers and other entities with which we did business. I had read the literature on how physicians' drug-prescribing habits were affected by their relationships with the drug companies, and so that had been a big thing for me for years. It seemed like a no-brainer to me that we should stop accepting dinners and gifts and things from the people with whom we did business. It just seemed like it was a conflict of interest to me. I guess this was so obvious to me, in a way, because of my experience at the FDA and the generic drug scandal. That thing was just so—

F: And you were in the midst of that, so you really got to understand.

R: Yes. It made such an impression on me. My boss at the FDA told me I couldn't go to lunch with a friend of mine, who worked for EBSCO. I said, "But I've been friends with this person since he worked for other companies. We've been friends for years." She told me I couldn't go to dinner with him when he was in town, because we did business with EBSCO. I remember thinking, gosh, maybe I should think about this some more.

It's not like it just came to me because I had this brilliant whatever. It was because of the experiences that I'd had along the way, and it was kind of a gradual awakening to me. But once I really saw what a conflict of interest it was, I just thought everybody else could see it too. But they still don't to this day.

I remember talking to Carla Funk about MLA not accepting money from the businesses and not letting them sponsor parties at MLA that I saw as a conflict of interest for the members. But MLA really depended on that money every year to help support the meeting, and so of course, I didn't make any progress there either. And I loved—remember the Ovid parties? Oh, my gosh, they just gave the most wonderful parties. But I stopped going to them. I think it's a personal decision for everybody about ethics, too.

I just tried to do the best I could with myself and my staff. I told them, "We will pay for your meals at meetings. You don't need to depend on somebody else to pay for your meals if you can't afford them yourself. We pay for them." I could tell my staff they couldn't do that, but I couldn't get much further than that.

I just thought, based on the literature about physicians and their prescribing habits, that even subconsciously it seemed like it affected—the research showed it affected—their decisions. If they're writing a prescription on a prescription pad with a pen that has a drug name on it that they're considering for somebody, it just readily comes to their mind. It just seems like that's kind of human nature that it would occur to them that that drug might be the one to prescribe.

I was disappointed that even some of my closest colleagues, whom I admired the most, didn't seem concerned about this issue. I just thought, well, I must be like Don Quixote chasing windmills or something. But anyway, that was probably my greatest disappointment in all my years of work.

But we did have some success with environmental issues. I had done some research before I chose my priorities, and I found out that airplanes are one of the greatest polluters to the environment. I was going, what? Because I had no idea that they were. They get up there in the stratosphere and pollute.

We discussed this in the boardroom, and the board approved eliminating travel to Chicago for one of the two regular face-to-face board meetings that we had outside of the annual meeting. We started having one of the meetings online instead, so it saved time and travel for the board members; it saved money for the association; and it cut down on the pollution from airline travel. That was one that was pretty easy to see. And, of course, we probably could not have done that nearly as easily if the technology hadn't progressed to the point where we could meet online and see each other on the screen while we were meeting. The technology did make it easier to make that decision, so that was a good one. I did miss going to Chicago and seeing these people face-to-face and having casual conversations with them at dinner about library issues and otherwise—and

eating in nice restaurants—but I thought it was well worth the sacrifice, and I think they did, too.

And then we tried to influence members to look for other ways to be environmentally friendly in their libraries, like cutting the amount of paper that they use by setting the printers on duplex as the default and things like that—relatively simple things if you have the latest machines that will do those things. That sounds trivial just to print on both sides of the page, but for us here, it saved a ton of paper.

F: Oh, and cumulatively.

R: Yes. We actually had to buy one new printer that would duplex, because the other one that we had in our office wouldn't duplex. I said, "Well, if I'm going to recommend this to other people, I certainly need to implement it myself."

And work-life balance was an issue that I struggled with throughout my career, and I watched many of my colleagues in different libraries struggle with it as well, especially the women who were having children.

F: Right. If you have a family, it's really hard.

R: How in the world do they do it? I just can't imagine. Number one, I would find it so hard to leave a child at home, and number two, how do they have the energy to work all day and then go home and take care of children and family? So we developed some programming for MLA workshops on work-life balance to help members address the issue more effectively. That was a pretty good success as well.

I was lucky that some of the people in my library—we had already started having discussions about work-life balance, because most of our reference library staff was in childbearing age and they were having children. It was such a big issue for them that that made it pretty easy for me to recognize that it was one that would be important to a lot of people.

F: What was the most challenging and most satisfying aspect of being president?

R: That's a good one. Well, the biggest challenge was that being president of MLA is a huge time commitment. And I have to say, when I talked to a previous president on the Nominating Committee who was trying to convince me to run for president, she soft-pedaled the time commitment question that I asked [laughter]. She probably thought I would never do it if I knew how much time and effort it really took.

I was a little bit surprised that it was as time-consuming as it was, and I still remember when Carla Funk said, "I'll be calling you on a weekly basis to discuss issues related to MLA." I remember thinking, *what?* Will we really need to talk every week? Yes, we do. Oh, that was wild. So being president was a huge challenge for me in controlling

how much time I spent on MLA and how much time I spent on my job. So that was kind of this ever-ongoing challenge—

F: Didn't help work-life balance, did it?

R: —during the whole time that I was president of MLA. And like you said, it totally screwed up the work-life balance thing, because I had very little time to spend with my family when I was president of MLA. But I kept thinking, it's for a limited period of time. I will survive this. And then I'd feel guilty if I thought I was spending too much time with the job and not the MLA presidency.

My twin sister sometimes tells me I bite off more than I can chew and that I try to do too much, and I think in this instance she was probably right. But somebody has to be president. And I wanted to do as much as I could to contribute to the association and members and to address issues that I thought were important while I had the opportunity, because it's not often that someone gets to choose priorities for an association of 4,000 members—or help choose them—and it's not often that you get to speak to an audience of over a thousand people talking about your priorities at an annual meeting. So I tried to look at it as an opportunity and kind of a duty to the profession.

The most satisfying part of being president was getting to meet so many members, especially at the chapter meetings. It was so interesting to see how different the chapters were and how different the members of the chapters were and how different their needs were. It was just fascinating. And then, of course, I formed friendships that have lasted for so many years that it was just a very challenging but very satisfying experience to be president.

F: Were there key individuals who helped you achieve some of your goals?

R: There were. The most important person in helping me achieve my goals as MLA president was MLA Executive Director Carla Funk. I kept thinking back to the selection committee process, and I kept thinking, wow, am I glad we made the right decision, because I could not have done that job without her. She really worked hard to implement some of the changes that the board suggested based on the priorities, and she even thought of suggestions herself of things that we could do related to some of the priorities. I really enjoyed working with her. She was great. I learned so much about the inside of MLA, how the organization functioned and was funded and all that stuff from her. She was great. She answered all my questions, she was very patient, she never laughed when I asked a stupid question. She was great.

And then, of course, the MLA board really helped achieve the goals, too. We had long, involved discussions about the best ways to approach different priorities, so they were great, and very supportive.

Then there were other colleagues who were especially helpful in helping me achieve my goals: Millie Moore at Tulane, whom I started working with in 1973 and I'm still really

good friends with, [co-]chaired the Ethics Task Force, which revised the ethics code, so that was great. And we're still really good friends.

Susan Steelman, who was one of my colleagues in the UAMS Library, was an active proponent of work-life balance, because she had a child and was struggling and had to commute a long way to work. She was really struggling with an adjustment to having a child, so she kept that issue at the forefront of my attention. She made sure that I didn't slack too much on that one.

And then, of course, Jacque Doyle and Julie Sollenberger encouraged me throughout my tenure as president. Jacque had been president before [1998/99], so she knew what I was going through and was very helpful. And Julie was my biggest cheerleader, I think.

Then Jan Hart, who was the associate director of the UAMS Library, and other members of the UAMS Library staff were very helpful. They were so proud that somebody from our library—and the region was proud that somebody from our region—was elected president of MLA. So I couldn't let them down, and they were all very supportive of my presidency and helped me in a lot of ways. I could not, and would not, have served as president of MLA without the support of the staff here. If I thought it was going to have a big impact on them, I never would have done it.

F: Yes, you can't do that job without the support of your home staff.

R: Right, you just can't do it. If they're not going to survive okay under that situation, then it's too big a sacrifice to make. But they were great, so it was good.

F: You've had such a rich career with multiple roles, and you've often had to jump into new areas and figure things out for yourself as you've made these career changes. Should MLA and perhaps AAHSL consider strengthening skills in certain areas as they continue to bolster their leadership development programs?

R: Well, that's a good question, and I really think that they should consider strengthening the skills. Two of the skills which I consider so important to our jobs as health sciences librarians and as officers of an association like MLA are two that I've discussed previously, public speaking and technical writing skills. Because sometimes we don't get a lot of experience in either of those areas, or not a lot of training in either of those areas. Somehow, I don't know, people just assume that we can be public speakers without a lot of training; if we survive freshman speech in college, that we're going to be okay. But that's not—

F: That's a very specific skill set.

R: Yes, it is, but it's a very important one, because so much of your credibility in your job depends on how articulate you are, especially in an academic health sciences environment where you're working with a lot of really smart and well-educated people. A lot of your credibility depends on the image that you project and how well you write,

because you have to write reports to your boss, you have to make presentations. And if those presentations are not well organized, and if your budget request is not well organized, if you're not a good writer and your annual report doesn't reflect the important things that the library does, then you're not doing your job well.

Like I said before, that technical writing class that I took years and years ago really saved my life, probably, in my job. And then the job at the RML really helped me to hone my public speaking skills. I can't imagine how much more difficult my jobs would have been if I had not taking the technical writing course and had the experience of having to do a lot of public speaking.

