

## “Ask Us”

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Libraries have always been about talking. If I ask you to imagine a librarian, you would conjure a grey-dressed, sensible shoes sort of person, a woman probably, pale faced, make-up less, tall or short, black or white or skin tones in between, a smile like a sliver of a moon or carrot peel- thin and shapeless.

Quiet is what you think of in a library. When the only librarian action figure was chiseled out of plastic for mass consumption, the one act anyone thought appropriate was the moveable arm with the hand fistled, except for the index finger. That was extended in perfect formation so that the arm, when raised, could nestle that finger in the center of the mouth; it is a finger, a shushing finger.

But you would be surprised at the amount of chatter in a library. An employee might habituate the computing center to check his email every day. A medical student, hooked into his IPod, reviews body parts hour after hour for exams, reciting to himself.

So over in the corner sits the medical student. With a computer on the table, he barely has to dislodge his fingers. Just a gentle touch here and there, lighter than massage. The younger people trust their machines more. They don't beat them into subservience. When he does speak out loud, when a friend taps his back, he talks of schedules, times, output, input.

Witness the nursing student hard pressed to find the correct article to review. She ventures to the reference desk. Not because the sign says “Ask Us,” but because her professor punctuated the last class with the words “...you can ask the librarian for help...” I often think about the barrier between us and the people who need our help. Back to the nursing student. She pulls out her assignment and together we read it. She explains how at home she has turned the online database world upside down - her database search room is a mess. Now, not only can she not spot the article hidden somewhere in there that she must find, but also she has to return the place to its original serene form. She has sweat on her fingertips. Her hair is flying in as many directions as her literature search. She sits down with the weight of a baccalaureate degree on her shoulders for the one course she is taking this semester. She has left her wits in her car, somewhere with the copy of the literature search she already did.

What is this literature search? It is the academy award of activities. Does it matter that it is not the most complex search? No—the search is the thing: the looking for, the seeking, the devising of a plan. The search plan gets reconfigured almost by the minute, but the equipment, and the path, they are well known. How we feel about a new path though, is maybe the same as how we feel about not being able to answer the question. And what is

that feeling? It is the one you have when you fall asleep during a lecture and wake up suddenly, wondering if you have snored: embarrassment. Truly. I have gathered together all my troops to answer your question, and they are too tired to fight. And I have no answer for you, but I must.

Librarians have to have an answer; we are in the answer business. That is why we suggest so strongly that you “Ask Us.” If we couldn’t answer, we are humble enough to deflect the question but we don’t – we encourage, we revel in the question.

I have not even lifted my finger yet, just turned the computer screen towards her, and found the homepage for the library.

While she is languishing there, unbound from her frustration, I am typing and thinking. I know what to do, but what will I find, what if I find what she found, where will both of us relax then? I always type faster than my thoughts, but it buys me time to think. What will I find? What if I don’t find what she wants?

Back to the reference exchange...

I have a result, and this is the potential dramatic climax. I can’t tell if the result is the right one. That is correct! The nursing student begins to turn the pages of the citations, flipping through titles, authors, abstracts, assessing, chewing, regurgitating. I hold the mouse, scroll down the page, turn to the next page. She is panting. My fingers are sweating. One of these articles must be the right one. We put in the search terms and I know they are great because I, the librarian, worked on the wording; I am the artist here. This is what victory sounds like – quiet, a smile. On the patron’s face – yes, yes, yes!!

None of them work, she says.

Not even number 12? I stutter.

Well, 15 is close, but not what I am looking for exactly. And look – it is just a letter to the editor. How did that get into a search of clinical trials?

Let’s try this, I say.

I am typing now, and I raise my voice over the keys: I am just trying this now- it might not work.

If I try the second approach and it doesn’t work, remember I have not handed the burden back to the student. I have not said – this is your assignment, you figure it out. We never say that.

She knows it, and is sunning herself on the chair until:

What do you think of these?

She is skyscraper erect now. Fifteen minutes have passed which she knows because her daughter just checked in on the cell phone, for which she apologized.

My eyes, if you could see them from the inside, are like ping pong balls, bouncing around this room looking for an exit just in case. There has to be a way out without creating the chaos she created on her last literature search. No- I fold up the room. There, done it. All gone. I am taking my nursing student and going to another database.

She has thought of that. But the professor did not suggest that first, and after all, she steers with her professor.

