E. Charlton Prather: Good afternoon, Miss Hall.

Carolyn Hall: Good afternoon.

CP: We’re just grateful that you would take some time to come and reminisce with us on behalf of the University of South Florida and the College of Public Health.

CH: I’m flattered to be asked.

CP: And myself and Miss Duncan, we’re complimented to be in your presence and we thank you so much for coming. Miss Carolyn Hall, who was the director of the State Board of Health library, that in the opinion of many of us was the most outstanding public health library in the US if not in the world. And Carolyn was the director of that through its demise, if you will, by the state legislature at some time.

It’s a pleasure to have her here to review some of the history of this library, but for all of us: What got you into being a librarian?

CH: Well, I began as a teacher in what was junior high school then, a science teacher; was always interested in science, medical subjects, and that sort of thing. And so after several years teaching, I decided to go back and get a library degree.
And while I was in library school, I knew very little about medical libraries but I found a flyer from the National Library of Medicine, and they were offering postgraduate work in science librarianship. So before I finished my master’s in librarianship, I applied to the National Library of Medicine for one of their—

CP: Scholarships.

CH: —scholarships and was awarded one. So as soon as I got my library degree, I went to the University of Tennessee medical units in Memphis and spent about a year and a half there in postgraduate work. And by then I was thoroughly into medical libraries and felt I never wanted to be anywhere else. (CP laughs)

So I was married at the time. My husband had accepted a position in Jacksonville, in the meantime; and I started looking for a medical library in Jacksonville. And the only one I could come across was the Borland Library, which was a part of the Jacksonville Health Education Program, a coordinated effort of some of the hospitals in the area.

CH: So I wrote to the woman who was in charge of that library to see if there were a position available. She wrote me back that there was not, but she had been associated with the State Board of Health library briefly and knew they were looking for a librarian, so she referred my letter to Floyd Baker, who was the director of the health education section under which the library functioned.

And I heard from him and was asked to come down for an interview, which I did; and they were desperate for a librarian because they had been a year and a half without a librarian. And they offered me the job on the spot, and I accepted on the spot and never had the slightest of regrets from it. (CP laughs)

CP: Really?

CH: It was a great choice for me and I hope for them.

CP: Obviously for them.
CH: But I had thoroughly enjoyed that time. Now I came toward the demise of the—what had been the State Board of Health. I came in 1968 and—

CP: Yes. Yeah, the State Board of Health died in ’69.

CH: (murmurs in agreement) The legislature, in its infinite wisdom, had already determined to establish the umbrella agency, the Department of Health and Rehabilitative Services. And shortly after I came, the State Board of Health became the division of health within that department. And of course we’re named that way for several years and then became the Health Program Office eventually.

But my knowledge of the State Board of Health Library comes largely from hearsay because there were a lot of people on the staff at the State Board of Health who had been around for a long time and they remembered the glory days of the State Board of Health; and I got numerous stories about what went on in those days and was very envious of them.

I really wish I had been around during those times. It was great to be here when I was but I would love to have been here when it was really sailing high: in the forties, fifties and—

CP: (CP makes noise) I thought it sailed pretty high while you were here.

CH: Well, it did, but unless they were exaggerating, it sailed even higher in the days prior to that.

CP: I can’t believe that.

CH: But I—I was— I became very interested in the library while I was here, both because of the kinds of work it was doing; was not strictly medical work, it was public health work. But I found that I enjoyed it as much as I could possibly have enjoyed working in a regular medical library because I worked with dedicated people who were very interested in what they were doing and very adept at what they were doing. And it was just a pleasure to be able to help them do what they were doing.

CP: Oh boy! (murmurs in agreement)
CH: But anyhow, I started looking into the history of the State Board of Health library and it seems that—’course, you can pick up a lot of the history in the old annual reports and the *Health Notes*¹—but some of the librarians—the past librarians had written about their experiences when they were at the State Board of Health.

One of the best is Elizabeth (Bonenberger?), who was later Elizabeth Fretwell, who was actually the first skilled, trained librarian that was hired at the State Board of Health. And she has written a fairly extensive history on the State Board of Health Library. And so most of what I know about her, of course, comes from her accounts.

And according to her, the library—while it’s had a somewhat checkered history—actually began with Dr. Porter, the state health officer, when he took office in 1889. He was interested in having a library or having materials available for him and his staff to use. And so he took his own materials and what he could get others to give him and set up a library within his office—in a shelf in the office.

