MLA
ORAL HISTORY COMMITTEE
INTERVIEW
WITH
JANET DOE
MEDICAL LIBRARY ASSOCIATION
ORAL HISTORY PROGRAM

STATEMENT OF GIFT FOR ORAL HISTORY INTERVIEWS.

I, Janet Doe, give to the Oral History Program of the Medical Library Association the magnetic tape recordings of the interview(s) held on July 20, 1977 between Estelle Brodman, PhD and myself, together with any transcript(s) that may be made from these recordings ("the material") subject to the following conditions:

1. The material shall be available to librarians, historians, scientists, qualified scholars who wish to use them for research purposes.

2. Although any portion of the material may be copied, it may be published only with the express written permission of the President of the Medical Library Association or anyone the President designates for that purpose.

3. A copy of the tape will be placed in the Archives of the Medical Library Association.

Donor

Date

Accepted:

Estelle Brodman
Chairman, Oral History Program
Medical Library Association

August 17, 1977

Date
Janet Doe Interview

Summary

Janet Doe was interviewed for the Medical Library Association's Oral History Program by Estelle Brodman on July 20, 1977. In this interview, Miss Doe discusses her early training as a nurse and her move into librarianship. Her experiences as a student at the New York Public Library School are briefly recounted and she expresses her views on library education, especially for the medical librarian.

The changes she has seen in the profession during her thirty-three year career and her involvement in professional activities are highlighted. Miss Doe also comments on changes that have taken place since her retirement in 1956, particularly the impact on medical libraries of automation and the Medical Library Assistance Act of 1965. She also talks about the role of women in the profession.

Doe's participation in the American Library Association's report on the Army Medical Library is discussed, as is the report's impact on other medical libraries. Her early involvement in MLA and the Association's relationships with the American Association of the History of Medicine and the Special Libraries Association are reviewed. Miss Doe then comments on her editorship of the first two editions of the Handbook of Medical Library Practice and notes the changes made in the second edition. She discusses the Bulletin and other MLA publications.

The interview concludes with a brief comment on her significant historiographical contribution, The Bibliography of the Works of Ambrose Pare, published in 1936.
# Janet Doe Interview

## Table of Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Biographical sketch</td>
<td>1</td>
</tr>
<tr>
<td>Entry into librarianship</td>
<td>1</td>
</tr>
<tr>
<td>Changes in medical librarianship</td>
<td>3</td>
</tr>
<tr>
<td>Role of women in the profession</td>
<td>4</td>
</tr>
<tr>
<td>Army Medical Library Report</td>
<td>5</td>
</tr>
<tr>
<td>Medical Library Association</td>
<td>6</td>
</tr>
<tr>
<td>Handbook editorship</td>
<td>7</td>
</tr>
<tr>
<td>Views on MLA's contributions</td>
<td>8</td>
</tr>
<tr>
<td>Work on Ambrose Pare</td>
<td>9</td>
</tr>
</tbody>
</table>
INTRODUCTION

This is July 15, 1977 and this is a biographical sketch of Janet Doe. Janet Doe was born April 19, 1895 in South Newbury, Vermont. She received her bachelor's degree at Wellesley College majoring in science and then proceeded to the Vassar Training School for Nurses and the Presbyterian Hospital in New York City where she practiced as a nurse. She was obliged to leave nursing because of difficulty with a knee and instead, went to the New York Public Library School where she received her certificate in librarianship. After she received her certificate, she became a revisor in the classwork of the New York Public Library School and for a while, a cataloguer at the New York Public Library. She left the New York Public Library in 1923 to become assistant librarian of the Rockefeller Institute for Medical Research in New York City, now the Rockefeller University. In 1926, she transferred over to the New York Academy of Medicine Library as head of its periodical department and in 1929 she became its assistant librarian and two decades later, in 1949, the first female librarian of the New York Academy of Medicine. She retired in 1956 to Katonah, New York.

Miss Doe had many relations with the Medical Library Association. She was Secretary of the Association for four years, in 1936 to 1940, its president from 1948 to 1949, was on many committees of the Association, including its International and National Cooperation Committee, received its Marcia C. Noyes Award in 1954, edited the first and second editions of its Handbook, the first edition in 1943 and the second edition with Miss Mary Louise Marshall as co-editor appeared in 1956.

