



Commentary

Reflections on Using Patrons' Stories as Practice-Based Evidence

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Received: 30 Jan. 2016

Accepted: 9 Feb. 2016

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We all know the scenario: a patron approaches the librarian in the shelves, or emails the library manager, or telephones the reference desk with a story about how the library service met, exceeded, or failed to meet their expectations. Apart from addressing specific problems (“the printing system keeps breaking down” or “I can’t log in to the online resources”), what do librarians do with the rest of the material that comes their way through these informal channels? Is it evidence, information, or “anecdota”? In particular, what do librarians do with conflicting opinions? For example, some patrons love downloading e-books to their device and want everything available online, while others bemoan the complexities of e-book borrowing and prefer the reading experience afforded by hardcopy.

Qualitative research, usability studies, and user experience explorations are not new in evidence

based library and information practice (EBLIP). However, the data generated has tended to rank low in the hierarchy of evidence, a hierarchy that has been challenged in recent years (Koufogiannakis, 2010). This commentary will explore whether the narratives and stories received through informal communication channels between library staff and patrons are valid forms of evidence, and how (or whether) they can be used to inform decision making and demonstrate the value of library and information services.

The generally accepted definition of EBLIP is that it integrates the best available research evidence, practitioner experience, and library users’ values and preferences as the basis for decision making (Eldredge, 2012). Much continues to be written about the quality, quantity, and accessibility of research evidence in the library and information science (LIS) field.

In the last few years there has been a focus on library practitioners' knowledge and experience as evidence (Koufogiannakis, 2013). At present, there is increasing interest in the third element of EBLIP—the values and preferences of library users. Patron journeys are receiving attention in forums such as the blog #UKAnthroLib (<http://ukanthrolib.wordpress.com/>), which is “a blog exploring ethnography, usability and user experience in libraries”.

In her keynote address to the 7th EBLIP conference, Koufogiannakis (2013) highlighted two areas of research she considered a priority for the EBLIP community. One of these was “How do we ‘read’ the results of different types of evidence sources?” (p. 15). Koufogiannakis described a range of types of evidence referred to in the academic literature. From this review it was clear that the evidence generated through informal communication with patrons—if it were to be considered evidence—is anecdotal, experiential and highly localized (p. 7). It also falls within the broad grouping of “soft” evidence sources, described by Koufogiannakis as follows:

This type of evidence focuses on a story, and how details fit into a particular context. Soft evidence provides a real-life connection, insights, new ideas, and inspiration. Such types of evidence include input from colleagues, tacit knowledge, individual feedback from users, and anecdotal evidence. These types of evidence are more informal and generally not seen as deserving of the label evidence... (p. 8)

In fact, it could be argued that such evidence, particularly anecdotal evidence, is “anecdotal”. Anecdotal has been defined variously as “unfounded perception” (Harris-Keith, 2014, p.150); “a compilation of correlated stories or other single pieces of information produced to appear like actual scientific data” (Urban Dictionary); and “data based on individual story telling that is subjective, malleable, and resists

collection via formal mechanisms” (Turner, Owen & Thomas, 2013). The term can be used positively and negatively, depending on context.

In fact, context is key. “Different types of evidence need to be weighed within the context in which they are found, and only the practitioners dealing with that decision can appropriately assign value and importance within that context” (Koufogiannakis, 2013, p. 15). Virginia Wilson, in her most recent “Research in Practice” column in this journal, claimed that because the questions for which librarians seek evidence arise from the local setting, context must remain front and centre in weighing the evidence gathered to address those questions (Wilson, 2015).

Also key to this issue is the nature of the anecdote itself. Greenhalgh and Hurwitz (1999) remind us that stories have “a finite and longitudinal time sequence” with a beginning, middle and end (p. 48). The stories that library patrons tell are often fragments of a larger story: the librarian often does not hear the end, and may only discover the beginning in retrospect. Greenhalgh, an academic and practicing doctor, writes about the stories that patients tell their doctors. She observes that a patient’s problem is usually converted by the clinician from narrative into “the structured and standardized format that has come to be known as the ‘medical history’” (p. 50). But sometimes what is most important to the patient can be lost in translation. Of course, the outcome for the patient is important, but so is the experience, and the same can be said with regard to library patrons.