And according to Mrs. Fretwell, it very quickly degenerated into stacks of material on the floor because it outgrew the shelf very quickly. And of course at this time, there was no building for the State Board of Health; so the offices were housed in lease space in the downtown area of Jacksonville. And in 1901 when the fire consumed a large part of that area, it also consumed the offices of the State Board of Health.

And so most of the library materials he had accumulated were lost along with everything else. But as soon as they recovered from the fire and moved into different quarters, he began collecting again. So this went on until—in 1912, when they moved into the building that was built especially for them on Julia Street. He designated one of the rooms in that building for a library. And had a plaque placed over the door to that effect.

And he placed the materials that he had accumulated thus far. By this time, Dr. Henry Hanson had come on board as a senior bacteriologist and he was very interested in libraries; and so the two of them fostered this first library. They even hired a young woman to be in charge of the library. She was not trained, but she did the best she could; she organized the material in some fashion and tried to keep up with him and make it available to Dr. Porter and his staff. And this continued for several years.

Then in 1917, Dr. Porter retired, Dr. Hanson went elsewhere, and the woman who had been hired to be in charge of the library married and left, and the ones who took over after that were evidently not that interested in the library. And so they moved desks into the room that was the library. And it gradually crowded out the material, so it was—

¹*Health Notes* was an official monthly publication of the Florida State Board of Health.
eventually was boxed and moved to the attic of the Julia Street building. And there it stayed for a little over ten years.

Then in 1929, Dr. Hanson returned and—he was state health officer then—and he was determined that there would be a library but he wanted it on a firm basis so that it did not come and go (CP laughs) as it had. So he evidently spent a great deal of time studying libraries of other organizations around the country, talking with people that worked in libraries.

He got the support of several of the members on the State Board of Health; he got the cooperation of the Florida Medical Association, which was in Jacksonville then, and the Duvall County Medical Society, and even got a grant from the Rockefeller Foundation, sufficient to hire a librarian for one year. And this is when Miss (Bonenberger?) came to work.

In 1931, she started work. They uncrated all the material from the attic and moved it down to the little library that Dr. Porter had (named?). Of course, it was all ten years or more old by now. (CP laughs) So Dr. Hanson was able to get a budget of five hundred dollars to buy books and journals for the library. And it opened. And in some fashion, it was opened that way until its total demise in 1981.

Dr. Hanson also had a different idea about the way he wanted the library to function. It was not to be just for State Board of Health personnel; it was to be for physicians, nurses, public health workers, any medical people in the state who needed a library.

And of course, at this time, in the 1930s, medical libraries were very scarce. Most hospitals had no kind of library. There may have been a few of the larger medical societies that would have some type of library; there were no medical schools in the state, and so there was no medical library. And the State Board of Health Library was the state medical library.

CP: That was it. (murmurs in agreement)

CH: The physicians around the state, nurses, anyone who needed information on various medical subjects would call or write to the State Board of Health Library. And the material was sent to them; and Dr. Hanson stipulated it was to be free of charge, no charge to them. And they got whatever they needed: if they wanted to borrow a book, it was put in the mail and sent to them. And in most cases, it seemed, they returned it, which was unusual in this day.
But the library flourished during this time. In 1941, they even opened some libraries in various county health departments around the state. And some of those, in some fashion, existed for a number of years. I’m sure they’ve all—they all died out long before that era was over. But in some fashion, they had materials available.

In fact, the materials would come in for the State Board of Health library, and the librarian there would catalog them and ship them out to the county health department libraries. But this was the way the library was carried on; it changed hands over the years.

In 19—the mid-forties or early fifties—Well, before that, in the mid-1930s—when the extension, that annex to the original State Board of Health building was built, and the Pearl Street building was built—the library was moved into a larger space on the upper story of the annex part of the original building.

CP: (murmurs in agreement) On the left hand side.

CH: And then, eventually, some time before I arrived, it was moved into the Pearl Street building, the middle floor of the Pearl Street building, which had been built originally for vital statistics. But it became the library, and so we simply adapted it to that use.

There was an audiovisual library as well, but it was not a part of the print library. They were two separate functions, both of them were within the health education section, but they were under two different directors. And they stayed this way until the massive reorganization in 1975, when it became a part of the print library and was under my direction then.