She also had many relations with the Army Medical Library, the Armed Forces Medical Library, now the National Library of Medicine. She was a member of its survey team from 1943 to 1944, one of its honorary consultants, later a member of its advisory groups for several years in 1952 to 1955. She helped to index the National Library of Medicine Classification Schedules in 1945. She was one of the members of the subcommittee of consultants on the use of medical indexes and her last public appearance before retiring was to give testimony at Congress on the bill to transfer the Armed Forces Medical Library to the Public Health Service and to make it the National Library of Medicine. This occurred on April 10, 1956.

Miss Doe has published many papers, has made many speeches, including radio broadcasts and has edited other people's work. In 1956, no fewer than 27 papers and speeches were listed, as well as two books of which she was the author and two as the editor. Since that time, she has been involved in writing a history of Bedford Township and Katonah, New York and several volumes of this have already appeared. Her greatest scholarly work, perhaps, is her Bibliography of the Works of Ambrose Pare', which appeared in 1937 and was characterized by many reviewers then and since as a "strikingly fine work", as the "definitive job in the field", as a vitalized bibliography because she brought in a great many parts of the world which were not purely bibliography - bringing in relations of time, place and circumstances, which brought forth the meaning of the works which Pare' had published. Her scholarly work has been distinguished and lasting and no more accurate an account of this work of Ambrose Pare' is to be found than in Walter B. McDaniel II's description of it as a "distinguished and lasting contribution to medical and bio-bibliography".
Miss Doe's interests have always included music, both opera and German lieder, she is an excellent sketcher and painter, she likes to cook and to fish and is an extremely hospitable hostess. Two biographical sketches of Miss Doe have appeared in the Bulletin of the Medical Library Association, both written by Miss Gertrude Annan. The first appeared in volume 36, 1948, p. 413-414 and the second appeared in volume 45, 1957, p. 281-284, both have portraits of Miss Doe.

In 1965, the Medical Library Association founded the Janet Doe Lecture series in her honor. This lecture series is on the subject of the history or philosophy of medical librarianship and a large number of distinguished members of the medical library field have given the Janet Doe Lecture. It has become the highlight of Medical Library Association Annual Meetings. This is the end of the biographical sketch of Miss Doe.
INTERVIEW WITH JANET DOE

July 20, 1977

Janet Doe (A): I was born April 11, 1895, not April 19th. Before attending the library school, I worked in the New York Public Library as an untrained assistant and it was there that I realized that you had to have training in librarianship and, therefore, decided to go to the New York Public Library School before pursuing work in the library.

Mention of my radio broadcasts are vastly exaggerated, I only did an occasional one and it had very little consequence. Concerning the writing of history of Bedford, I had no connection with the writing, in fact the history has not yet been written. All I did was make transcripts from the original town records. Mention of my painting is also an exaggeration, I did it as a pastime and enjoyed it very much, but it was wholly unserious. That's all (the corrections).

Dr. Estelle Brodman (Q): Thank you, that's less than I thought there might be. Now could I ask you, please, if you would go over your work as a nurse and why you left it?

A: I went into nursing as a result of a questionnaire from the authorities who were organizing a Vassar training camp for nurses late in World War I. They were trying to get college graduates to enter the training field. We went to Vassar and had several months training and then went on to hospital training. I entered the Presbyterian Hospital for several months before I had to give up because of trouble with my knee. I would probably not have gone into library school if I had not been taking care of an uncle in New York City who had had a stroke. My aunt wanted help. So I spent my spare time working in the public library as an untrained assistant. From there I went on to library school.

Q: Then you never got into war work at all as a nurse, but you said you were in the hospital during an epidemic?

A: My introduction into hospital work itself, after the training at the Vassar training camp, was like plunging into cold water. It was during the severe epidemic of flu and patients were crowding the hospital. They lined the corridors. Cots were put in every available spot. It was commonplace to have several people die every night.

Q: That ought to start you off well for libraries. When you decided to go into librarianship and went to library school, did you plan to go into general librarianship, or had you planned all along to go into medical librarianship?

