

Column: A New Generation in Librarianship

A Tale of Two Studies: Successful and Unsuccessful Librarian Research Projects

Gina Genova, University of Louisville

ABSTRACT

In institutions where librarians hold tenure-track faculty status, they are expected to conduct and publish original research. Much attention is given to formulating ideas for research, but the recruitment process is equally important for common methods such as surveys, interviews, and focus groups. In this column, an early-career librarian discusses her experiences with recruitment for two IRB-approved research projects and offers some considerations for librarians planning survey- or interview-based research.

KEYWORDS

research, tenure-track, recruitment

SUGGESTED CITATION

Genova, G. (2023). A tale of two studies: Successful and unsuccessful librarian research projects. *Journal of New Librarianship*, *9*(1), 41–46. <u>https://doi.org/10.33011/newlibs/15/3</u>

This is an Open Access article distributed under the terms of the Creative Commons Attribution 4.0 International License (<u>http://creativecommons.org/licenses/by/4.0</u>), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.



Project 1: Preprints in the Biomedical Sciences Survey

Preprints are completed versions of scientific articles that have not yet undergone the peer review and publication process. Preprints have a long history in certain fields, such as physics and economics, but they are not standard practice in the biomedical sciences. A medicine-specific preprint server, medRxiv, was launched in 2019, and medRxiv and other preprint platforms saw significant use from the biomedical community during the COVID-19 pandemic as a means to rapidly disseminate knowledge during the public health emergency. (Nabavi Nouri et al., 2021).

The use of preprints in the health sciences is bound to remain relevant even as the pandemic wanes due to the NIH Preprint Pilot. The Pilot started in June 2020 with a focus on COVID-19 research. In January 2023, it entered phase two, which will lead to the inclusion of more preprints in PubMed, the major biomedical database (*NIH Preprint Pilot*, 2023). While there are no current, public plans to require preprint posting for NIH-funded research, given current PubMed Central deposit requirements, the 2023 Data Management and Sharing Policy (*2023 NIH Data Management and Sharing Policy*, 2023), and the continuation of the Preprint Pilot, it is not outside the realm of possibility that the NIH might introduce such a requirement in the coming decade.

At the time I started my position, preprints were new to me, but I noticed there was ample discussion of them among both librarians and health sciences researchers. Preprints have the potential to offer a variety of benefits, such as greater access to research, the opportunity to receive feedback on work prior to journal submission, and the ability to publish negative or replicatory results that do not always interest journals. However, concerns remain among many researchers about the lack of peer review for preprints, as well as the potential that lay people might read preprints and not understand that they have not been vetted by the wider scientific community.

I cannot comment on how these supposed benefits and drawbacks play out in reality, but the discussion intrigued me, and several webinars spoke of the role of preprints and what librarians needed to know about preprint literature (Ali, 2021).

I decided to survey my institutions' researchers on their perceptions of and experiences with preprints. My goal was to use the results to inform a library workshop or other programming (and publishing the results, of course). I designed and obtained IRB approval for a survey, which my colleagues included in our library's monthly email news blast to the campus community.

The response was... crickets.

Not a single person responded to the survey. We maintained the survey as a library news item and it was mentioned in several library orientation sessions, but no responses came in. I considered directly emailing researchers on campus, but that felt somewhat intrusive (as I was almost completely unknown on campus at the time) and unlikely to help (as they had not read previous communication from the library or had seen it and decided not to participate).

After around six months of silence, I accepted that the project was not viable, at least not in its form at the time. I started thinking about other research ideas.

Project 2: Health Information and Kentucky Librarians

In 2022, I joined the Ambassadors Program of Region 1 of the Network of the National Library of Medicine (NNLM). In addition to providing clinical services to several clinical departments, part of my job description is to manage outreach efforts at the library—something that had been slow, even borderline nonexistent, during my first year of employment due to the continued cancellation of community events as a result of COVID-19. Goals of the Ambassadors Program include providing health information and promoting NNLM resources to individuals and organizations outside of the ambassadors' institutions, which seemed a natural fit to expand my outreach-related work.

Public libraries seemed like a promising place to start collaborating with outside organizations. Information provision is a key component of any public library's mission, many public libraries are already engaged in health and/or wellness programming, and variety of collaborative projects between academic health sciences librarians and public librarians have already been reported in the literature (Epstein, 2019; Koos et al., 2019; Wessel et al., 2003).

While I was considering options for outreach to public librarians, I remembered a project I had assisted with during my graduate program. A faculty member at my school had been developing continuing education opportunities for public librarians about working with their local governments. Several other graduate students and I had visited public libraries throughout the state to interview librarians about their current collaborations with their municipal governments and their continuing education preferences.

That methodology felt applicable to this situation. My odds of success would be higher if I got an idea of public librarians' experiences with health information—which topics they encounter most often, what resources they already use, whether would find additional training useful, and so on—before approaching libraries with specific ideas for programs (and, of course, I could publish the results.)

I created an interview protocol with eight questions and again received IRB approval. The questions probed both librarians' experiences with providing health- and wellness-related reference services (e.g., "What health and wellness-related topics do you most frequently receive questions about?") and relevant background information (e.g., "What do you perceive as the main health needs in your community?"). The protocol was flexible in whether the interviews were conducted in-person or via Zoom to accommodate librarians' schedules and preferences. Initially, I attempted to recruit participants to the study by posting to ALA's message boards and by inquiring with the Kentucky Library Association about posting to their email listserv. KLA did not get back to me, but I did receive some responses from the ALA postings.

Of the four or five initial responses, two were from eventual study participants. The others were from people working in more administrative roles asking for information about the project. Although those contacts did not produce interview data, they were helpful in creating connections in the state. All in all, a promising start!