I think that those are two things that AAHSL and MLA could work on in their skills development programs that would really help. I think that what AAHSL does with the leadership training program [NLM/AAHSL Leadership Fellows Program] is great. I wish I could have had it before I was a director, because I think it's great and it really would have helped me to feel more confident from the get-go and have more of the skills that I needed. But public speaking and technical writing are two things that I think a lot of librarians need help in, not just the directors. That would be really helpful for them.

F: And they are fundamental to helping you achieve what you need to do.

R: Yes, and to help you perform your job more efficiently. If you're not a good technical writer and you have to write a lot, then it can take so much more time. I was so much faster at writing well after I took the course. It just taught me the basic things I needed to know about organizing a report or describing something or writing something clearly, concisely, and coherently—the three C's of good technical writing. We used to have to take four-page documents and condense them to one, and we did that over and over and over again. We got used to distilling our ideas and presenting them in a very concise way so that people with shorter attention spans than others could get—you know, we would get right to the point. That was just so important to me. That's a good skill to have.

F: Definitely. MLA members chose to award you the Murray Gottlieb Prize, as you mentioned earlier, and they named you a Fellow in [2006]. You've received research awards for posters, and you've been honored with the Distinguished Service Award for the South Central Chapter. How has the designation as a Fellow had an impact on you?

R: This is kind of a tough question, but I think that everybody needs some validation and everybody needs a reality check. Everybody wants to think that they've done their jobs well. Being chosen a Fellow of MLA, to me, was validation that I had made some kind of a contribution to MLA and to the profession, to our members, and that the time that I devoted to MLA activities was worth the effort. It was worth the trade-off that I made and less time in my job and less time with my family. To me, being a Fellow of MLA just made me feel like I had made the right decision. That was the main impact, I think.

F: And would you say that's true, then, for the numerous professional awards that you've received?

R: Yes, I think so. The awards I had were ones that really meant a lot to me and that really made me not doubt whether I had made the right decisions in the allocation of my time and effort through the [forty-two] years that I was a medical librarian. So that was a relief, because sometimes I tend to second-guess myself, but those awards just helped me feel like I was doing the right things and doing them relatively well.

F: Are there any MLA meetings or personnel that stand out in your memory?

R: Yes. I tell you, that first meeting in Cleveland was a real eye-opener for me. It was just such an amazing experience to see this organization in action. It was so exciting and interesting. I still remember watching Sam Hitt give his presidential address. He had such a regal bearing anyway. And I just thought, wow, this is a great group. I think this is going to be good.

Then the meeting in Kansas City [1996] really stands out in my mind because my friends and meeting roommates, Jacque Doyle and Julie Sollenberger were chairs of the [National] Program Committee for Kansas City, so they got to stay in this huge suite. Since I was their roommate at annual meetings, I got to stay in this huge suite, too, with flowers and food trays and stuff. It was pretty cool. We thought that was fun.

And then, of course, the meeting in Honolulu [2009], when I was MLA president stands out in my mind. It was such a whirlwind. I practically ran from one thing to another. But it was in such a beautiful setting. I thought to myself, why did I agree to run for president the year that I would be presiding in Honolulu? I can't even sneak out and go do anything in Hawaii, because I have to be in all these meetings. But anyway, it was a great meeting. I had a really nice suite to stay in there, too.

And then my last meeting in Austin [2015] stands out so vividly in my mind, because that was so bittersweet knowing that I might never see most of those people again. You develop such long friendships with these people. You know you're going to see them every year and you look forward to it, and then suddenly, at the end of your career, boom, you're not ever going to see them again. And I've been to MLA every year for the last thirty-something years, and to suddenly not have that to look forward to any more was just—

F: It's a loss.

R: Yes, it was sad. I tried to savor every minute of that meeting because I knew it would probably be my last one, and so far it has been.

F: Well, along with your contributions to MLA, you've been deeply involved in AAHSL, the Association of Academic Health Sciences Libraries, including serving on

the Board of Directors from 2006 to 2009. Which of your committee and other assignments did you enjoy the most and why?

R: Well, AAHSL had a lot of committees that were very interesting and did wonderful work, but the one that I found the most interesting, and at the same time frustrating in a way, was the Chicago Collaborative [established in 2008]. The Chicago Collaborative was kind of a controversial committee of AAHSL anyway, because we worked with publisher representatives. There were four AAHSL representatives—I think four—at the time, and then representatives from different publisher associations.

We would sit down and talk face-to-face about issues that were important to libraries and that were important to publishers and vendors of information resources, because we were struggling to keep up with their price increases. We felt like we needed to learn more about each other's needs and educate the other side, so that we could deal with these issues better together. Because publishers were struggling with all the advances of technology, too, so we knew they were struggling. But we knew we were struggling in trying to keep up with the price increases.

We had some really interesting and sometimes a little—not contentious, but not as pleasant discussions as we might have had on other issues. I think the librarians learned a lot from the publishers, and the publishers learned a lot from us. Even though we had been working with them for many, many years, I was amazed at how little they knew about the environment in which we worked and the challenges that we faced in our institutions. I was stunned at how little they knew about it. And I think I was surprised some, too, at how little we understood some of the challenges that they faced.

It was obvious in the discussions that we had many different perspectives in the room, and sometimes we had some pretty major disagreements about certain issues, especially about pricing for products and the value of open access publishing. Because this was when open access publishing was just really reaching the forefront of everybody's attention, and the publishers were very concerned about the impact it might have on their bottom line.

F: And we were embracing open publishing.

R: Some of us, yes. Even within our group of librarians, we had very different ideas about open access publishing and the value of it. That was an eye-opener, too, because to me it seemed pretty obvious how valuable it would be. But it wasn't the same for other people in the group. That was important for me to realize, that even some librarians didn't agree exactly on the same things that I did about open access publishing, because I'd been a big proponent of it for a while. So that was quite a learning experience.

The other AAHSL committee that I really thought was interesting and valuable that I worked on was the statistics committee, because we discussed what statistics we needed to be collecting and which ones we could stop collecting. And that changed as technology advanced and our services changed, and there were so many changes going

on in libraries that it was a pretty busy committee discussing what to measure, what the most effective measurements were for our work and our value. So that was interesting.

I really depended on the AAHSL statistics [*Annual Statistics of Medical School Libraries in the United States and Canada*] a lot in my annual reports and benchmarking myself—benchmarking my library with other libraries, benchmarking our services, benchmarking our budgets, benchmarking our salaries, comparing those things and using those statistics to help support the requests that we were making for increases in the budget. I felt like I really owed it to AAHSL to work on that committee because I found that resource so valuable.

F: Because that was another hardworking committee.

R: Yes, it was tough. We didn't always agree in that committee, either, on what the most valuable things were, what we needed to be collecting, and what we could drop. Some people thought we could drop statistics about archives or something, and I'm going, absolutely not. That's a big deal. People on this campus depend on a central place to go to find out things about the history of policies that were developed on campus. They depended on us a lot. I guess that wasn't true at some other institutions. I remember we had a big argument about that. That was interesting.

But anyway, AAHSL does great work, and I really could not imagine doing my job without AAHSL.

F: What do you think is the value of AAHSL to the profession?

R: Well, I think one of the most important things, besides the things we've mentioned, like the statistics, is enabling health science library directors to build relationships with other library directors and to learn from and to help support each other. I learned so much at the AAHSL director meetings from other librarians, and built connections with other library directors and learned what was going on in their libraries and knew people that I could contact if I had a question.

Sending questions to the Listserv was a godsend. I could send a question to the Listserv about something—my boss would say, "Do you know how many other libraries are doing this or that?" and I would come back to my office, and I would put a question out on the Listserv, and within an hour I would have some information. My boss was so impressed that we had a way to communicate so effectively with the other members of AAHSL and that we could get answers to questions so quickly, and that people would respond so quickly to it. And I said, "Well, we all benefit from it," so we all respond quickly, because we want other people to respond quickly when we have an urgent question that needs to be answered.

So, to me, I think that was the number one thing that AAHSL did for us. I just could not imagine being a library director without the valuable support of all those other directors.

It would have been so hard to do. They provided moral support, and it just made my job so much easier than it would have been otherwise.

And I think the work that AAHSL does, as I said before, to prepare librarians for leadership roles as library directors is very important. I was so sorry I didn't have that opportunity before I became a director. But I do think that the work AAHSL does to orient new directors is very valuable, too, because I did benefit from that and that was great to orient me in the right direction when I became a library director—and to realize that I had this association that would be so useful to me in adjusting to a new situation.

F: Well, we talked about MLA, we've talked about AAHSL, but your vita also reflects substantial contributions to a host of other organizations, including the South Central Academic Medical Libraries Consortium, the South Central Chapter, the AMIGOS Bibliographic Council, the TALON RML Program, the Health Sciences OCLC Users Group, where you and I first met each other, I think.

R: That's right, a long time ago.

F: Long time ago.

R: Before our hair turned a different color [laughter].

F: Then there are numerous Arkansas groups and the Texas Medical Center, to name just some of the things that are listed on your vita. How did you find time to extend yourself in so many ways, and what were some of the most memorable highlights?

R: Well, I think one of the reasons that I had more time to spend on these activities than a lot of other people is because I wasn't married—I didn't have a husband, I didn't have children—so I just had more time to devote to professional activities than a lot of other people did. It wasn't that I was any better at it than they were; it's just that I had more time that I was willing to devote to it, because I didn't have all those other responsibilities outside of work. I had a large extended family that I loved, but it's not the same as having to go home every day and take care of children and worry about sick children or a sick husband or all those other things that go with being married and having a family. So I just had more time, more discretionary time, that I could choose to devote to professional activities.