Gidman (2013) points to the work of A.W. Frank, who “presents a typology for illness stories: restitution narratives refer to an illness which is treated and resolved; quest narratives report patients’ journeys through their illness (overcoming a range of obstacles); and chaos narratives describe stories with multiple and complex issues which are not resolved” (p. 193). This is a really useful way of thinking about the

stories told by library patrons and communicated via informal channels.

Many are restitution narratives in which the patron encounters a problem which is successfully resolved with the help of the librarian. In this kind of narrative, the outcome is the most important part of the process for the patron and the librarian. These, of course, are the most satisfying narratives for librarians to hear, as they reinforce the belief that the collections and services provided by the library are useful and relevant.

Many are quest narratives, such as the following, related to the author in her workplace (a hospital library) by a nurse who had been writing her master's thesis and using EndNote:

Do you remember that time when I rang the library in tears because my Word document formatting on my thesis had gone all funny and made the document unreadable, even the backup file seemed corrupted. I was devastated and I spoke to you and you knew exactly what the problem was and sent me the link to a video which showed me how to fix it?... And I can't tell you how relieved I was because I was just walking around the house absolutely shattered, fearing I had lost all that work. (J. Burrows, personal communication, 17 November 2014)

Librarians often hear these types of anecdotes in which they become involved in a larger narrative (in this case, the story of undertaking a master's degree). The librarian is often able to assist the patron in overcoming obstacles so they can move on to the next part of the story, in which the library may not be involved at all. In this narrative, the experience is just as important as the outcome.

Then there are the chaos narratives, such as the student who experiences multiple problems in their interaction with an education provider. In these kinds of situations, the library is only a

small part of a much larger narrative and may or may not be able to assist with some issues. The library influences the experience but not the overall outcome for the patron, because the outcome is beyond the sphere of influence of the library.

When assessing the value of anecdotes as evidence, it is useful to bear in mind this typology of stories. The library may be front and centre in the narrative, able to influence both experience and outcome for the patron, or it may be more peripheral, unable to change the outcome but potentially able to improve the experience. The librarian may be involved in the narrative from beginning to end, or in one small part only. Patrons' stories are highly contextual, which is both a limitation and a strength, because they are so specific and meaningful to the individual.

The value of the information derived from stories or anecdotes may also lie in the effort required to obtain it. It should not be used in isolation as the basis for major changes in resources or services, but it can be used to inform further investigation, providing insight into patrons' values, preferences and experiences.

References

- Anecdata (n.d.). In *Urban Dictionary*, Retrieved 24 January 2016 from <http://www.urbandictionary.com/define.php?term=anecdata>
- Eldredge, J. D. (2012). The evolution of evidence based library and information practice, part I: Defining EBLIP. *Evidence Based Library and Information Practice*, 7(4), 139-145. <http://dx.doi.org/10.18438/B8GC99>
- Gidman, J. (2013). Listening to stories: Valuing knowledge from patient experience. *Nurse Education in Practice*, 13(3), 192-196.

Greenhalgh, T., & Hurwitz, B. (1999). Narrative based medicine: Why study narrative? *BMJ*, 318(7175), 48-50.

Harris-Keith, C. (2014). Evaluating the staffing of an Interlibrary Loan Unit: An exercise in data-driven decision making and debunking "anecdotal". *Journal of Access Services*, 11(3), 150-158.

Koufogiannakis, D. (2010). The appropriateness of hierarchies. *Evidence Based Library and Information Practice*, 5(3), 1-3.
<http://dx.doi.org/10.18438/B88D1R>

Koufogiannakis, D. (2013). EBLIP7 keynote: What we talk about when we talk about evidence. *Evidence Based Library and Information Practice*, 8(4), 6-17.
<http://dx.doi.org/10.18438/B8659R>

Turner, J., Owen, C. & Thomas, L. (2013) Living the indie life: mapping creative teams in a 48 hour game jam and playing with data. In *IE '13 Proceedings of The 9th Australasian Conference on Interactive Entertainment: Matters of Life and Death*, ACM Digital Library, Melbourne, VIC. Abstract retrieved from
<http://eprints.qut.edu.au/64496/>

#UKAnthrolib. (2014). UKAnthrolib: A blog exploring ethnography, usability and user experience in libraries. Retrieved from <http://ukanthrolib.wordpress.com/>

Wilson, V. (2015). Evidence, local context, and the hierarchy. *Evidence Based Library and Information Practice*, 10(4), 268-269.
<http://dx.doi.org/10.18438/B8K595>