A: I had no idea there were any special libraries. I just went on and continued what library experience I had had in the public library and, in library school, trained for general librarianship. It happened that the year following library school, I stayed on at the library school as revisor and was fortunate enough to be on hand when the Rockefeller Institute inquired of the library school for a candidate to work in their library. I was right on the spot. I was fortunate enough to be suggested for it.

Q: In the modern day theory of revisionist's history of librarianship, there is one theory that says college graduates were asked to come into librarianship because they knew so many different languages and so many bits of knowledge, which the untrained
person didn't, and they were willing to work for a pittance, because it was about the only genteel thing that a trained person could do, if she was a lady. Do you agree with this?

A: I certainly would. I don't believe you could get anywhere in medical librarianship without some knowledge of French and German and a little smattering of Spanish, Italian. Anything else would come in handy.

Q: I think most of the librarians today cannot read anything, including their native English. Were there any great teachers at the New York Public Library School that inspired you and have kept you going throughout the years?

A: My recollection of library school is very, very hazy. I remember Miss Sutliff, who taught reference. She was more interesting in her love of (?) county in Ireland and the poetry that emanated from there and in taking us on picnics on Staten Island. Miss Timmon, who was registrar, was excellent in training me in recataloging the school library that year. So, I got a little extra training, as well as enjoying private instruction, as it were.

Q: The New York Public Library School, as you know, finally ended after the Williamson Report and became part of the Columbia University Library School. Have you seen any great changes in education for librarianship in the past half century?

A: Well, not knowing what changes have taken place since I was in library school, it's a little difficult to say. I think they take in a wider range of topics and probably there is less emphasis on the more elementary procedures in library work and much more emphasis on administration and, of course, there has to be a great deal of automative procedures than we have had, or even dreamed of.

Q: One of the changes has been going from generalist librarianship to specialist librarianship, such as law librarianship, medical librarianship, music librarianship. Do you believe that this specialization is good for librarianship, or even inevitable?

A: I'd say it was certainly inevitable. How can a person administer a library unless they are specialist, not in the subject, but at least specialize in learning about the subject? And to have some, at least rudimentary knowledge, of the subject itself. You don't have to be a doctor to be a medical librarian, but you do have to know something about the various medical subjects and the various different reference works. The whole background of the literature is different from general librarianship.

Q: Then what do you think would be the ideal education for a medical librarian?

A: I would say that to start with a pre-medical course in college. If possible, to spend some time working in some kind of medical institution - a hospital, or a clinic, or occupational therapy, or mental institution. Something to get some first hand information on relations between doctors and patients - the kinds of things that doctors want to know.

Q: Thank you, I doubt very much if a great many of our chief medical
librarians have this information. One of the things that the Medical Library Association is best known for is its continuing education courses and efforts. It has been working in this field for many, many years. Would you like to comment about the Medical Library Association's work in continuing education for medical librarians?

A: I can only generalize that I think it's the salvation of medical librarianship, but since I have been out the last twenty years, I don't know very much about the courses being taught, but I do know that they are essential to the continuation of the improvement of our profession.

Q: You were in the medical library field almost half a century - forty years anyway from - 1923 to 1956, 33 years. Did you see many changes in that time, and if so, what kind were they?

A: The changes in that period were not anything like so extensive as they have been since that period. I left, and I'm very thankful that I did leave, before the automotive age came in. It necessitates an entirely, not different, but a much increased spectrum of instruction to prepare a medical librarian today for the kind of job that he must do, compared to what a general librarian had to have in my day.

Q: You think that automation is the key to the changes, or were there other changes you think were equally important or more important?

A: The automation has changed, to some extent, the relationship between the physician and the librarian, because it has made available to the physician directly much information that had to be gathered for him by the librarian in the old days. It also has meant that the librarian has got to be trained to use that equipment and to make it known to her patrons.

Q: Most of the chief librarians, however, hardly ever see a reader today. They spend a good deal of their time worrying about budgets, personnel matters, buildings and non-medical librarianship problems. Do you think that this has some effect on the caliber of people who go into medical librarianship?