And I was pretty well organized. I'm a little bit obsessive-compulsive. I think you have to be a little bit and be well organized to have come up through technical services.

And I was lucky to have the support of many wonderful colleagues and coworkers along the way, especially those at Tulane, the RML office in Houston, and the UAMS Library. I could not have done all those activities if I hadn't had the support of my bosses and the people I worked with, who sometimes had to pick up the pieces when I was away at a meeting or something.

Some of the most memorable highlights of that work—that was a really hard question, but I thought of several. One is that the Health Sciences OCLC Users Group, where we met each other, was a useful group, because it brought together technical services staff in libraries to discuss issues of interest and how OCLC could be useful to us in performing our library activities. I think we were lucky that we got to see OCLC almost from the ground floor up.

I remember that tour of [OCLC at what was originally an] old Volkswagen factory on Kinnear Street in Columbus. Do you remember that? One of the early OCLC Users Group meetings? I remember the computer room.

F: Those big Sigma computers.

R: That was humongous, all those big Sigma computers lined up. I remember thinking, oh, my gosh, what have we gotten ourselves into? Just looking at all those computers, I thought, holy cow. I just think that that was just so amazing to see it from the beginning.

And I think that group was very unusual in one way, because it was composed mainly of technical services staff who normally would not have met each other or formed these close relationships with each other, because we didn't have another organization of people at that level in the library. To me, it was just such an unusual group. A lot of us were relatively young at the time, it seemed, and new to health sciences librarianship, so it was a great opportunity for us to meet annually and exchange ideas and have CE programs and learn from each other and build the relationships that helped us to survive in our jobs. There were all those committees and the board, and so it provided a good opportunity for us to get that experience at an earlier level than we normally might have, working our way up through other organizations. So it was great.

Then the South Central Chapter of MLA—I know I brag about what a wonderful chapter it is, but it really is. It's just a spectacular chapter. It's full of talented and dedicated librarians who are very friendly and fun, and I loved being a part of the chapter and serving it in so many ways, including as president. It was a good training ground for developing skills which were useful to me in my job, as well as in other associations like MLA. I learned so much from the South Central Chapter. It's a good way to kind of get your foot inside the door and gradually learn how to participate in professional activities. In the libraries that I worked in, we always encouraged the younger librarians to kind of get their start in the state associations and in the regional—the South Central Chapter, because it's such a good way to start and to build those skills, not only in being active members of the association, but in presenting papers and learning presentation skills and things that help when you're being active in associations as well. We just kind of worked our way up.

The other association—I can't say enough about this group—the South Central Academic Medical Libraries Consortium, which is also known as SCAMeL, is composed of the fifteen directors of the academic health science libraries in our region. [Editor's note: The number of SCAMeL directors has increased to seventeen as of 2018.] I think we're

lucky in our region, in a way, that our geographic region for the South Central Chapter of MLA is the same as our RML region, and the fifteen academic health science libraries in the region have had this group called SCAMeL for probably forty years now, where we met twice a year. We'd meet at the chapter meeting, and we'd meet outside of the chapter meeting.

We built such a close relationship with each other, and we sponsored so many programs. We were lucky that we had a lot of funding in the beginning because of some complex things—we just started out with this war chest of money that we got from somebody, and so we were able to fund a lot of activities with that money. I just think it was so unusual to have such a strong group for so long. We were lucky that we just happened to have this big source of money that we could invest and earn money on to support a lot of activities in our region.

We developed ways to support each other to provide better services and provided funding for various projects throughout the region, not just for the SCAMeL libraries but for the other libraries as well. Every once in a while, we had to remind ourselves that there were hospital librarians out there—our colleagues who would benefit from programs and funding, too. We helped support research in the member libraries through funding of projects and awards for the best posters and papers at our chapter meeting. We now co-fund those with the SCC [South Central Chapter]. We help support a writing workshop every year at SCC, so that people who are trying to get published, who are trying to write articles, can learn—like those technical writing skills I talked about earlier. They can sit down with people and try to help improve their articles, their writing, so that they can get accepted for publication. That's a really important project for the group. SCAMeL works in conjunction with the South Central Chapter a lot to support activities that benefit all the member libraries. So it's a really productive, collaborative...

To me, the fifteen SCAMeL directors are kind of like a mini-AAHSL group, because we had our little Listserv, too. And boy, let me tell you, if you wanted an answer in a hurry, those other fourteen library directors that you knew so well, you responded to them if you saw a question pop up from one of the other directors, because you knew that you might need help from them, too.

Sometimes the comparisons that we did with each other within our region were more valuable to us with our administration than comparisons outside the region, because they would always say to us, "Well, you can't compare us with the libraries in New York State or California or somewhere else. We're different. We're a poor state." Blah de blah de blah de blah. It was sometimes easier for us to convince them of something if we had information from the other fourteen libraries in our region, because they couldn't say, "Oh, they're so different."

F: No, they'd be [seen] more as peers.

R: That was really important. And just like AAHSL, I just cannot imagine doing my job as a library director without those other SCAMeL directors. I can't begin to imagine

what it would be like, because it was so important to me. And I was happy to serve as [chair] of SCAMeL at a time when we had really good funding to support a lot of activities. It was a lot of fun. I loved that. It was a lot of work, and sometimes we had some pretty contentious discussions in our SCAMeL meetings, because we were fifteen different people with fifteen different opinions, but, boy, they're still some of the best friends I've ever had.

F: Well, finally, before we break for lunch, tell me about your involvement in the PubMed Central National Advisory Committee and scholarly communication, because I know those are important activities for you.

R: Yes, they really were. I don't know how I got to be such a rabid supporter of open access publishing, but I still remember, when I was the chair of the AAHSL Program Committee—it was a long time ago, but I remember Wayne Peay and Judy Messerle coming up to me at a meeting and saying, “We really need to have some program on open access publishing.” To be perfectly honest, I didn't really know what they were talking about. I thought, what is open access publishing? We had a discussion about it, and I said, “Well, I guess I need to learn more about this.” We organized a workshop on open access publishing... One [speaker was Michael Eisen] from California who was so active in open access publishing [and subsequently cofounded Public Library of Science (PLOS)]. He was a scientist, a researcher.

I just remember what an eye-opener it was for me to hear about open access publishing, which is where the publishers shift the cost of publication from library subscriptions and individual subscriptions to charging the author of an article for publication at the beginning of the publication process, and then they put the articles up for free on the Internet so any researcher in the world can immediately get access to that information.

I just remember thinking, wow, why didn't somebody think about this before? And then I realized that the technology had to be there. This was right at the beginning of the feasibility of technology to make open access publishing possible, and Wayne was just much more foresighted. He could see things further in advance than I could. I was never really great at that. It was really a turning point for me in deciding what issues I really wanted to focus my time on for the rest of my career.

I started working within my institution to inform researchers and others on campus about the concept of open access publishing. And like I said before, it was a tough sell for some people, just like the NIH Public Access Policy was, because they were worried about whether or not they would get the same amount of credit for publications in open access [journals] as they got from publishing in the top journals in the field that had been around for fifty or seventy-five years. They just couldn't believe that it would carry the same prestige and have the same weight in their grant evaluations when they were being evaluated on their past publications and things like that. But I just kept explaining to them about how it would improve access to the information, that they wouldn't have to have us borrow things for them on interlibrary loan, because so much more would be freely available.

When the NIH Public Access Policy, which recommended that researchers deposit their articles in PubMed Central within a year of publication, was first initiated, Susan Steelman, who is the head of education and reference services at the UAMS Library, and I started this effort to inform people on the campus—not only about the NIH Public Access Policy, but also open access publishing and keeping them up with the developments in it, and discussing other ways that the scholarly communication process could be improved.

We would tell researchers, it's your system of scholarly communication; it's not ours. You're the ones who can improve it; we're not. We just think it's important that you know what's going on out there in the publishing world, so that you're better able to make the changes that need to be made, to improve the process, and to take advantage of the advances in technology that can help you to improve the process of scholarly communication. When you present it in that way, it kind of puts the ball in their court and makes them think more about the ways that they can help improve scholarly communication. It can help them do their research better, and developments can be discovered much more quickly that result in better health care. I would tell them, as I get older, I think it's even more and more important that you speed up the process [laughter], because there are things I want you to discover that will help me to feel better and to live longer.

When I was asked to serve on the PubMed Central National Advisory Committee, during the early days of its existence, I was just thrilled, because I thought, this just fits right in with one of my major priorities for my profession. One of the issues that we discussed in that committee was whether or not the NIH Public Access Policy should be made mandatory. We knew it was a very controversial issue, but it was, as you're aware, eventually made mandatory, and the researchers have to deposit their articles in PubMed Central within a year of publication. And I just think it's been a great thing to do.

Related to that, I was invited to attend a BioMed Central meeting in London, and they were, at the time, the most prominent of the open access publishers. That was really interesting and very eye-opening to see their perspective on where they needed to go. It was still so early in the process. It was fascinating to hear the discussions about that. Linda Watson was invited to attend that, too, because we were both active in the AAHSL scholarly communications activities.

Then we were both invited to a meeting at the Howard Hughes Medical Institute, and the Howard Hughes Medical Institute is the biggest private funder of biomedical research in the US. They were very progressive in looking at ways to speed up the research process. They were well funded, and they funded some of the best researchers in the US to do their research. They were very interested in finding ways to speed up the discovery process, so that changes and improvements in health care could be made much more quickly. That was just fascinating. And Linda and I both were just so thrilled to be involved in those activities, because we both thought it was so important.