I say if her teacher offered the other database as a choice at all, it is time to embrace it. It is time to squint your eyes, close your mouth, hit that change database key, suck in your breath, and dive into the medical literature. With the life saver of course- moi, the librarian.

Well, the analogies are souring.

I have to go. She looks at her wrist watch. I apologize for taking so much of your time. Wait, I say, wait!!! I tug her arm, I practically tackle her with these words: I can work on it for you, and send you some results, and you can choose the article from them.

Really, because I can just go to the professor and tell her I can't find anything on this topic. Or I can change the topic.

No, I think I can do it. Give me a chance.

This is like the game show part of being a librarian. You know- the audience- yourself- is on the edge of their seats waiting to see what suitcase the nursing student will pick. Will she take the one with the direct line to her teacher, or will she take the suitcase I am holding, or will she give up because none of them have 50,000 dollars in them anyway? The audience – me- is on their feet, clapping, urging, screaming.

OK.

Her exact words.

My victory round.

She is in global email-we don't even have to exchange addresses. I am in, I can continue, there is hope, there is life after two unsuccessful bouts with the CINAHL database.

Gen Y , Gen connected, Gen you are my children's age so come on share what you know-they arrive at the reference desk too. You may be surprised to hear that they do not always find what they want. There is a furious discussion on the Medical Librarians Listserv about an article in the CHRONICLE OF HIGHER EDUCATION on the death of the reference desk. Buried already or used for fuel. That desk was. But yet smack in front of me is a third year student. Let me describe him to you: his skin has that light and shadow that comes at twenty something- the look of fitness, climbing the hill to old age, but finding it a sport. And he is well attired for such a sport – he has the correct climbing shoes, socks, the right weight jacket, conveniently unzipped. His glasses were ripped from the NEW YORKER ad pages. His hair is perfect for what he wants which can't

quite be identified. He plops down on the stool at the reference desk as if he is in the stadium and found the seat that matched his ticket- he ought to be here. Then he bends over. He slams his laptop on the desk, smiles so his white teeth hurt me, and begins to explain something he could not access last night on his Mac. We talk, as equals actually, throwing terms at each other with the practice of tennis pros warming up for the big match. I am hugging myself that a woman with grey hair screaming advanced years, such as me, can play this game without calling time out for not being able to see the ball. I see it. I can't always hit it, but there it is plunging towards me.

Point- he has figured it out without my help.

His point- I advise him on a method for moving his paper citations, the ones he has collected with actual articles and copied on paper, into the computer program. He flits around the bibliographic management program screen like a butterfly or a boxer, exploring. And then he asks *THE QUESTION*. Italics due to the naked fact that I not only don't know the answer, but never thought of that question. It is not in the reference garden in my mind. He has had an insight that I have not even considered. He makes a suggestion that is like those robot vacuum cleaners- so easy to use, no muscle required.

And I am:

- A. speechless
- B. still talking
- C. humiliated.

A little piece of me is C, that is correct. I am kicking my shins, pulling my hair, and running away. Because this idea is brilliant; better than the robot cleaner.

I thank him, and really, he lobs 'you are welcome' back like he flits from icon to icon on the screen. Just another action.

But not to me. How can I recover from this inner shrinking? I am not going to cower in the cave of my disappointment in myself. I have learned to accept these gifts from library patrons. They are given like the drizzle of chocolate that appears around the plate of cream pie – so gently, so purposefully, so sweetly. The giver doesn't even know that we are sharing in the garnishing and presentation. Isn't that something, to have an exchange, to be co-creators of a new paradigm. This is how you can load your citations, I learn. And this is how you can format the bibliography on a Mac, he learns. This desk is a place of helping, not for the drowning, but for those who have lived too far from the ocean for too long, and have forgotten to watch for the waves and the undertow. They need some reminders, but oh what they have to say about their time away from the coast- I can visualize their experience. Sometimes the desk is for the surfers who just have a hole in their board and need a new one fast, or need a quick run through in Styrofoam repair. And they have tales of the rumbling sounds and the drenching wetness and the water tightrope to share.

I can learn as I go along.