A: I would think that it would have to change it very considerably. It's not an entirely different, but a vastly different, body of knowledge and collection of abilities that the librarian must have, than he dealt with books and printed indexes and with a physician who came with his personal question to the librarian. Administration is enormously magnified in the requirements of the librarian today. In the early days, one concentrated on books and indexes and the reader who came in and wanted help personally. That is answered in such a different way today that it is difficult to compare it.

Q: One of the things that always interests me in the change, even in my time as a medical librarian, is the size of the libraries. The average size of a medical school library just about 15 years ago was 55,000 volumes. It's now grown to over 100,000. Do you think that size does, or does not, make any difference in the quality of the problems it brings?
A: Of course, that's one of the basic reasons for the changes. It's a ten or fifteen-fold bigger problem than it used to be and that's one thing that has involved the difference in administrative problems.

Q: The Medical Library Assistance Act of 1965 came after you retired, but you were very prominent in getting it through, I remember. Do you think this has had a good or bad effect on medical librarianship?

A: Well, a little of both. It has made the librarian rely on outside help rather than on herself, but it also has greatly increased the resources available for the physician in the work in the medical field.

Q: You have been talking about the medical librarian in the female sense - "she". You were the first woman librarian of the New York Academy of Medicine. What was the position of women in medical librarianship, or in librarianship in general, at that time? And how do you think it has changed? Has it changed for the better or for the worse?

A: Well, in the early days, practically all medical librarians were female. The handful of men stood out quite often just because they were asked to make resolutions in a loud voice at the annual meeting, but very, very few men, or boys, went into medical librarianship. Not until salaries came up to where they would be attractive, did men come in any large number. That's since my day and I can't comment more, except that I know there a great many more, and that many more of the high positions are occupied by men.

Q: Were you saying that in your time the high positions in medical libraries were occupied by women? Is that what I heard you say?

A: I would say that is approximately correct, because they occupied all of the positions with very few exceptions. They were heads of the medical school libraries except for Boston Medical, and the College of Physicians', and the New York Academy of Medicine and, of course, the Army Medical Library, but all of the medical school library librarians were feminine in those days.

Q: Do you think that it's only the increase in salaries that have brought the men in and have pushed down the women, so that they are not so much heads of the medical libraries?

A: Well, I think the salary is a large factor, but I think also the prestige of medical librarianship has attracted men as well as women. I think the MLA is responsible for the production of that prestige.

Q: How?

A: It started with the realization that more education was needed in medical librarianship. There was a vast amount of effort required in promoting that education. The enunciation of standards for medical librarians was what produced the increased educational opportunities. In order to make standards work, there had to be certification to show that a person had reached those standards.

*in Philadelphia
Out of that, I think, has grown the great impulse towards increased... the necessity for increased abilities in medical librarianship in order to keep up with the demand for knowledge and for personnel.

Q: You mentioned the certification program of the Medical Library Association. You were president of MLA the year it went through, in Galveston, I remember. What were some of the arguments for and against it?

A: Well, I think that the old timers resented the idea that the newcomers would be able to meet them on the same level; that the newcomers did not have the experience; and they (the old timers) would lose caste eventually by not being certified themselves; to have the young fry come in and supercede them. But the way it was set up, people who had experience equivalent to meeting the standards would get certification and that simply had wiped out the objections.

Q: I would like, if we have time later, to come back to this, but I'd like to go back to your work as the first women who was librarian of the New York Academy of Medicine. Did you find any special difficulties because you were a woman?

A: None whatever.

Q: I'll put that in gilt when I type up this. The number of free standing academy libraries in the United States has shrunk decidedly from a large number of society and academy libraries to only a handful. To what do you attribute this?

A: The vast subsidizing of medical school libraries in order to produce more physicians and better equipped physicians has made it necessary for their libraries to be made commensurate with their responsibilities. In the early days, most of our patrons were practicing physicians or surgeons and medical students, but in the society libraries, it was mostly the general practitioner or someone doing research on his own. Since the great increase in medical schools and the higher standards for them and for medical libraries, the academy libraries, unfortunately, have greatly reduced resources. The general medical profession gets much more of its literary needs met by the medical schools with which most of them are doing research or study. And the practicing man is much more liable to go there for his information than to an academy library. Furthermore, it's excessively expensive to keep up these big libraries and they just don't have the funds to do it.