On a more personal note, I got a call one day in my office here at UAMS about ten years ago from a UAMS researcher [Robert Mrak] who said that he and a colleague [Sue Griffin] were negotiating with a major publisher—which I probably shouldn't name; it's one of the biggest—to start a new journal on neuroinflammation, which is thought to be one of the major causes of Alzheimer's. He said he was just calling to let me know that the publisher might be contacting me to see if my library would be interested in subscribing to such a journal, if I thought it would be an important enough journal to add to our subscription list. I asked the researcher if he had considered starting the journal with an open access publisher like BioMed Central, and he said he had never heard of open access publishing—he didn't know what it was, he had never heard of BioMed Central or any other open access publishers. So I said, "Well, can I meet with you and your colleague here at UAMS to talk about it?" and he said, "Yes."

We met the next day, and I explained to them what open access publishing was, and they got so excited. I said, "I know these people in London at BioMed Central. Let's just call them on the phone." We had to make sure it was the right time, because their time is about seven hours difference from us. I said, "Let's just call them on the phone and see what they think about it." And they said, "That sounds wonderful!" We decided to call the next day, because it was pretty late in the day in London. We called them the very next day, and the BioMed Central people were excited. People at UAMS were just beside themselves, they were so excited. And so a few months later [2004], they had established this journal, the *Journal of Neuroinflammation*, which had great impact factors. It's still going very strong ten years later.

I had lunch with [Sue Griffin], who edits the *Journal of Neuroinflammation*, and she still to this day thinks that one of the most wonderful things they ever did was to get their journal up for free on the Internet right away so that people all over the world can use it. She thinks that's one of the reasons it has a high impact factor. To me, getting these people to publish this journal with an open access publisher—

F: It was a huge success.

R: —is one of the highlights of my career. Every time we see each other, every time this editor of the *Journal of Neuroinflammation* and I see each other, we just hug each other and we go, "Oh, we're so proud of that journal." It was just a great experience for me.

Are we ready for lunch?

F: I think we might be ready to break for lunch.

[WAV File #3]

F: This is the continuation of an interview with Mary L. Ryan on March 2, 2018. When we stopped, Mary, we were talking about scholarly communication and the successful launching of that *Journal of Neuroinflammation* as an open access publication. Did anything come up during lunch that you'd like to add to our conversation this far?

R: I can't think of anything else.

F: Over time, you lent your skills to the National Library of Medicine in several capacities and served on the Board of Regents for NLM from 2010 to 2014. That must offer some fascinating insights into NLM as an organization, the larger world of politics and medicine, and how complex organizations thrive over time. What did you learn from your service on the board?

R: Well, it was a fascinating experience, and I've always been a big fan of NLM ever since I first found out about it. So I consider my service on the Board of Regents as another of the top highlights of my career, right up there with being president of MLA. I learned so much from the NLM staff and from other members of the Board of Regents. And it was composed of—I think there were three or four librarians, and several physicians and researchers, and there were representatives of several federal agencies. It was an interesting conglomeration of different types of people and professions represented. These people all looked at information development and access and library issues from many different perspectives, so I really learned a lot from listening to them talk and interacting with them.

At the Board of Regents' meetings, NLM always brought in some people to make presentations on the research that they were doing, like at Vanderbilt or somewhere else, that was funded by the National Library of Medicine, so we got these glimpses into the future by seeing what types of research, especially medical informatics and things like that, that these people were working on. I always came away from those meetings really inspired about the future of information access and the future of health care from seeing what developments were being made, what kind of research was being done, what kinds of databases were being developed and other products worked on by NLM and outside researchers. It was just a great experience. I was amazed at how advanced the research was and how important NIH and NLM funding was to the development of new products and services.

I'm really just sorry that I served on the Board of Regents near the end of my career, because I could have benefited so much from that knowledge and experience throughout my career. But I rotated off the Board of Regents four months before I retired. I'm sorry I didn't have that experience sooner, because it was absolutely wonderful.

F: It seems to me that one of the huge differences between NLM and the academic health sciences libraries is that NLM has the mandate and the budget to do research and to really look into the future and prepare for the future.

R: And to help shape the future.

F: And to shape the future—whereas we're oftentimes more constrained with just managing to keep up.

R: Right. We were just trying to survive on a day-to-day basis, because we didn't have the luxury as much as NLM does of looking into the future.

F: But then they share that with everybody, so that's a pretty amazing thing.

R: It really is. I think NLM is a great organization.

F: And NLM has clearly provided a rich array of tools and services that have supported the advancement of medical libraries and both the quality and effectiveness of the services that we offer to our users. And at the same time, NLM has been described as a Washington bureaucracy, sometimes driven by the peculiar politics of the Capitol. How do you assess the boons and the drawbacks that NLM brings to the table?

R: Well, I've said for a long time that I think NLM is vital to the work done in medical libraries and that we're so lucky to have NLM products and services to help us provide information access to our users. And the rest of the people in the world are lucky to have NLM products and services, too, because they benefit so much from [PubMed] and other resources that are developed by the National Library of Medicine. I can't imagine our being able to perform our jobs of providing information access efficiently and effectively without the products and services that the National Library of Medicine provides for us.

Unfortunately, NLM does have to deal with the federal—the local—bureaucracy, which is pretty challenging and complex. But I think it does a good job of keeping the effects of that influence to a minimum.

I considered NLM so important in my library and in the services that we provided that I started funding the younger librarians in our library to travel to NLM for a tour and a more in-depth look at NLM. Because I said, every health sciences librarian should get to go to NLM at least once and get a behind-the-scenes look at it and really see what it's like and what it does. It's such a phenomenal place and does such a wonderful job that I just thought everyone should go see it. I thought that was money well spent to send people there to get a closer look at it.

F: Yes, absolutely. It's quite a unique place. And as you say, an agency that exceeds, perhaps, its mandate, because it does have an international impact.

R: It really does. They do so many things. I remember when I was in England—I spent seven weeks in London doing a volunteer project at the Midwives Information Service in 1987, and I visited a lot of libraries in and around London. So many people there told me how lucky we were—this was in 1987—to have NLM to provide products and services for us, because they didn't have that in England and they just thought it was such a great institution. And they benefited from it, too, so they really appreciated it.

F: It's always impressive to me to see so many developed countries, like the Nordic countries, that really rely on NLM products.

R: They really do. A lot.

F: Quite amazing. How important in an environment, now that's moving more and more toward digital interaction for almost everything that we do, to still have human contact and a human face on library services?

R: That's a good question and one that some administrators have asked me before [laughter]. I think it's really important, because sometimes technology, especially new technology, can be very intimidating. Even though people think they know how to use technology well and they can search the databases themselves, they really don't always know the best way to search or the best way to find information. So I think it's really important that we have a human face to the library and that we have staff that can help people, because we can help them find things that they may or may not realize they can't find themselves. They're really busy in their everyday work as researchers or clinicians or students, and sometimes they just don't have the time to do stuff themselves or the knowledge to know what's out there. That's part of our job as librarians, to know what's out there and to help people use it, so I still think it's a very important part of the process.

F: And I was really struck by the decisions that had been made in the library here at UAMS to invite the education partners on campus into your physical space, so that the Active Learning Center is here, writing and other kinds of student support is here, because that does bring students into contact with your staff, and I think fosters the ability for them to learn new skills and learn how to deal with the technology better.

R: Yes. We thought it was important.

F: It is. Good way to maintain that link. I also realized at lunch, I should have asked a follow-up question earlier about the change in your responsibilities before you retired. You expanded your capacity beyond just being the library director. You took on additional student services.

R: Well, kind of reluctantly [laughter], but I did it anyway. It wasn't my idea; it was my boss's idea, because she was trying to figure out how to better use the resources of the academic affairs division as a whole, and we both realized that the students need more services. One way that she saw to do that was to put me over some other units that needed some guidance and more support. I told her that wasn't how I wanted to spend the last few years, that I hadn't planned on spending my last few years in the working world being responsible for things like student financial services and the dorm, student life, and intramural sports and things like that, but I also knew that there were good people in charge of those units. So I agreed to do it, because somebody needed to do it.

It was an interesting experience. I knew I was close to retirement, and so I had some stuff to learn, too. I knew a little bit about student financial aid. I was a user of it myself in college. I was pretty well aware of some of the problems with student financial aid. I agreed to do it, and it turned out to be a good experience.

I'm sorry that it didn't happen earlier, because I was just really getting into the swing of things and had finally figured out some things we could do to help improve the life of the students while they're here at UAMS. By the time I really figured out some of the things we could do to help improve their services, it was the time that I had originally chosen to retire. I was kind of conflicted about retiring at that point, but I did it anyway. I figured, well, somebody else can figure this out, too.

F: There you go. There was a wise decision about balancing work and personal life.

R: Yes. I thought, maybe for once I should do something that I think is better for me, so that's what I did.

F: Well, before we wind up the interview, is there anything else that you would like to talk about that we haven't covered?

R: I can't think of anything else.

F: Moving to some very broad final questions, then, who are the people that you think most influenced your life and career?

R: Well, now, that was a tough one. Early on, it was my dad, who taught me the value of hard work and empathy for others, and the value of a good education, the value of working with others, teamwork and things like that. I'm not sure how he knew this. He was very smart, and he grew up in a relatively large family. He was an athlete, so he played sports on teams, so he was really big on working together and letting everybody win once in a while and things like that. He was really good at teaching me and my siblings some of the basic values of how to live your life, so I was very grateful to him for that. And he was right: education was the way to make a better life.

And then my twin sister, Marie, and my college friend who encouraged us to move to New Orleans in 1972, obviously had a big influence on my career, because I probably would not have been a health sciences librarian if I hadn't found a job as a clerk typist at the Tulane health sciences library. I probably would still be a high school or college teacher somewhere in Arkansas if I hadn't made that move to New Orleans and then gone on to graduate school and worked in medical libraries for a career. So they were very influential.