The next question is shadowy print over the fax machine. From a cuddly new mother and father who had hoped to cradle their son at home and now are aching to be cradled by the medical staff who have diagnosed their child. They are not cooing at the boy or yawning while feeding him. Their eyes are stunned open that there is a medical term for Aaron

who they have known as “Aaron inside her” for nine months. Now he is some Greek word that some doctor at some hospital two hours from their home is mouthing over and over like a whistling teapot and they just have a high school education and they can’t turn off the stove. The request for information flies down to the library through the fax machine and settles cozily in my hand. Now I own Aaron, the Greek diagnosis, and it is my mission to carry him to a cradle where his parents can rock him with the knowledge of that foreign title. And he will stop fussing because his mom and dad will see the word spelled out in English, and a picture of the condition, and a few quotes from another family who knocked their heads into the sharp angles of Greek letters before, and created a website to show others how to translate.

Well, get over myself, you say. One librarian can’t do that. But I say we can, like this: if mom and dad and Aaron are on a blanket, and nurses, doctors, aids, unit secretaries, social workers, all have their place at the edges, keeping the blanket warm and clean, holding them up, then the librarian can spot the one end that is dragging on the floor and lift it up so the blanket remains sterile and the family has one less item to wash!

When I first go up to interview the mother about the information she wants, she appears so fragile. She is padded with all the baby fat, the ice cream and pickles inhaled during pregnancy; she appears muscular to the eye. But my ears hear her screams of anger and helplessness. These are covered with instinct; she is covered with the instinct to protect Aaron as she always has, to suck in every piece of information she can about his particular condition in order to do so. I feel I should be knocking at a door but there are no doors to these “pods.” Each one is enclosed with the sorrow of the family, but no curtains, or walls. I whisper my name and mission; I hope it feels like a gentle tap on the back to her. Thank you she says; that is a handshake in the NICU, a vigorous handshake. And another thank you and I want to grab her by the shoulders and say I haven’t done anything yet. But of course I just tip toe out with my form nicely inked, probably the two hundredth one she has completed.

...The phone rings in a question about a doctor. About credentials. About internships and fellowships. An orthopedist, it turns out. Phone questions dabble in to the world of consumerism much more than the face-to-face ones. And the first question is the big one. This is the one where the gunslinger appears at the door of the saloon and bangs it open with a force that almost swats him back in the face but because he is a man with bravado it dare not do that, so it stops an inch from his nose. And he dares anyone to challenge him. This is the question that comes to me courtesy of Alexander Bell, and as a good librarian I am the person in the crowd who asks if he would like a drink of our best sasperilli on the house. And he takes the step inside. I gift him with a smile. He drops in the chair, seemingly to drink but really that bravado just went scurrying out the door. And now I can see without a video phone that this isn’t a question of snooping on a new neighbor or curiosity about an old friend; someone he loves, maybe himself, is going to depend on the orthopedist to keep that person whole. He can’t call the Better Business Bureau or rely on Angie’s list.com for this referral. He can’t confer with two other orthopedists to solicit their opinion, or his local medical society. He calls the library

because....because he can reach out and touch a human being there. Because no librarian has ever said I'm sorry sir, we just don't have that item in stock,or, All our lines are busy at this time.

My patron has just enough oomph to enter the library as saloon; don't forget, medicine can be a windowless fortress, unapproachable, impregnable for questions. I can batter down that wall to a manageable height that he can maybe see over if he is tall enough. I uncover the doc's undergrad, medical school, residency locations- bam, the rocks crumble. I can discover if he has ever been sued or lost his license – bam, more debris. I can search for articles he has written – bam, the dust flies and that is all I can do. I bring another sasparelli as an apology for my limits. My patron is not content, but he leaves the saloon. As the doors follow each other swinging behind him, they push through the word 'thanks' and it lands right in my apron pocket. Safe.

So- it is a privilege to serve as a medical librarian. Every answer I give contributes a note to this great orchestral composition known as Twenty-first Century Healthcare. It is symphonic, cacophonous, new music and folk all folded into enough movements to accompany all our lifetimes. Sure – sometimes it is as simple as: Can a patient's family use the computers here, or, Where is the closest bathroom. But we provide the flexible "we." The person who you can approach with 'this may be a stupid question,' and know for certain that it won't be answered with sarcasm or a huge guffaw or tittering giggles from the people in the offices nearby. You won't really feel stupid asking, because you did ask. And we don't mind that most of our musical additions are the discordant ones, because we don't know what to expect when we say: How can I help you? Maybe we are the percussion section, keeping the beat but rarely performing a solo. Maybe that is why people don't quite get what we do. We are the support, not the nursing/medical melody. You can count on us though.

