



Evidence Summary

Health Sciences Librarianship's Status as a Profession Is Unclear, According to Its Members

A Review of:

Koenig, R. A., Rodriguez, V. A., & Sima, A. P. (2021). Attitudinal attributes of professionalism in health sciences librarians. *Journal of Library Administration*, 61(1), 1–20.
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Abstract

Objective – To determine health sciences librarians' attitudes toward professionalism and to examine relationships between professionalism attributes and participant characteristics as defined by the Richard H. Hall Professionalism Inventory.

Design – Cross-sectional online survey using the Richard H. Hall Professionalism Inventory.

Setting – Electronic mailing lists of the Medical Library Association (MLA), the Association of Academic Health Sciences Libraries (AAHSL), the Association of College and Research Libraries (ACRL) Health Sciences Interest Group, and the Canadian Health Libraries Association (CHLA).

Subjects – There were 430 participants.

Methods – The online survey, created in REDCap, was distributed electronically across multiple mailing lists during June and July of 2019. Quantitative analysis included descriptive statistics and ANOVA conducted in R with reliability determined by Cronbach's alpha.

Main Results – Professionalism scores for health sciences librarians were lowest in public service and self-regulation, and highest in professional organization as referent, autonomy, and sense of calling. Individuals with a degree in health sciences scored lower on a sense of calling than individuals with Library and Information Science (LIS) degrees. Faculty benefits such as tenure decreased sense of calling. There were statistically significant differences according to role (e.g., archives, administration). Subject specialty librarians had lower scores in most attributes.

Conclusion – Health sciences librarianship does not clearly meet the criteria of a profession. Its heterogeneity of specializations and receptiveness to diverse backgrounds and perspectives are possible threats to its ability to create a cohesive identity. Further, duties that can be considered non-library work appear to correlate with lower professionalism scores, even when they are associated with faculty status.

Commentary

This study was appraised using the Center for Evidence Based Management's Critical Appraisal Checklist for a Cross-Sectional Study (2014). The study addressed a clearly focused question with an appropriate methodology. The sample selection was clearly described and, while it likely introduced bias, the authors acknowledge this in their manuscript, increasing the trust in their findings. Assessing the representativeness of this sample is challenging because so much of the sample was derived from subscribers of electronic mailing lists that require membership to a professional organization, a potential financial barrier. However, this does potentially offer insight into why involvement with professional organizations consistently received higher scores than other markers of professionalism. Additionally, the utilization of multiple mailing lists means we cannot truly determine if there was a satisfactory response rate, as the number of members is unknown. The proportion of respondents who were members of multiple mailing lists surveyed is also impossible to ascertain. The measurements can be considered valid and reliable, as the authors used a validated tool. Statistical significance was assessed, and confidence intervals were provided. Overall, despite the challenges of the sample, the results have meaningful applications to medical center and health sciences libraries.

While this study aimed to determine if health sciences librarianship qualifies as a profession according to its members, its most meaningful findings are probably for the administrators and managers of health sciences and medical center libraries. Faculty status benefits and expectations cannot consistently be said to improve professional identity. Archivists, administrators, and collection development librarians had higher scores than their peers in subject specialty, reference, and research services positions. These latter positions are outwardly patron-focused and typically involve higher interaction rates with library patrons. The authors identify some possibilities to explain this, particularly the likelihood of librarianship as a second career for these individuals and that "librarians working in subject-oriented roles must often learn new skills and expand their services," contributing to burnout (Koenig et al., 2021, p. 15). Regardless of cause, these findings should be concerning because the individuals most likely to interface with patrons are the least likely to hold a strong professional identity as health sciences librarians. Efforts should be made to understand the nuance of these findings. At the same time, other research could explore how to help these librarians balance the perceived and tangible burden of maintained subject matter expertise while preserving connection to librarianship.

The authors do address that the source of their sample (professional electronic mailing lists) likely contributed to professional organization as referent receiving higher scores in general. The potential for bias here is tricky. While it is easy to assert that members of a professional organization will likely

value it, it is also true that many health sciences librarians must maintain these memberships and may not view it as a straightforward benefit. Thus, while membership in a professional organization or guild is a key component of the Richard H. Hall Professionalism Inventory instrument, it is less clear how valuable it is as an indicator for health sciences librarianship. While the Richard H. Hall criteria are vetted and validated to determine a profession, librarianship is known for its adherence to core values, such as lifelong learning and a right to privacy (ALA, 2019). Asking respondents about core values and seeing how agreement with those values correlate with the Richard H. Hall criteria would have provided greater context to the findings.

In conclusion, we cannot confidently consider health sciences librarianship as a profession according to this study, in that scores in professionalism, professional organization, public service, autonomy, self-regulation, and sense of calling were not homogenous and strong. However, the exact reason for this cannot be said, as some members of the proposed profession do strongly identify with some of these attributes. Further research is needed to understand the source of these attitudinal differences, both for the long-term future of the profession and the real-time work life of its members.

References

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