B Evidence Based Library and Information Practice

Editorial

Evidence in Crisis?

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A recent headline "Evidence Based Medicine: a movement in crisis" (Greenhalgh et al, 2014), caught my eye. Eek, I thought, if evidence based medicine (EBM) is in crisis, what about evidence based library and information practice? Greenhalgh et al (2014) put forward a thought provoking argument suggesting that 20 years down the line despite a number of successes, there are a number of problems with evidence based medicine. In addition to long standing criticisms of an emphasis on experimental research over clinical experience based on tacit knowledge, these include: misappropriation of the "evidence based" research agenda by vested interests, an unmanageable volume of evidence (including guidelines), a focus on statistically significant benefits rather than clinical ones, management rather than patient driven care based on inflexible rules and the inability of evidence based guidelines to deal with complex morbidity. Although these may be problems for EBM, I don't think this is the

case for librarians. Most of the problems highlighted stem from EBM's emphasis on experimental research and focus on the "hierarchy of evidence" which lends itself to the creation of guidelines and rules. Various authors have debated evidence and research evidence in relation to EBLIP (eg Koufogiannakis and Crumley, 2003; Eldredge, 2002). And although we have bemoaned a lack of high quality research evidence in our field (e.g. Brettle, 2003: 2011), this does not prevent us from practicing in an evidence based manner and may well have led to a broader concept of evidence and model of evidence based practice as proposed by Koufogiannakis (2013).

The solutions, proposed to the EBM crisis, however are of far more interest and relevance to librarians, as well as being aligned to the reality of EBLIP. Greenhalgh et al (2014) suggest that it is time to return to "real evidence based medicine" which is: individualised for the patient, based on judgement not rules, built on strong clinician-patient relationships and shared decision making. These suggestions are akin to Koufogiannakis's (2013) proposition that the EBLIP model should consider all types of evidence with the librarian and professional decision making at the centre, and that the applicability of the evidence and the local context is taken into account when the decision is made.

Furthermore the actions proposed to rescue EBM are also relevant to EBLIP. These include: a demand for better evidence, training which combines critical appraisal with judgement and decision making, usable and robust evidence and a broad research agenda. I think as librarians we should demand the same. Hopefully this September (2014) issue will help you do that. It is full of a wide variety of research, from user surveys to routine data collection as ever with the aim of providing you with useful and applicable evidence to help in your local decision making.

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