Q: If we could turn now to your work at the Army Medical Library, the ALA report on the Army Medical Library was the milestone which led to its revitilization and you were one of its investigators. Could you tell us something about the history - how it came into being, who chose the members of the committee, how it worked and who wrote it and so on about the Army Medical Library Report?

A: The survey was actually initiated by Helen Norris Lucke, who was one of the new people brought in to the Army Medical Library. She suggested it to the Colonel, who was then Librarian, and also thought that the ALA, which was accustomed to doing library

*Colonel Harold W. Jones
surveys might be invited to help. Keyes Metcalf was the one chosen to head the committee and I don't know if he chose the people to help him or not. Anyway, they had three medical librarians and the head of the Harvard University Catalog Department to help Mr. Metcalf with the administrative end of it. We were invited to Washington to go through the library and get a general idea of what there was there. Each member of the committee was assigned a special topic to study. We were allowed to go at any period that we wanted, and stay as long as we wanted, investigating and we were given the freedom of the departments that we were concerned with. We were under no restrictions as to whom to see, or what to ask, and we spent, sometimes, a week there at a time, and we'd go back later on and follow up with what we had gained the first time. Periodically, Keyes Metcalf had the committee called together and we reported on our progress and, of course, each discussed what they'd found out in his own department. Probably the report was actually written by Andrew Osborn, with Mr. Metcalf, from the written reports each member of the committee gave in. Then when the reports were put together and they had been discussed in committee. They were eventually boiled down to the final report.

Q: This report, of course, had an enormous effects on the Army Medical Library. Would you also like to tell us something about what you think it's effect on other medical libraries was?

A: I think it perhaps stimulated other medical libraries to have surveys of their own institution, if they felt it was inadequate. I know that there were several such surveys made, although far from on the grand scale that was done at the Army Medical Library, but it was the same kind of investigation. There were special departments sometimes that were investigated, or just the general aspect of things. Why they were satisfactory. What needed to be done to improve them.

Q: After that report was made, there was a group called the Honorary Consultants to the Army Medical Library and then another one, the Advisory Group. What were the relationships between these two groups?

A: My recollection about that is very hazy. It is my impression that one more or less superceded the other.

Q: Yes, I thought so too. Now, if I could finally end up with some questions about the Medical Library Association itself. You joined the Medical Library Association sometime between 1923 and 1936, I assume, because you became a medical librarian in 1923 and you were its Secretary in 1936. Did you have any other positions in the Association between 1923 and 1936, or was the Secretary's position the first one you had?

A: That was the first connection that I had. In those days, very few individuals became members of the Association. Their library was a member and they attended meetings as members of their library's staff. But very few individuals were active members, until some years after the beginning. I can't remember when I joined, but my first meeting, I think, was 1928, when they met at the Academy Library. I'm very hazy about that. But it was my first observation of MLA close hand.

Q: I was going to ask you what MLA was like in the 1920's and 1930's
and the answer must be "hazy". But certainly, there were a great many more physicians than there were librarians and they didn't have very many committees and their budgets were not very great. Did they have any particular goals and purposes or relations to other groups which are not commonly found in the by-laws?

A: Well, the people tried to meet at the same place, either following or after, as the meeting of the Association of the History of Medicine. Another connection I remember is that with Special Libraries Association. There was quite a little feeling about members of the MLA who also belonged to SLA, Biological Section. It was felt that it was a division of allegiances; it was not quite appropriate. I don't know if that feeling ever continued, I certainly never heard about it in recent years.

Q: We have heard recently a great many complaints from hospital libraries in the Medical Library Association, that they are overshadowed by the medical school libraries, which have larger budgets and larger staff. Did you have that same argument or complaint in the 1930's or 1940's?

A: Well, there were comparatively few hospital libraries in the MLA in those days. The hospital libraries were poor; they had mostly untrained librarians and were only perhaps open half time. They were not full fledged medical librarians in those days.