And then, of course, Bill Postell Jr., who was the director of the Tulane library, who encouraged me to get my master's in library science, and to make my job a profession. And then Dick Lyders, who hired me to be the associate director for the South Central Regional Medical Library Program and gave me the philosophy to hire good people and then get out of their way. And then Becky Lyon and Angela Ruffin at the National Library of Medicine, who helped me so much when I was the RML associate director for our region. And Dr. Barry Lindley, who was my initial boss at UAMS before he quit to be an artist; he made my first few years as a library director a real pleasure, because he

was such a good boss and so easy to work with that he really gave me a good example of how to be a good boss. So he was very influential.

And then there were the directors of the other fourteen academic health science libraries in the region, the SCAMeL directors, who were so great to work with, and some of them are still dear friends to me to this day, especially Marty Thompson in Oklahoma. He's retired, too, now from the University of Oklahoma Health Sciences Library. He was such a good team worker and so energetic and so full of new ideas and so much fun to work with. And Wilba Swearingen, who was the director at LSU in New Orleans, who ended up being a travel companion. She would go on trips that my sister and I went on, too. Sometimes other people would go, too. Cindy Goldstein from Tulane went on a trip to Italy with the four of us. Oh, and Debbie Sibley went, too. Golly, there were a bunch of us who traveled together. So they were influential.

But I guess the most influential people that I worked with were the staffs in the libraries that I worked in, because I worked with them every day. They influenced my life and work a lot. You know, when we work, we spend so much time with the people we work with, that a lot of times we know more about them than we do our own families. And so they were very influential in my life. They were smart, they were intelligent, they were dedicated to their work, and they really made working with them a pleasure.

F: A lot of people. That's a lot. Are there people that you think you had a significant influence on?

R: Well, I think the most significant influence that I had was, again, on the people I worked with every day, because we spent so much time together and did so many things together, especially at Tulane and here at UAMS and the Texas Medical Center Library—mainly the RML staff. And even at the FDA, I think I had an influence on them, too. So they are probably the people I think I influenced the most.

F: Overall, how would you like to be remembered by the library community, and what do you consider your most important contributions?

R: Now, that's a pretty tough question, too, Rick.

F: I didn't write these originally. I know they are hard questions.

R: I guess I'd like to be remembered most as a dedicated and capable librarian who worked hard to promote the profession and to perform my jobs well. I guess my most important contribution—that's tough, too—is that I tried to work well with the people I worked with and to help them see things coming that we needed to deal with, like open access publishing. So I think my most important contributions were to try to help other people, try to enable them to do their jobs better, and to keep the library staff and the users of the library as well informed as possible about the developments that were happening in the bigger world and to help them be better prepared to deal with them when they came along.

F: And speaking of developments, where do you see librarianship, and especially medical librarianship, headed into the future?

R: Well, I think I'm not usually very good at predicting the future. I've been surprised more than once. But I do think that medical librarianship has a bright future. I think it's very exciting, it's an exciting time for libraries. And health is so important to all of us, and the health care system is so complicated now, that I think accessing information quickly and efficiently is crucial to improving our health and the health care system.

Medical librarianship is so much more complex than it was when we started out. Wow, things seemed much simpler back then, forty-six years ago. But I think it's also more interesting than it used to be. We were talking at lunch about how we used to think it would be boring to be a library director for twenty or thirty years. Well, not anymore, because things change so rapidly that you don't have time to be bored. And I also think it has much more potential to improve access to information, so I think it's an exciting time for medical librarians, and there's a lot of potential for them to really make a difference in the future.

F: It also seems to me that with the changing complexity of libraries and the continual change in the environment for health sciences libraries, it's also a bit more fraught than it used to be. Because I think there is lots that medical libraries can do for their communities, but it does put some additional burden on the library director and the staff to be thoughtful about where things are going and how to really continue to prove the value of the library to the parent institution.

R: Yes, that's a good point, because it is so much more complex now. It's kind of like when you go into a restaurant, and you order French fries and they say, "Do you want curly fries, do you want spicy fries, do you want Cajun fries, do you want..." And you think, golly, do I really have to make one more decision today?

It is much more complex. There are many more choices to be made, and the more choices there are to be made, the more stressful it is to allocate the limited resources and to decide which things you need to spend your time and effort on. And then you have to worry about whether or not you've made the right decisions. There are so many. I think it is much more fraught with uncertainty and complexity and the chance to not make the right decisions. It is very complicated.

F: It is complicated. And I think at that broader institutional level, it's become more complicated there as well, as we've talked about earlier. With changes in the health care marketplace, research funding, state funding for public institutions, I think it's a hard time for the library to get the attention of administration and to keep the attention, and again, is part of the peril that I think libraries face more than they used to.

R: Right, that's a good point, because it's harder to get your administrator's attention, it's harder to get your users' attention and support, and it's harder to get the resources

you need to do the things you think need to be done. It's a pretty demanding time for medical librarians.

F: Right, and I don't foresee it getting any easier.

R: No. It's not for the weak, that's for sure. We used to think that some people went into librarianship because they wanted a nice, little, quiet, cushy job where they could kind of disappear into a corner and do the things they like to do, but it hasn't been that way for a long time, and it probably won't ever be that way again.

F: No, I don't think that's going to happen. Is there any advice that you would give people in the field, either new librarians or those who are further along in their career?

R: Wow. Hang on tightly. Hang on by your fingernails, because the carousel is speeding up rapidly. But I think the main advice that I would give is to develop as many skills as you can as early as you can. I mentioned taking a technical writing course, working to improve public speaking skills, taking CE courses to continually update your skills, because things change and you need to know different things.

And get a second master's degree in a related field, if it's at all possible, or a PhD even, if possible, because being better educated helps you have more credibility in your institution, and it also helps you to know more things about what you need to be doing.

And participate in professional activities as soon as and as often as you reasonably can, but also try to keep your life in balance. I shouldn't be the one saying that, because I didn't do a really good job of keeping mine in balance. But it is very important, and I can see now, even more so than I did in the past, how important it is to keep a good work-life balance. So that's an important one to always keep in mind.

And lastly, enjoy the experience of being in a great profession, because I do think medical librarianship is a great profession. Your career goes by so quickly, so you just need to enjoy every minute of it while you can, because it won't be there long. It may seem like you've got lots of time, but it'll just whiz right on by, and then suddenly you're retired—and you're going, what just happened to me. So, enjoy it and do it as well as you can. Try to get the skills you need to do it well, and then enjoy it.

F: I think you and I are in agreement that it's been a great career.

R: Yes, it really has. It really, really has.

F: So I would encourage people to go into it because I think there's a lot to do, a lot of satisfaction to be gained from it, and some great people to work with.

R: Yes, for sure. There's so much potential to accomplish important things in it, so it's just got so much potential.

F: Then I would say this concludes the interview for today. I want to thank Mary Ryan for sharing your insights and hosting the conversation and giving me a wonderful excuse to come to Little Rock.

R: Well, thank you, too, Rick. It's been fun, and it's been a nice trip down memory lane. Makes me remember how much I loved librarianship.

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CREDENTIALS

Distinguished Member, Academy of Health Information Professionals, Medical Library Association
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Medical Library Association Grade I Certification, 1977-90

PROFESSIONAL EXPERIENCE

Associate Provost for Student Services & Director, UAMS Library (Tenured Professor)
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July 2012-to date

Director, University of Arkansas for Medical Sciences Library (Tenured Professor)
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May 1997-June 2012

Executive Director, National Network of Libraries of Medicine, South Central Region
Houston, Texas
August 1991-April 1997

Chief, Technical Operations Branch, Food and Drug Administration Medical Library
Rockville, Maryland
July 1990-August 1991

Assistant Director for Technical Services, University of Arkansas for Medical Sciences Library
Little Rock, Arkansas
March 1978-July 1990

Serials Librarian, Rudolph Matas Medical Library, Tulane University Medical Center
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January 1973-February 1978

MEMBERSHIPS

Medical Library Association
 Consumer and Patient Health Information Section
 Hospital Libraries Section, 1991-2010
 International Cooperation Section
 Leadership and Management Section
 Medical Informatics Section, 1995-2003
 Public Health/Health Administration Section
 Technical Services Section, 1980-92
Association of Academic Health Sciences Libraries
South Central Chapter/Medical Library Association
Arkansas Library Association, 1978-1990, 1997-2006
Friends of the National Library of Medicine
UAMS History of Medicine Associates
Arkansas Public Health Association

OFFICES/COMMITTEES

Medical Library Association
 President-Elect, 2007/08, President, 2008/09, Past-President 2009/10
 Executive Committee and Board of Directors, 2007/08-2009/10
 Nominating Committee Chair, 2010
 Cunningham Fellowship Evaluation Task Force, 2009/10
 2009 National Program Committee, 2007/08-2008/09
 MLA/AAHSL Joint Legislative Task Force, 2005/06 and 2008/09
 Scholarly Publishing Task Force, 2005/06
 Hospital Library Section, Publications Committee 1996-98
 Janet Doe Lectureship Jury, 1995/96
 Centennial Coordinating Committee, 1994-99
 Nominating Committee, 1994
 Finance Committee, 1991/92-1992/93
 Board of Directors, 1990/91-1992/93
 Section Council Chair, 1990/91-1992/93
 Ad Hoc Committee on Appointment of Fellows and Honorary Members, 1990/91
 1990 National Program Committee, 1988/89-1989/90
 Section Council Program Planning Committee Chair, 1987/88-1988/89
 Section Council Representative (for Technical Services Section), 1987/88-1989/90
 Murray Gottlieb Prize Jury, 1987/88
 Technical Services Section Strategic Planning Committee, 1986/87
 Chapter Council Secretary, 1984/85-1986/87
National Library of Medicine
 Board of Regents, September 2010- August 2014
 Chair, Subcommittee on Outreach and Public Information, 2012/13-2013/14
 Emergency Access Initiative (EAI) Activation Team Member, 2009-to date
 Search Committee for Associate Director for Library Operations, 2012/13
 Pilot Project to Increase Compliance with the NIH Public Access Policy
 NIH PubMed Central National Advisory Committee, 2005-2008
 NN/LM Evaluation/Site Visit Team, 2002/03