Then, as I said, there was a period of time in the late sixties when they had no librarian at all. And then I arrived in 1968 and was here until 1981: thirteen of the most fruitful years in my career as a librarian. I really would take nothing at all for the period of time I spent here.

I’ve heard people say that they had jobs that were so enjoyable, that it was something they would’ve done whether they were paid or not. And I didn’t used to understand it; but I do, (CP laughs) I do. Because this was the kind of setup we had. I really looked forward to coming in to work every day.
But of course, when the first reorganization took place in the late sixties, it didn’t affect the library that much because it was still under the aegis of the health department and still operated very much the way it had always done.

But then in 1975, there was the massive reorganization, in which the division of health became the health program office within this huge umbrella organization. The division of social and economic services, which was still located in Jacksonville in the mid-70s, had a library, which had been going for several years. That was closed and the materials and the staff were moved into my library.

And we continued to function as a library, even though we were not under the sponsorship of the health people anymore; we were part of the administrative services unit here in Jacksonville. Most of the staff, over the next three years, were moved to Tallahassee. And the only offices left here, the major offices left, were the lab and vital statistics.

And the library remained, I’ve always thought, largely because they had no place to put it. I’m not sure they knew what a library was, but they had no place to put it if they moved over there. And so, for the time being, we were safe here.

CP: Well, the big bosses—just to fill in your blank— The big bosses at that time did not think that we were a research organization, and libraries were for research organizations and so one plus two means get rid of the library. That’s the facts.

CH: We always felt that we were under some kind of threat all during that time. Now they did establish the library in Tallahassee, which dealt with the social material.

CP: It’s not much, not much.

CH: Yeah. And eventually, about ’78 or ’79, the library here was placed under the direction of the person who was in charge of that library. But we were very widely separated and so we still continued to function much as we always had. Most of our work, though, was done by mail or by telephone. We did route our journals to the people in Tallahassee because they had access—direct access to no other library there.

And so we tried to fill in as well as we could and keep the service going. It didn’t provide the satisfaction to the library staff that it had when everybody was here, because you didn’t have the personal contact with the people that you had. But we kept functioning;
although, as I said, we did feel under some kind of threat. First of all, we felt we would eventually be moved to Tallahassee or that we would be discontinued altogether. And so I decided that my best bet was to look for greener pastures.

CP: If you wanted to continue working.

CH: I did. I didn’t want to be shuttled around—

CP: Put out to pasture yourself.

CH: —by HRS, wherever they wanted me to go. I wanted to go where I wanted to go.

CP: I understand.

CH: So, I contacted the person who was in charge of the Jacksonville Health Education Program, where Borland Library was. The one I had first contacted before I had came to Jacksonville. And they established a position for me there. And I moved over to that library in August of ’81. And the person who had been my assistant here at the health library took over from me.

And then, one dark day in November of that same year, she called me to tell me that she had just received word that they were abolishing both libraries: the one in Tallahassee and the one in Jacksonville. So since there was little we could do to change their minds about it, we petitioned the department of HRS to let Borland have the print materials from the library, which they did, and we took those over.

Of course, a lot of that material has been outdated over the years, but we did get a great collection of the State Board of Health annual reports and *Health Notes*, as well as the vital statistics and some other specific publications and information that we housed in a special history room that Dr. Max Michael agreed to have us set up so that we could protect these materials.

And that’s where they are and we make them available—or Borland does, I’m no longer there—but they make them available to anyone who has need for that kind of material.
CP: Marvelous! Are they continuing to add to it? When I retire, I got some that's appropriate for that shelving, that are mine personally.

CH: Yes, there is some growth area in that room. And we’ve tried to limit it to strictly—or to concentrate on the history of public health or medicine in the State of Florida.

CP: Okay, great!

CH: So anything that’s related to that, they will accept.

CP: Great! Great, great, great! If the museum and historic library comes to fruition in what is now the Julia Street building, then probably my collection will be appropriate there, but all those details have to be worked out. And I’ll hope that you’ll continue with your interest and kind of guide us as the Julia Street building is activated.

CH: I would love to. I’m still—I still have close ties with the ones who are directing the library at Borland now, which has become a part of the University of Florida. And whenever they get a call from someone wanting public health information, they usually call me and ask me where to look. (CP laughs) So I still feel very much attached to public health, which is great.

