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**Critical Librarianship and Medical Librarianship**

Critical librarianship is about applying “the principles of social justice to our work in libraries” (Barr-Walker & Sharifi, 258) This is my first encounter with the term, but I am familiar with the concept of librarians functioning as social advocates for the rights and treatment of minorities.

While librarians work to provide equal access to information as well as services to all users, at what point does advocating for a minority turn into imposing one’s beliefs on those who adamantly disagree? I am socially progressive, but when working at the Gillis Library, I do not contradict patrons who make socially conservative commentary. My priority is to provide the highest level of service to all patrons regardless of their personal beliefs. It would be counterproductive to alienate a significant portion of the clientele of the Gillis Library.

When I think of medical libraries, I think of how they support a working hospital. It never really occurred that a significant portion of a medical library’s clientele would still be graduate students.

I am not sure I agree with the term “feminist ethic of care,” when Jill Barr-Walker and Clair Sharifi defines as interacting with our users as fellow humans: asking how users are feeling.” The flip side is that males don’t interact with their fellow humans and lack the disposition to personalize their reference interactions.

I am somewhat perplexed that “Critical librarianship in health sciences libraries: an introduction” mentions the principles of shared decision-making. Whether they be decisions between a doctor and patient or a team of healthcare providers, I am not sure what place a medical librarian would have in decision making other than providing the stakeholders with as much relevant information as possible in a timely manner. Currently, it is my understanding that medical librarians should not be making any medical decisions.

“Financing North American medical libraries” in the nineteenth century was an informative read. I found it interesting that the development of medical libraries is primarily shaped by three different generations of physicians. I also found it noteworthy that there is still some debate on whether medical libraries should be repositories or more focused on current literature. From my exposure to medical libraries in working hospitals, a medical library’s main function was to assist medical professionals in determining the best course of treatment. In terms of whether medical libraries should function as repositories, I do not yet know enough about medical libraries to have a strong opinion on the issue.

I agree with most of the principles outlined in “Code of Ethics for Health Sciences Librarianship,” but I find it intriguing that one of the principles outlined is neutrality when the premise of critical librarianship is in direct opposition to this principle.

References

Barr-Walker, J., & Sharifi, C. (2019) Critical librarianship in health sciences libraries: An introduction. *Journal of the Medical Library Association*, *107*(2), 258–264. doi: 10.5195/jmla.2019.620

Belleh, G. S., & Luft, E. (2001). Financing North American medical libraries in the nineteenth century. *Bulletin of the Medical Library Association*, *89*(4), 386–394.

Medical Library Association (2010). *Code of ethics for health sciences librarianship*. Retrieved from: <https://www.mlanet.org/p/cm/ld/fid=160>