Technical Review Group and Site Visit Team for RML Contract, 2000/01 & 2005/06

National Network of Libraries of Medicine/South Central Region

- Arkansas Regional Advisory Committee, Chair, 2008-2009
- Regional Advisory Committee, Member 1997-2006, Chair 2004-06
- Reviewer for Consumer Health Information Subcontract Proposals, 2001, 2004

Association of Academic Health Sciences Libraries

- AAHSL Board of Directors, 2006/07-2008/09
- Chicago Collaborative, 2007-2011
- AAHSL Publisher Liaison Task Force, 2007/08-2011
- Scholarly Communications Committee, 2002-2007, Chair 2005/06, 2011-to date
- AAHSLD Statistics Editorial Board, 2001/02-2003/04
- Program Committee 1999/00-2000/01, Chair 2001/02

South Central Academic Medical Libraries Consortium (SCAMeL)

- Research Committee, 1988/89-1989/90, 1994/95-1995/96, 2003/04-2004/05, 2009/10
- Finance Committee, 1997/98, Chair 2007/08, 2010/11-2013/14
- Disaster Preparedness Task Force, Chair, 2005-2007
- Nominating Committee, 2003/04
- Executive Committee, 2000/01-2003/04
- Chair, 2000/01-2001/02
- Union List of Serials Ad Hoc Committee, 1998/99
- Electronic Fund Transfer System Task Force, 1995/96-1998/99
- Union List of Serials Contract Negotiation Team, 1988/89
- Cooperative Acquisitions Plan Committee, 1984/85-1986/87

South Central Chapter/Medical Library Association

- Nominating Committee, 2012/13
- Disaster Preparedness Symposium, Co-Chair, 2006
- Katrina Relief Task Force, 2005/06
- Program Committee, Co-Chair, 1985, 1988 & 2005; member 1996
- Local Arrangements Committee (Social Events & Catering), 2004/05
- Ad Hoc History Committee, 2002/03-2004/05
- MLA Nominating Committee Nominee, 2002/03
- Chapter Advisory Council, 2001/02
- Nominating Committee, 1988/89 (Chair), 1998/99, 2001/02, 2003/04
- Honorary Distinguished Service Awards Ad Hoc Committee, 1998/99
- Research Committee, 1995/96-1996/97
- President, 1987/88
- Executive Committee, 1986/87-1988/89
- Strategic Planning Committee, 1986/87-1987/88
- Alternate MLA Chapter Council Representative, 1984/85-1986/87
- Bylaws Committee Chair, 1983/84

Board of Advisors, University of North Texas Department of Library and Information Sciences, 2012-to date

AMIGOS Bibliographic Council/AMIGOS Library Services, Inc.

- Board of Trustees, 1998/99-2000/01
- Officers Election Committee Chair, 2001
- Elections Process Task Force, 2000/01
- Membership Structure Review Task Force, 1999/2000-2000/01
- Finance Committee, 1998/99
- Name Review Task Force, 1998/99
- Alternate Representative to OCLC Users Council, 1984/85

TALON Regional Medical Library Program

Regional Advisory Committee Chair and Executive Committee, 1989/90
Ad Hoc Committee on Cooperative Acquisition of Monographs, 1981/82
CORE Workshop Committee, 1981/82

Health Sciences OCLC Users Group

Nominating Committee Chair, 1984/85
Serials Union List Committee, 1983/84-1984/85

University of New Mexico Project Touch Advisory Committee, 2002/03

Arkansas Consumer Health Information Network

Steering Committee Chair, 1998/99-2003/04

ARKLink Consortium

Funding Task Force, 1998/99-2000/01
Governance Committee, 2000/01

Arkansas State Library

Network Advisory Committee, 1997/98-1999/2000
Union List of Serials Subcommittee Chair, 1988/89

Arkansas Library Association

Legislative Committee, 2000/01-2001/02
Publications Committee, 1988/89-1989/90
Scholarship Committee Chair, 1983/84
Treasurer and Finance Committee Chair, 1982
Ad Hoc Committee on the Association Chair, 1982
Resources and Technical Services Division Secretary, 1979/80 and Vice Chair 1980/81
Local Arrangements Committee Chair, 1979
Future Conference Site Committee Chair, 1979

Central Arkansas Library System, Booker Worthen Prize Selection Committee, 1999-to date

UALR Library Director/Dean Search Committee, 2004/05, 2005/06

UA System Libraries Distance Education Task Force, 1998/99-2001/02

UA Clinton School of Public Service, Library Task Force, 2002/03-2003/04

University of Arkansas for Medical Sciences

UAMS Arts Council, 2010-2014, Chair 2011/12-2012/13, Secretary 2013/14
Visual Arts Committee & Art Selection Group, 2012/13-2013/14
College of Public Health CEPH Self-Study Review Committee, 2014
College of Medicine LCME Self-Study, Educational Resources Committee, 2013/14
Bookstore Advisory Committee, 2013/14-to date
Search Committee for Vice Chancellor for Academic Affairs, 2011/12
Search Committee for Dean, College of Health Related Professions, 2010
Academic IT Committee, 2012-to date
New Academic Programs Review Committee, 2012-to date
Threat Assessment Committee, 2012-to date
Academic Computing Advisory Committee, 1997-2012
Representative to AAMC Group on Information Resources, 1998/99-2012
Distance Education Committee, 2008/09-2010
Delta Omega (Beta Delta Chapter), Selection Committee, 2010-2014
Stimulus Package/Education Committee, 2008/09
Information Technology Leadership Group, 1999-2008
Information Technology Coordinating Committee, 1999-2008
NCA/Higher Learning Commission Criterion 2 Self-Study Committee Chair, 2005-07

- Regional Programs
 - “Reaching Out: Increasing Roles of Academic Health Centers” Conference Planning Committee, 2006/2007
 - Bee Healthy Committee, 2006
- Legacy Society Steering Committee, 2004/05-2005/06
- College of Public Health
 - CEPH Accreditation Self-Study Review Committee, 2005/06
 - Honor Council Alternate, 2002/03-2003/04
 - CEPH Accreditation Self-Study Committee, 2002/03
 - Construction and Design Team, 2002/03
- College of Medicine
 - LCME Educational Resources Committee, 2005/06
 - Faculty Development Liaison Committee, 2001/02
 - LCME Self-Study, Library Subcommittee, 1998
- Web Site Advisory Committee, 1999-2002
- Telecommunications and Distance Learning Committee, 1997-2001
 - Executive Committee, 1998/99
 - Infrastructure Subcommittee Co-Chair, 1998/99
- Academic Senate Constitution Revision Committee, 1988/89
- NCA Accreditation Self-Study, Subcommittee on Academic Support Services, 1985
- Academic Senate Research Committee, 1983/84
- Campus Media Services Advisory Committee, 1981/82
- Small Animal Care Committee for Ed II, 1981/82
- Bookstore Committee 1981/82
- Joint VA/UAMS Sharing Committee, Library Subcommittee, 1981/82
- Printing and Publications Committee, 1980/81
- University of Arkansas for Medical Sciences Library
 - Management Team Chair, 2000-to date
 - Consumer Health Information Team Chair, 1997-98
 - Space Team Chair, 1997-98
 - Integrated Library System Selection Committee Chair, 1998
 - Promotion & Tenure Committee Chair, 1981/82 & 1989/90
 - Collection Development Policy Committee Chair, 1985/86-1989/90
 - Faculty Outreach Committee Chair, 1987/88-1988/89
 - Public Relations Committee Chair, 1987/88
 - Micro/Media Fair Chair, 1987/88
 - National Library Week Celebration Chair, 1984/85
- Texas Medical Center
 - Greater Houston AHEC Advisory Committee, 1993-97
 - Texas Health Sciences Libraries Consortium Advisory Committee, 1996/97
 - Houston Academy of Medicine-Texas Medical Center Library
 - Executive Council, 1991/92-1996/97
 - Awards Committee, 1995/96
 - Faculty Status and Promotion Committee, 1994/95
 - Electronic Product Evaluation Committee, 1993
 - Basic Services Committee, 1992-94
 - Strategic Planning for Library Automation Committee, 1992/93