CP: Yeah. I kind of interrupted your train of thought there and I’m sorry. I’d be curious—all of the printing material went to Borland with you, so to speak.

CH: Now, there were other things, there were some artifacts that Astrid Ballard, who was the administrative assistant to Doctor Sowder and involved in the administrative area for years, knew that in some of the various offices around this building and the other locations for the State Board of Health offices, there were materials, artifacts, letters, and so forth that had been squirreled away in desk drawers or cabinets or whatever.

And when the massive move to Tallahassee began, she was very much afraid that some of this material would be discarded or lost—

CP: It was, Carolyn. My own collection was discarded, but go ahead.
CH: Well, she got the word out to as many people as she could and those of them who listened to her did box up materials and send it to the library. Much of it was not library material. For instance, I remember that one of the items that was sent to us was a doll that a nurse in the past had made up to use in midwifery. And that was among the materials that came. There were a lot of photographs, letters, things of this nature. And we simply provided a place for them to be stored safely.

So when the library was closed—when they did away with it—the state archives wanted to come to see what was here that they would be interested in. And so they came over and spent, I think, a couple of days going through this material that we had amassed. And taking most of it, particularly most of the non-library type material—letters and artifacts, photographs, and things of this nature—back to Tallahassee for their archives.

And they did get that catalogued and furnished me, as well as several others, I think, with a microfilm index to that collection. So to my knowledge, it’s still available from the state archives.

CP: And we can go there and look at their index?

CH: Yes.

CP: It’s of—that’s of great interest to me. Thank you very much for that little pearl. Well, what happened to the audiovisual?

CH: The audiovisual library—after it came under the direction of the print library, the medical library—continued to operate as much as it had. It had, for years, sent films to, largely, schools around the state or other educational institutions, organizations that were interested in public health education, for a loan and then had them returned to Jacksonville. And we continued to do that until the library and audiovisual were closed.

And when we asked HRS to let us have the print material, we also asked for the film material; HRS did not want to donate that to us. But they did give us the use of it, the management of it. So it was moved over to Borland and we continued to circulate it from there for about three more years.

And then about ’83, it had become pretty much of a burden to us to mail out, and HRS was giving us little or no help with it. And so they took the material back, and, to my knowledge, it was deposited in the library at Florida A&M and was supposed to continue
to be distributed; although by now, the collection had not been added to in years and years, so it’s probably—it was getting very brittle and much out date; and of course, films now are not the media that you—

CP: It’s only us old folks who know how to run a movie projector.

CH: (CH laughs) That’s true, that’s true.

CP: Punch it in to the VCR.

CH: Nowadays, it would all be on video, probably, or just available through the computer. But it continued to function until—right until the very end. Jimmy Geiger was the director of that audiovisual library when I first came in ’68 and had been there for years.

CP: That’s right. Years and years and years and years.

CH: (murmurs in agreement)

CP: And is he still with us?

CH: No, Jimmy has been dead a number of years—

CP: Just his wife, Lina.

CH: —but his wife is still alive.

CP: Yeah, I remember her very well.

CH: And if you remember Ray, the fella’ that worked in the library who was a little—a little bit slow, a little bit retarded?

CP: I’m not developing a mental picture right quick.
CH: Well, you should because you saved his job on one occasion.

CP: (CP laughs) I did?

CH: After this organization of 19—the mid-1970s, they began to, of course, look at staff. Fortunately, they did not cut any of my staff but—in fact, I got the staff on social and economic services which added to it—but they decided to move Ray into another— In fact, first of all, I think they were planning to let him go completely. Ray had been with the film library ever since he started work as a very young person.

He was slightly retarded, had a little difficulty learning, but Mr. Geiger had worked with him and had him trained; he knew his job down to a science. And he continued to work in there. And when we heard that they were planning to eliminate that position, you were still in the health program office; and I either wrote or called you and told you what was underfoot. And I don’t know what you did, but they nixed that (CP laughs) and Ray remained where he was.

CP: Good.

CH: Now eventually he was moved out and into the maintenance section. But for two or three years after that, he remained exactly where he was.

CP: Good, good, good, good, good. It makes life worthwhile.

CH: Yeah.

CP: Yeah. (CP laughs) Oh, that’s beautiful. Now at the Borland, I know you continued to respond to my requests, even from Borland, just like the old State Board of Health library was still functioning. Address yourself to your duties and responsibilities at the Borland.