A few weeks passed, the ALA post faded into obscurity on the message board, and I accepted that I would recruit no additional participants via that route. I had asked the participants and the administrators to feel free to send my contact information to any colleagues that might be interested, but "snowball sampling" did not work out for this project. I had some ideas for moving forward with recruitment, but other tasks and projects kept me busier than in the previous months, so the interviews sat on the back burner. Things were better than with the preprint survey, but only marginally so—two interviews does not a research publication make.

My schedule became freer around the holidays, and I acquired a directory of contact information for public libraries in Kentucky from the website of the Kentucky Public Library Association. I dislike cold emailing people, but this seemed like the best chance I had to recruit additional participants. So, after the holidays, in batches of ten per day, I emailed roughly one hundred twenty library directors in the state of Kentucky.

I received responses from ten libraries. Nine librarians from eight libraries scheduled interviews, and one library arranged a group interview for their public services staff. This resulted in a total of twelve interviews across the project lifespan.

Some work on this project remains to be done. The coding process is ongoing for the interview transcripts, after which they will need to be extracted for themes. So far, the preliminary results were presented as a poster at the 2023 joint meeting of the Medical Library Association and Special Library Association in Detroit, Michigan.

Reflections

The main lesson I learned from this experience is: recruitment is hard. Librarians may not conduct clinical trials, which may be some people's first thought when they hear "study recruitment." Yet librarians do often employ methods like surveys, interviews, and focus groups, and those methodologies require participants. The simple truth is people are busy. People (especially those working or studying at academic institutions) receive emails all day, every day. People may also not see the purpose of librarians conducting research if that research is not directly related to the development or assessment of library services.

The ability to offer incentives (cash, gift cards, etc.) may help ease recruitment challenges, but my library does not have the extra funding for incentives, even smaller ones. I

suspect this is common for librarians who are not working from grant funding. However, I can think of two things that may have contributed to the second study's greater success with recruitment.

The first is the participant pool and how relevant the study topics are to them. To start, public librarians may be more aware of the types of research that academic librarians pursue than clinician-researchers, and that may translate to increased interest in participating in librarian-led studies. As for the study topics, in my time at campus, I have heard very little about preprints from actual students and faculty members. Although preprints have received more attention since the pandemic and there is discussion and debate about them in the wider scientific community, it is entirely possible that posting and reading preprints is simply not of interest to my institution's researchers at this point in time. However, nearly every public librarian has received a health- or wellness-related reference question or material request in their career, and many receive those queries on a regular basis.

The second factor is the use of direct contact for recruitment. The preprint survey was only ever distributed via mass, indirect methods, whereas the health information and public librarians study utilized both indirect and direct contacts. Considering that indirect methods (the message board) resulted in two interviews while direct emails resulted in ten, individual invitations were by far the more successful method for that study. It is possible that, had I had more contacts at the time and been able to distribute the preprint survey in a more direct, personalized manner, I would have received some responses.

To sum up: recruitment can be a challenge. The relevance of a study topic to the potential participant pool matters, and more direct methods of solicitation are useful where practical and appropriate.

Finally, another important lesson I learned is, it is okay to discontinue research projects. I conducted a literature review. I designed a survey. I obtained IRB approval, which, even for my ultimately exempt studies, entailed multiple hours of work over several requested revisions. It felt like everything was set, that I was on track for my first first-author publication. But, it turns out, not every study gets off the ground. Some studies might be able to be retooled. Things to consider could include: Are there other available avenues to contact potential participants? Was the original recruitment push at a time of year when people are busy (e.g., start of the fall semester) or out of the office (e.g., the holidays)? If the planned method is time- or labor-intensive, could it be adapted or changed to be simpler for participants? Was there some initial response to the project or complete silence? In my case with the preprints survey, it turned out to be more practical to move onto another project. I am glad I did.

References

- 2023 NIH Data Management and Sharing Policy. (2023, February 17). National Institutes of Health. Retrieved August 8, 2023 from <u>https://oir.nih.gov/sourcebook/intramural-program-oversight/intramural-data-sharing/2023-nih-data-management-sharing-policy</u>
- Ali, I. (2021, August 11). *HEALTH BYTES with Region 3 Unpacking the role of preprints and peer review*. Network of the National Library of Medicine. Retrieved August 8, 2023 from <u>https://www.youtube.com/watch?v=TAAIPCsuuvU</u>
- Epstein, H.-A. B. (2019). Hospital libraries partner with public libraries. *Journal of Hospital Librarianship*, *19*(2), 190-196. <u>https://doi.org/10.1080/15323269.2019.1600635</u>
- Koos, J. A., Saragossi, J., Stevens, G. A., & Filosa, S. (2019). A partnership between academic and public librarians: "What the Health" workshop series. *Journal of the Medical Library Association*, 107(2), 232-237. <u>https://doi.org/10.5195/jmla.2019.564</u>
- Nabavi Nouri, S., Cohen, Y. A., Madhavan, M. V., Slomka, P. J., Iskandrian, A. E., & Einstein, A. J. (2021). Preprint manuscripts and servers in the era of coronavirus disease 2019. *Journal of Evaluation in Clinical Practice*, 27(1), 16-21. <u>https://doi.org/https://doi.org/10.1111/jep.13498</u>
- *NIH Preprint Pilot*. (2023, January 30, 2023). National Institutes of Health. Retrieved March 8, 2023 from <u>https://www.ncbi.nlm.nih.gov/pmc/about/nihpreprints</u>
- Wessel, C. B., Wozar, J. A., & Epstein, B. A. (2003). The role of the academic medical center library in training public librarians. *Journal of the Medical Library Association*, 91(3), 352-360. <u>https://www.ncbi.nlm.nih.gov/pmc/articles/PMC164399</u>