PRESENTATIONS/POSTERS/SHARING SESSIONS/CLASSES TAUGHT

- “Outreach Partnerships: The NN/LM and Outreach Activities,” The National Library of Medicine, 1984-2014:
Voyaging to the Future Symposium, Bethesda MD, May 14, 2014 (Invited Speaker)
- “Librarianship: What a Trip!” University of North Texas School of Library and Information Science, SLIS 5000,
Information and Knowledge Profession, Little Rock, January 3, 2014 (Invited Speaker)
- “Library Initiatives to Improve NIH Public Access Policy Compliance,” South Central Chapter/Medical
Library Association Annual Meeting, Ft. Worth TX, October 29, 2013 (with Casella J and Steelman S)
- “Building a Collaborative Interdependency with the College of Medicine via an Active Learning Center,” Joint
Meeting of the Medical Library Association and the 11th International Congress on Medical Librarianship,
Boston MA, May 6, 2013 (with Steelman S and Hart J)
- “Library Renovations,” UAMS College of Nursing Faculty Assembly, Little Rock, November 26, 2012
- “Re-positioning the Library for the Future: Repurposing, Relationships & Renovations,” South Central Chapter/
Medical Library Association Annual Meeting, Lubbock TX, October 16, 2012 (with Steelman S and Hart J)
- “SCAMeL: Thirty Years,” South Central Chapter/Medical Library Association Annual Meeting, Lubbock TX,
October 16, 2012 (with Thompson, C)
- “Rave Renovations: The Domino Effect of Raising an Active Learning Center,” Poster, South Central
Chapter/Medical Library Association Annual Meeting, Lubbock TX, October 15, 2012 (with Steelman S,
Hart J and Hyatt, D)
- “Predatory Open Access Publishers,” Research Support Information Network (RESIN), Little Rock, August 7, 2012
- “The Changing World of Scholarly Communication,” eTech@noon, Little Rock, December 8, 2011
- “The Library Budget,” UAMS Academic Senate, Little Rock, December 6, 2011
- “Library Journal Cuts,” Research Support Information Network (RESIN), Little Rock, September 23, 2011
- “Library Resources and Services,” ASG Student Forum, March 14, 2011
- “Bureaucratic Weirdness: A Pilot Project for Improving Compliance with the NIH Public Access
Policy,” SCC/MLA Annual Meeting, Austin TX, October 19, 2010
- “Managing From the Middle”, MLA CE Course (with Marty Thompson), SCC/MLA Annual
Meeting, Austin TX, October 16, 2010
- “The NIH Public Access Policy”
UAMS Internal Medicine Faculty Meeting, September 21, 2011
UAMS College of Medicine Professional Development Day, November 30, 2010
UAMS Radiation Oncology Department, May 13, 2010
UAMS COPH, Health Research Policy and Health Promotion Conference, March 30, 2010
UAMS College of Nursing, Biobehavioral Interventions Research Center, February 17, 2010
UAMS Research Committee, Little Rock, January 21, 2010
- “DynaMed: Free for All,” UAMS Regional Programs, Little Rock, December 8, 2009
- “The Healthy Library: Creating a Culture of Wellness,” Medical Library Association CE Course
South Central Chapter/MLA Annual Meeting, Tulsa OK, October 18, 2009
- “Evolution or Revolution: The Changing World of Scholarly Communication,” College of Pharmacy
Seminar/Friday@Noon, Little Rock, October 9, 2009
- “The UAMS Library,” College of Medicine New Faculty Orientation
August 22, 2012
August 15, 2011
August 24, 2010
September 9, 2009
August 18, 2008
August 13, 2007
August 15, 2006
August 25, 2004
August 28, 2003
- “The Healthy Library: Creating a Culture of Wellness,” Invited Speaker & Panelist, Medical Library
Association Annual Meeting, Honolulu HI, May 19, 2009
- “MLA Presidential Address,” Medical Library Association Annual Meeting, Honolulu HI, May 17, 2009

- “Welcome and Introduction, Finding Work-Life Balance: Strategies for You and Your Institution,”
Medical Library Association Webcast, Chicago IL, March 25, 2009
- “Medical Informatics Class Chat (online),” University of North Texas School of Library and
Information Sciences, Little Rock, March 10, 2009
- “AAHSL/Publisher Liaison Task Force Panel Discussion,” at Association of American Medical
Colleges Annual Meeting,, San Antonio TX, November 3, 2008
- “MLA Update,” presented at the following Medical Library Association Chapter Meetings:
Hawaii-Pacific Chapter/MLA Annual Meeting, Honolulu HI, March 12, 2010
South Central Chapter/MLA Annual Meeting, Tulsa OK, October 20, 2009
Southern Chapter, Hoover AL, October 30, 2008
Upstate New York and Ontario Chapter, Ithaca NY, October 23, 2008
Midwest Chapter, Troy MI, October 19, 2008
South Central Chapter, Dallas TX, October 14, 2008
Middle Atlantic Chapter, Baltimore MD, October 11, 2007
- “24/7 Library Access: An Innovative and Collaborative Effort with the College of Medicine,” Paper
presented with Plaisted DK and Hart JK, South Central Chapter/Medical Library Association
Annual Meeting, Dallas TX, October 14, 2008
- “Integrating Informationists in GME Collaborative Working Groups,” Poster presented with Holt AE
and Thrush CR, South Central Chapter/Medical Library Association Annual Meeting, Dallas TX,
October 13, 2008
- “Medical Library Association Presidential Inaugural Address,” Medical Library Association Annual
Meeting, Chicago IL, May 20, 2008
- “Integrating Informationists in GME Collaborative Working Groups.” Poster presented with Holt
AE and Thrush CR at the annual meeting of the AAMC’s Southern Group on Educational
Affairs (SGEA) meeting, Nashville, TN, April 2-5, 2008
- “Evolution or Revolution: The Changing World of Scholarly Publishing,” Arkansas Children’s Hospital
Staff Development Program, January 15, 2008
- “DynaMed,” AHEC Directors’ Meeting, December 13, 2007
- “Changes in Scholarly Publishing and Their Impact on Academic Health Sciences Libraries,” Medical
Library Association Webcast, November 20, 2007
- Clinton School of Public Service Orientation, August 24, 2007
- “Changing the Search Behavior of a Public Health Workforce: Descriptive Quantitative Analysis of
the Arkansas Public Health Virtual Library Project,” Poster presented with Steelman SC and
Holt AE, Medical Library Association Annual Meeting, May 25, 2006, Philadelphia PA
- “Creation, Dissemination and Archiving of Interactive Media,” Invited Speaker, Pre-Conference at
Association of American Publishers, Professional & Scholarly Publishing Division Annual
Meeting, February 5, 2007, Washington DC
- “Marooned in an Ocean of Public Health Information? Analyzing the Impact of the Arkansas Public
Health Virtual Library,” Poster presented with Steelman SC and Holt AE at the South Central
Chapter/MLA Annual Meeting, October 21-24, 2006, College Station TX)
- “Working with Institutional, Local, Regional and Federal Entities,” Presentation at the South Central
Chapter/MLA Disaster Preparedness Symposium, October 20, 2006, College Station TX
- “Scholarly Communication & Open Access Publishing Issues,” Invited Presentation at American
Academy of Forensic Sciences Annual Meeting, February 21, 2006, Seattle WA
- Preceptor for UAMS College of Public Health Student, Spring Semester, 2006 (with Steelman SC)
- “Open Access: What’s In It For Me?” Poster presented with Pope C at Association of American Medical
Colleges (AAMC) Annual Meeting, November 6-7, 2005, Washington, DC
- “Arkansas Public Health Information Project: An Analysis of Public Health Workers’ Information
Needs,” Presented with Steelman SC at the South Central Chapter/MLA Annual Meeting,
October 24, 2005, Little Rock AR

- “Scholarly Communication and Open Access Publishing,” Sharing Session Facilitator, South Central Chapter/MLA Annual Meeting, October 24, 2005, Little Rock AR
- “Current Public Health Preparedness Initiatives,” session of “Terrorism 101: What Librarians Need to Know and How to Find It,” May 26, 2005, Oklahoma City, and July 19, 2005, Tulsa OK
- “Promoting Scholarly Publishing and Open Access,” Sharing Session Facilitator, South Central Chapter/MLA Annual Meeting, October 24, 2004, Houston TX
- “Cease the Power: One Step at a Time,” Medical Library Association Annual Meeting, May 25, 2004, Washington DC
- “Arkansas Public Health Information Project,” UAMS COPH Integration Project Presentation, May 5, 2004, Little Rock AR
- “Scholarly Publishing at the Crossroads,” keynote address at “Open Access: A Scholarly Publishing Model for the Future,” OU Health Sciences Center, April 28, 2004, Oklahoma City OK
- “Introduction to PubMed & Biomedical/Consumer Health Resources,” Class presented with Steelman SC, U.S. Telecommunications Training Institute, October 24, 2003, Little Rock AR
- “Medical Information for Consumers,” Class presented with Steelman SC, Fort Smith Public Library Staff Development Day, October 12, 2003, Fort Smith AR
- “Historical Research Center, UAMS Library,” Poster presented with Johnson MA at the South Central Chapter/MLA Annual Meeting, October 6, 2003, Shreveport LA
- “Technology and Publicity of ARHealthLINK: A Look Behind the Scenes,” Poster presented with Steelman SC at the Medical Library Association Annual Meeting, May 20, 2002, Dallas TX
- “Networking Consumer Health Information in Arkansas: The ARCHIN Experience,” Medical Library Association Annual Meeting, May 20, 2002, Dallas TX
- “Arkansas Consumer Health Information Network: Making Connections,” National AHEC (Area Health Education Center) Meeting, April 23, 2002, Little Rock AR
- “Networking Consumer Health Information in Arkansas: the ARCHIN Experience,” Arkansas SOPHE (Society for Public Health Education) Conference, March 2, 2002, Little Rock AR
- “Innovative Ideas for a Consumer Health Site: the ARHealthLINK Experience,” Poster presented with Steelman SC at the Triple Chapter Meeting, Medical Library Association, October 27, 2001, New Orleans LA
- “Consumer Health Information in Arkansas: Birth of a Network,” Paper presented with Steelman SC at the Triple Chapter Meeting, Medical Library Association, October 26, 2001, New Orleans LA
- “Scholarly Communication and the Internet,” UAMS College of Medicine Professional Development Day, December 6, 2000, Little Rock AR
- “ARHealthLINK: A Consumer Health Resource for Arkansas,” Arkansas Library Association Annual Meeting, October 8, 2000, Springdale AR
- “Information Resources Supporting Informed Health Care Decisions,” Arkansas Foundation for Medical Care Annual Quality Conference, April 18, 2000, Little Rock AR
- “Information Access Issues,” UA Teaching Scholars for Distance Learning Program, March 17, 2000, Little Rock AR
- “The Arkansas Digital Library,” Arkansas Joint Legislative Committee on Advanced Communications and Information Technology, November 12, 1999, Fayetteville AR
- “Arkansas Consumer Health Information Network: An Update,” Arkansas Library Association Annual Conference, October 10, 1999, Little Rock AR
- “Consumer Health Titles Added to MEDLINE... What Next?” Arkansas Library Association/Southeastern Library Association Joint Conference, October 1, 1998, Little Rock AR
- Introduction to “Building a Consumer Health Information Network for Arkansas,” March 31, 1998, Little Rock AR
- “The Texas Department of Health Border Area Information Access Project,” National Library of Medicine/Centers for Disease Control Public Health Initiatives Meeting, January 8-10, 1997, Bethesda MD