Q: Very different from what they are now. Is this why the first edition of the Handbook came into being?

A: That is a large part of it. In fact, I would say it probably is the main reason. It was felt that the membership of the MLA was growing and there was not sufficient facilities for courses to be taken. New librarians needed some kind of guidance and older librarians also could find new methods and see what kind of problems their colleagues were trying to meet.

Q: You edited both the first and second edition of the Handbook. I'm sure you had certain problems in both that were common, like authors who didn't send their manuscripts in on time. But were there any differences in the editing of the two editions?

A: That's the main complaint. One edition was held up a year or more because one writer did not get her contribution in on time. Another complaint was the difficulties with the publisher who had an enterprising young editor who insisted in changing, altering the language of our contributors and our contributor flatly said that unless her contribution was printed exactly as she wrote it, she would withdraw it. The ALA editor backed down.

Q: You also had about twice as many words in the second edition as in the first edition. Had medical librarianship changed that much or you just got better authors?

A: I'm not going to cast any aspersions on the authors of the first edition. Medical libraries certainly changed enormously in that period.

Q: Another thing which the Medical Library Association has done over the years is to publish its Bulletin and other publications and you have been involved in that too. Could you comment on the publications of the Medical Library Association?
A: Their publications, I think, reflect the coming of age of the young, small, struggling organization, manned by perhaps self-taught people or with less education than they would have liked; and an organization which grew into a really professional one with personnel with enormously different backgrounds and abilities and experience. In that period, the Bulletin shows the enormous progress that MLA has made at that period of time.

Q: In general, what do you think were MLA's outstanding contributions and what do you think were its greatest weaknesses? Can you help in that?

A: Well, I think that MLA's outstanding contribution is probably the recognition of the need for training and providing the facilities for obtaining it. It has developed along with the new techniques and demands that modern equipment and resources have produced. I think that increase in the number of special subject groups is probably a good thing. It brings together people with more specialized interests, than just general medical library work, and gives them a chance for personal contacts that they might not have in a larger, general group. I think, however, that one would have to guard against too much subdivision of the old association. Some means must be found to keep it together as an entity and yet provide for individual needs of people in different lines of work. The introduction of modern equipment, mechanics, automation, has to some extent, met a gap between the librarian and her patrons. The physician can now get a lot of information direct without going through the librarian, and yet, he is in many ways dependent upon the librarian for information about such sources. The increase in size and the influence of so many new medical librarians, taken from the general field without special knowledge of the medical field, has made a difference too. They do not have, perhaps, the same understanding of the physician's attitude as we, in the old days had when the physicians were more friends of the librarian than just somebody off the street, so to speak.

Q: There were many other questions which I had hoped to ask.

A: You asked if there were any other comments. There is a comment about the Bulletin. It has changed greatly over the years. How could it be improved? The "Journal Notes", giving notice about articles in other publications outside the medical library field, I have always thought were extremely valuable and I have read them with much interest. But I also realize it's an enormous amount of work to prepare that each time. And I wonder whether or not other people have gotten enough out of it to justify the expense, and the trouble, on the part of the author. I would hate to see it given up, but if financially and from the point of view of hard work, I think it possibly could be reconsidered. One other thing that I think perhaps could be done. Obituaries could come out a little more promptly in the Bulletin to keep us aware of who's gone.

Q: Do you think the MLA News, which has started just a few years ago, is a good way of keeping up with fast actions?

A: Yes I do, but perhaps a little more of what is in the News could be in the Bulletin, where people would see it.

Q: How about your work with Pare', it's like my translation of that German manuscript, we do that for fun. Would you end your
interview by telling me a little bit about that?

A: Well, the writing of Pare' was the most fun, I think, I ever had. It gave me an acquaintance with a great figure of medical history, who became a personal friend over the years. It also gave me a knowledge of bibliographical work, which I learned out of McKerrow's Textbook on Bibliography, having known nothing about it before. I followed one of the greats, Kane's Bibliography of William Harvey. If anybody working in a medical library happens on some point of interest, I would advise them to follow it up somehow, somewhere and try and get firsthand acquaintance with some point, some personality in their field.