

Census of Australian Health Librarians and Library and Information Services (LIS) by Health Libraries Australia (HLA)

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Introduction

The 2012 Anne Harrison Award was won by Melanie Kammermann for her research project aimed at undertaking a national census of the Australian health LIS sector. The biennial Award is administered by Health Libraries Australia (HLA) the national health group of the Australian Library and Information Association (ALIA). It was intended that the data collected would:

- provide an objective evidence base for advocacy and promotion;
- inform planning, policy development, and professional development for the sector;
- assist ALIA and HLA to target services to members;
- build a more informed sense of identity for the health library workforce within and outside the sector;
- inform and improve the profession's credibility and status among government policy makers;
- identify areas for further research and assist researchers to frame research methodology and interpret results more precisely.

The Census was conducted between October 2014 and February 2015 by Melanie Kammermann, supported by a project team comprising Gillian Hallam, Scott Hamilton and Lindsay Harris. The recommendations of the final report will be considered at the next HLA Executive Strategic Planning meeting (July 2017).

Aims

By conducting the census, the primary aims were to:

1. find out about the numbers and composition of health librarians and health library and information services in Australia;
2. report publicly on the data collected;
3. make the census replicable for the future; and
4. develop a web-based data collection and reporting system for current and future use.

Method

Many of the demographic and workforce data questions included in the census instruments were adapted from the Workforce and Education research project (Hallam et al, 2011) as they offered a validated measure, and a basis for comparing data over time. Two additional questions were asked about the respondent's organisation's structure and the types of library services offered.

The online census tool was built using a secure, industry standard Oracle database with Oracle APEX application front end. It was developed to provide online data entry, capture and storage capabilities for a large audience. User access to the census database was controlled through username and password. Respondents were required to register with an email address after which they were provided with a system generated password that could be changed once logged into the system.

Qlikview, a data analysis software tool, was used to analyse the data. The responses to open-ended questions were reviewed by the principal researcher for common elements and themes.

Results

Number of health library/information services

Australian health LIS presented in an array of operational and governance structures. Depending on the jurisdiction of the census respondent, a single response to the survey could represent the data of one or more libraries, branches or service points. As such it was resolved to use National Union Catalogue symbols (or some other unique identifier in cases where a service did not hold a NUC symbol) as the unit with which to measure the number of Australian health LIS.

Two hundred and nineteen (219) census responses were recorded. These equated to 267 unique NUC symbols. An additional 61 services that did not respond to the survey were further identified. This brought the total number of active Australian health LIS to 328, which equated to an overall 2 percent reduction in the number of health LIS between 2002, when the last census of Australian health LIS was conducted, and 2014. This small reduction would indicate that Australian health LIS, by and large, have weathered the economic storms of the past two decades. Any significant losses have been offset by new libraries or identification of previously unlisted libraries.

Workforce and service data

Workforce data were provided by 63 percent of all identified health LIS. Extrapolating this to 100 percent suggested a health LIS workforce that was approximately 1,250 strong made up of around 760 health librarians, 290 library technicians and 200 non-LIS qualified staff employed in the sector. Health LIS vacancy rates were around 10%, significantly higher than Australia's national job vacancy rate of 1.2%. It was also found that the number of potential retirees outnumbers the number of new graduates entering the sector (a ratio of almost 2 to 1), suggesting that the sector may experience a net loss of LIS qualified staff in the near future.

The health LIS workforce was largely female, the largest concentration (76 percent) located on the eastern seaboard, more than 70 percent located in a capital city, and around 60 percent operated in the government sector. Examination of various services indicated that, overall, health LIS continued to provide relatively traditional library services.

As only 15 responses were received from self-identified health librarians working in non-traditional settings (half of which were in research environments) no further summary statements could be made about this cohort.

Conclusion

Recent focus on workforce planning for the health sector and acknowledgement of the need to increase health librarians' profile in the context of the Australian health professional workforce lend argument to the potential benefits of engaging in extensive, systematic and ongoing data collection.

References

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