- Networking Class, University of North Texas Graduate School of Library and Information Sciences, September 1995 and September 1996, Dallas TX
- “National and Regional Links to Health Information,” at VITAL LINKS: Connecting Oklahoma to the World’s Health Information, September 18, 1996, Oklahoma City OK
- “NN/LM SCR Update,” South Central Chapter/Medical Library Association Annual Meeting
October 22, 1996, Galveston TX
October 23, 1995, Little Rock AR
October 24, 1994, Irving TX
October 18, 1993, New Orleans LA
October 27, 1992, Houston TX
October 14, 1991, San Antonio TX
- “The National Library of Medicine and the NN/LM SCR,” New Mexico Library Association Fall Conference, October 4, 1996, Socorro NM
- “Evaluation of the NN/LM SCR Lower Mississippi Delta Library Improvement Sites Project,” South Central Chapter/MLA Annual Meeting, October 23, 1995, Little Rock AR
- “Lower Mississippi Delta Library Improvement Projects,” Medical Library Association Annual Meeting, May 9, 1995, Washington DC
- “Outreach in the South Central Region,” Paper presented with Halsted D at the South Central Chapter/MLA Annual Meeting, October 14, 1994, Irving TX
- “Exhibiting: Doing It Like the Big Boys,” Paper presented with Plaisted DK and Halsted D at the South Central Chapter/MLA Annual Meeting, October 26, 1993, New Orleans LA
- “National Network of Libraries of Medicine Programs,” Dissemination Strategies for Changing Clinical Behavior, Sponsored by AHEC, University of Arkansas for Medical Sciences, January 18, 1993, Little Rock AR
- “The Relationship Between the National Library of Medicine and Hospital Libraries,” South Central Chapter/MLA, Hospital Libraries Section, October 26, 1992, Houston TX
- “The National Network of Libraries of Medicine, South Central Region: What the Network Can Do For Your Library,” Oklahoma Health Sciences Librarians Association Meeting, April 17, 1992, Tulsa OK
- “The New RML Program,” HealthLine Consortium Meeting, January 23, 1992, Dallas TX
- “Loansome Doc,” New Orleans Area Health Sciences Librarians Meeting, October 25, 1991, New Orleans LA
- “Optimum Utilization of the Hospital Library,” CME Program, Baxter County Regional Hospital, October 21, 1986, Mountain Home AR
- “Collection Evaluation and Retrospective Conversion at the University of Arkansas for Medical Sciences Library,” Paper presented with Hart JK at the South Central Regional Group/MLA Annual Meeting, October 21, 1983, Dallas TX
- “Six Hospital Libraries Share an Affiliate Membership in AMIGOS,” Paper presented with Plaisted DK at the South Central Regional Group/MLA Annual Meeting, October 21, 1983, Dallas TX
- “Public Library Workshop on Consumer Health Information” Class presented with Kasalko SK
May 14, 1982, Jonesboro AR
May 12, 1982, Hot Springs AR
May 10, 1982, Little Rock AR
May 3, 1982, Fort Smith AR
- “Hospital Library Serials and Locator Tools Workshop” Class presented with O’Connor E
February 4, 1982, Dallas TX
November 19, 1981, Lake Charles LA
- “The Development of a COM (Computer Output Microfiche) Catalog at the UAMS Library” Paper presented with Hart JK
Arkansas Library Association Conference, October 4, 1981, Little Rock AR

South Central Regional Group/MLA Annual Meeting, October 23, 1981, San Antonio TX
“Technical Services in the Hospital Library,” April 15, 1980, Paragould AR
“Hospital Literature,” UAMS Library Scientific Literature Survey Course, Spring 1979-Spring 1982

PUBLICATIONS

“Does it Really Matter Who’s Paying for Dinner?” *Journal of the Medical Library Association* 98(1):1-3, Jan. 2010
“Presidential Address,” *Journal of the Medical Library Association*, 98(1):E2-E4, Jan. 2010
“Inaugural Address,” *Journal of the Medical Library Association*, 97(1):E19-E23, Jan. 2009
UAMS Library News
“From the Director” Column, 1997-2008
Editor, Numbers 19-33, 1987-90
Network News (Newsletter of the National Network of Libraries of Medicine, South Central Region)
Editor, Numbers 1-22, 1991-95
At least one article in every issue from Numbers 1-33, 1991-97
“Houston Academy of Medicine-Texas Medical Center Library Receives \$4.7 Million Contract,” *Texas Medical Center News* 18N9:3, May 15, 1996
“Broadening Your Horizons: Working in England,” *Arkansas Libraries* 48N5:8-10, Oct. 1991
UAMS Library Guide, 1987
“Selected Sources of Consumer Health Information for Public Libraries,” *Arkansas Libraries* 42N4:25-28, Dec. 1985

INTERVIEWS

American Libraries, “Prognosis literacy,” December, 2007
Patient-Wise (online), “Tips for savvy healthcare consumers,” January 29, 2008
NPR/Connecticut Public Radio, WNUR, “MedlinePlus is a trusted source...” March 9, 2008
Indianapolis Woman and *St. Louis Woman*, “Healthy skepticism,” February 1, 2008,
CNNhealth.com, “Tips for savvy medical web surfing,” February 20, 2008
Chicago Tribune (online), “Medical librarians offer research help,” June 9, 2008

GRANTS/CONTRACTS

Arkansas Children’s Hospital Library Services Contract, (annual) 1998/99-to date
Resource Library Outreach Subcontract # NO1-LM-6-3505 for the National Network of Libraries of Medicine/South Central Region (NN/LM SCR), \$11,000-\$15,000 annually, 1997/98-to date (with Susan Steelman, Daphne Hyatt, Dena Plaisted)
Co-Principal Investigator, “Arkansas Public Health Information Network,” National Library of Medicine (NIH) Information Access for Public Health Professionals Subcontract #NO1-LM-1-3515, \$20,000, February 2003-November 2005 (with Steelman SC)
Principal Investigator, Arkansas Consumer Health Information Network, National Library of Medicine (NIH) Contract #NO1-ML-6-3525, \$40,000, January, 2000-July, 2001
Technology Awareness Conference Award, National Network of Libraries of Medicine, South Central Region, \$5,000, April, 2000 (with Hart JK)
Dissemination of Consumer Health Information: Technology, Services & Resources, Friends of

the National Library of Medicine, \$3,000, March, 2000 (with Steelman SC)
National Library of Medicine Contract No. NO1-LM-6-3525, NN/LM SCR Regional Medical
Library, \$4,700,000, 1996

CONSULTATIONS

BioMed Central Consultation Workshop, August 31, 2004, London, England
History of Medicine Program, Oklahoma University Health Sciences Center Library,
September 11-12, 2003, Oklahoma City OK
Advisory Group, US Dept. of Education Library Technology Demonstration Grant #R197090028,
“Comparative Study of Periodical Literature Indexing: Print Versus Electronic Access.”
PI – Dr. Charles B. Lowry, UT Arlington (TX)

AWARDS/HONORS

South Central Chapter/Medical Library Association, Research Award for Posters, Honorable Mention,
2012 (with Steelman S and Hart J)
Distinguished Alumna, Louisiana State University School of Library and Information Sciences, 2009
Delta Omega (Public Health Honor Society), 2007
UAMS Teaching Scholars Educational Research Poster Exhibit 3rd Place Award, 2007
(with Steelman SC and Holt AE)
Medical Library Association, Research Award for Posters, 2nd Place, 2007
(with Steelman SC and Holt AE)
South Central Chapter/Medical Library Association, Research Award for Posters, 2nd Place, 2006
(with Steelman SC and Holt AE)
Medical Library Association Fellow, 2006
Dale Bumpers AHEC Leadership Award, UAMS Regional Programs, 2006
Public Health Student Leadership Award, UAMS College of Public Health, 2004
National Library of Medicine Medical Informatics Fellowship, 1998
Distinguished Service Award, South Central Chapter/Medical Library Association, 1996
Murray Gottlieb Prize, Medical Library Association, 1978
Beta Phi Mu (International Library Science Honor Society), 1977

SPECIAL PROJECTS

UAMS Library Liaison for “The Public Health Information Access Project,” with the Arkansas
Department of Health and the National Network of Libraries of Medicine, New England Region, 2011/12

Negotiated with Elsevier Publishing to eliminate the “print & scan” requirement for interlibrary loans for
libraries within the United States, 2010

Worked as a volunteer librarian at the Midwives Information & Resource Service, London, England, and
visited thirteen medical libraries in London and Southampton, October 26-December 4, 1987.

MENTORING

Coordinator for Practicum for Julie Adamo, National Library of Medicine Associate Fellow,
April 17-23, 2011

Co-supervisor for Internship for Jennifer Strayhorn, student at the University of North Texas
School of Library and Information Science, February-August, 2011