Introduction: Emerging Roles for Historical Medical Libraries

ON DECEMBER 6, 2013, the Historical Medical Library of The College of Physicians of Philadelphia convened, as part of its 225th Anniversary celebration, the symposium entitled “Emerging Roles for Historical Medical Libraries: Value in the Digital Age.” Sponsored in part by a Library Project Award from the National Network of Libraries of Medicine Middle Atlantic Region, this event offered a rare opportunity for librarians and researchers to discuss collectively the challenges and opportunities presented by the digital age.¹

The fact that the College Library chose to celebrate its past by hosting a conference centered on planning strategically for the future was particularly encouraging to many in light of the setbacks the Library experienced during the previous decade, when lack of funds led to changing institutional priorities and the library became accessible by appointment only.² But the College Library was not the only institution fighting to maintain its collection in the face of a dwindling budget. These circumstances prompted the American Association for the History of Medicine, in 2009, to create its Ad Hoc Committee on the Future of Medical History Libraries to address this overarching question: “How important are these physical collections with respect to historical research in medicine and health-related fields in the twenty-first century?”³ Unfortunately, the committee never issued a final report.⁴ Five years later, these same questions still weigh heavily on the minds of historians of medicine and library professionals alike, as many continue to be challenged with demonstrating the relevance of physical collections

1. This special issue of the conference proceedings was guest edited by Michelle DiMeo and Jeffrey S. Reznick. The original event was co-organized by Michelle DiMeo, Annie Brogan, and Naomi Adelman. Christopher Lyons, then President of Archivists and Librarians in the History of the Health Sciences, offered closing remarks, the main arguments of which have been incorporated into this preface. The co-organizers thank George M. Wohlreich, Robert Hicks, David Barnes, James M. Edmonson, Jan M. Goplerud, Steven J. Peitzman, Christine A. Ruggere, and Kenneth J. Weiss for chairing papers, curating exhibitions, and contributing to the lively discussion.

2. “What Happened at The College of Physicians of Philadelphia?” *The Watermark: Newsletter of the Archivists and Librarians in the History of the Health Sciences* 29, no. 3 (2006): 57–58.

3. W. Bruce Fye, “President’s Message: The AAHM and the Future of Medical History Libraries,” *Newsletter of the American Association for the History of Medicine*, no. 88 (Feb. 2009), available online at www.histmed.org/newsletters/feb2009web.pdf [accessed August 11, 2014].

4. W. Bruce Fye, e-mail message to Michelle DiMeo, July 9, 2014.

that are expensive to maintain while their digital surrogates increasingly abound online.⁵ Ultimately, there is a need for clearly articulating value to current or future senior administrators, including some who may not be immediately sensitive to the value of history itself, or to the libraries that serve as stewards of that history.

The proceedings of the College Library's 225th Anniversary symposium—offered here in open access format thanks to the generosity of *RBM*—represent a significant chapter in the conversation about the future of historical medical libraries and archives, and about the future of libraries, archives, special collections, and other cultural heritage institutions generally. While all special collections libraries face economic challenges, historical medical libraries face unique issues as their user demographics rapidly change. Students studying medicine and science today can easily access their scientific journals online, and some may never need to set foot in a physical library. This situation leads to a place like the College Library changing from Philadelphia's premier medical library of the nineteenth and twentieth centuries into a present-day special collections library, used only by a small number of specialists working with historical medical materials. The number of medical school programs that integrate history of medicine courses into their curriculum is also declining, as is the number of physicians with a dedicated interest in the history of medicine. However, these trends should not feed arguments of historical medical collections becoming irrelevant, or justifications of institutions dismissing as a priority the collection and preservation of resources other than those that directly inform contemporary clinical practice. Instead, these trends should point to opportunities for realizing the growing scholarly and popular value and use of historical medical collections. Rich opportunities are now in hand—and will increasingly emerge—to enable historical medical libraries and archives to connect with and inform a wider and increasingly diverse audience: as the History of Medicine continues to grow as a professional discipline, as the Medical Humanities broadens to include scholars in other Humanities fields like Art History and English Litera-

5. Many initiatives across various disciplines have addressed this challenge, and many more will undoubtedly continue to do so. See, for example, Donald A.B. Lindberg and Betsy Humphreys, "2015—The Future of Medical Libraries," *New England Journal of Medicine* 352 (2005), available online at www.nejm.org/doi/full/10.1056/NEJMp048190 [accessed 11 August 2014]; and Clifford Lynch's untitled essay in chapter four of *Library 2020*, ed. Joseph Janes (Lanham, Md.: Scarecrow Press, 2013), 25–32. See also initiatives of the Association of Research Libraries (ARL), including its *Research Library Issues* no. 283 (2013), which addresses "aligning, integrating, and mainstreaming special collections into broader library operations," available online at <http://publications.arl.org/rli283/> [accessed August 11, 2014]; and, of course, the Rare Books and Manuscripts Section of the Association of College and Research Libraries, a division of the American Library Association. See also Wayne Clough, *Best of Both Worlds: Museums, Libraries, and Archives in a Digital Age* (Washington, D.C.: Smithsonian Books, 2013); Julie Biando Edwards, Melissa S. Robinson, and Kelly Rae Unger, *Transforming Libraries, Building Communities: The Community Centered Library* (Lanham, Md.: The Scarecrow Press, 2013), and Susana Smith Bautista, *Museums in the Digital Age: Changing Meanings of Place, Community, and Culture* (Lanham, Md.: AltaMira Press, 2013).

ture, as Digital Humanities reveals new and important value in historical medical collections, and as social media outlets allow librarians and historians to expose more readily rare and fragile materials to a curious public and younger generations of students.

Presented with these challenges and opportunities, the five speakers at the 225th anniversary conference were asked to reflect on how their diverse professional experiences could help historical medical libraries plan for new roles in the twenty-first century. In particular, the conference organizers asked them to think about why a physical library and material books are still relevant when digital copies are increasingly available online. While the speakers sometimes took different approaches and even disagreed with each other on some issues, three main topics surfaced in their papers, recurred in the conference discussions, and helpfully serve as unifying themes for the five papers reproduced here: materiality, audiences, and space.

The vibrant examples of materiality offered by Fissell, Duffin, Cervetti, and Reznick demonstrate the importance of accessing physical copies of a book or manuscript, whether to gain clues to former owners and readers or to viscerally connect with the past usage of the material. For these researchers, as well as for a growing group of scholars interested in book and manuscript history, and print culture generally, the physical state of the historical text conveys information well beyond its textual content. Because the material form of primary sources can tell us so much, and one cannot anticipate what future researchers might find thought-provoking and relevant to historical study or contemporary healthcare research (or both), historical medical libraries and archives have a duty to build, maintain, and convey the value and importance of their material collections.

Yet as audiences change, historical medical libraries and archives must develop new collection and preservation policies, programs, and outreach strategies to breathe new life into the institution and reach a changing demographic. This is a particular issue for independent historical institutions—those not connected to a university or to a government agency—which might incorporate new workshops and events, even children's programming, to attract new users to interact with materials and facsimiles in diverse ways. Chaplin's paper gives us insight into how the Wellcome Library is transforming itself into a more broad-based, socially relevant, engaging and engaged institution where visitors can explore the intersections between medicine, life, and art. Further, as both scholarly and public audiences increasingly access information online, library partnerships are becoming invaluable for enabling strategic large-scale digitization, as Reznick and Chaplin suggest. This changing digital landscape also means that libraries and archives will become central places for collecting, preserving, and making meaningful tomorrow's born-digital history,

a trajectory that is informing the mission of the U.S. National Library of Medicine even as it sustains its longstanding stewardship of born-physical collections, as Reznick suggests in his essay.

As audiences diversify and expand, the space of the historical medical library and archive must respond by exploring ways to accommodate the serious researcher, the casual browser, and the gregarious group of active young students. Many university libraries and archives have met this challenge by installing more communal work spaces with comfortable couches and cutting-edge learning technologies to make the library more attractive to users who increasingly rely on digitized resources and may not need to be in the library at all. Chaplin's paper details the transformation of the Wellcome Library to remodel its historic reading room into a dynamic hybrid event/exhibition and library space that will allow users to interact and respond to materials in diverse ways. Duffin reflects on the educational value of student field trips to historical medical libraries, and particularly how the library space conveys the historical importance and longevity of the profession as well as it excites future generations of physicians. Cervetti, on the other hand, sees visiting the archives as an adventure that links with its own literary and theoretical historiography, exposing how the sounds, smells, and textures of the archive add to the passionate quest of the researcher.

Historical medical libraries and archives have served generations of individuals and communities, their collections and resources long being integral to research, teaching, and learning about the human condition. For these institutions to be equally if not more integral to future generations, their roles and their value in the digital age must be clear. Historical medical libraries are certainly unique due to their history and their distinctive collections, but the challenges and opportunities that they face in the digital era are not unique to them. Indeed, these challenges and opportunities are too substantial and complex to be navigated successfully by any one institution. The recent historiography of libraries and related institutions, and the conversations and ideas offered by this special issue and related initiatives, should prompt us to ask not merely *where* historical medical libraries fit into the picture but to acknowledge that they *do* (and will) play a fundamental role—complementary to other institutions—in the current and future ways of knowing of history and understanding the past, present, and future of the human condition.