CH: Well, when I first went to Borland, I was hired to be the educational librarian for the hospital libraries in town. Borland was the central library for several of the hospitals: Memorial, Baptist, Saint Vincent, Saint Luke’s; all of those have libraries. And while Borland did not direct those libraries, they still assisted them, catalogued their materials, helped them with any questions they had, because most of the people in charge of those
libraries were not trained librarians. And so for the first few years I was there, this was my job, to work with them.

Then in the mid-80s the director of Borland Library left, and I was made director of that library. So from ’86 until I retired in ’95, I was the director of the library. We had officially become a division of the medical center laboratory in Gainesville around 1985 or ’86 and that’s—it still functions as that.

But, because I had been so closely associated with the health department, and because they had donated those materials to the library, the librarian at Borland felt we were under some obligation to provide service, and Dr. Max Michael was very much of the opinion that we should continue to serve the health personnel, which we did.

So, they even routed journals to the health personnel in Tallahassee for a while and eventually started a table of contents service. (inaudible), they would copy tables of contents, send them over, and they could request articles then, from Borland or whatever they needed.

CP: I was a recipient of that service and I thank you. How many volumes did you carry with you from here to Borland?

CH: I have very little comprehension of how many there were. The most valuable part of the collection, other than what pertained to the State Board of Health directly, was the journal collection. Because when Dr. Hanson had developed this relationship with the Florida Medical Association in the ’30s, when he opened the library, the agreement with them was that they would donate their exchange journals to the State Board of Health library.

And it built up a very significant collection of—

CP: State medical journals.

CH: —state medical association journals. We had probably the best collection of that type of material of any library of that size in the country. And this was— The journals were the valuable part of the collection so far as library materials themselves were concerned.
Now, so far as the history of public health was concerned, there were a lot of print materials, of course, that we were very interested in getting and maintaining. Much of the book collection—the textbooks and that sort of thing—were quickly outdated—

CP: Yes, they are.

CH: —or there were duplicates already at the Borland Library. But the valuable part was the journal collection, which Borland still has, a very significant journal collection for its size.

CP: Excellent.

CH: And the historical materials that they got.

CP: I was (under?) the impression that something went to the University of Florida libraries in Gainesville from here. And you haven’t mentioned that. That did not—

CH: No. I don’t recall that anything did. Now on paper, it may have looked as though it were going to the University of Florida libraries in Gainesville and it actually came to Borland.

CP: Now, that may be so, because I was dealing with paper—

CH: Because Borland has been closely connected—even before they officially became a division of that library—they were very closely related to them and worked cooperatively.

CP: Something (inaudible)—

CH: What?

CP: Borland was not, in the—in the state sense, a state public institution.

CH: No.
CP: And thus, we cannot be giving state materials to a private institution.

CH: So they gave them to— The Jacksonville Health Education Program was a part of the University of Florida. And, of course, Borland Library belonged to the Jacksonville Health Education Program; and I think this is the way it was worked: it was given to Jacksonville Health Education Programs as a part of the University of Florida; and, of course, they deposited them in their library, which was Borland Library.

CP: Okay. That—that all makes sense. Okay. Fascinating piece of history.

Do you ever see with the—now we have a department of health in— Don’t rock. [CP responds to the videographer’s direction that he not rock in his chair. ]—now that we have a renewed department of health, do you see a library reappearing around for the staff in Tallahassee? They’re moving in to a new building complex in November; they all gonna be in one location. I don’t know of any effort to our re-establishing a library. Do you know?

CH: I have not heard of any. Although, to me, speaking from my experience with the library and with the requests that I receive from public health people, their needs and requests are specific enough that I think it would be beneficial to them to have some kind of library. It probably would not need to be a large one, but specialize in the materials in the area of public health medicine and this sort of thing. I’m not sure that there is any library in Tallahassee now that could fulfill—

CP: There is not. There is not.

CH: The— Florida State University, of course, has nursing materials and that sort of thing, but they’re not directly accessible to the public health division.

CP: Now F [Florida] A&M now has a—a School of Public Health and they are giving—you can earn a Master’s in Public Health at A&M. But their library is a fair piece from being up to snuff, so I’m told.

In this day of electronic surge— Now I’ve considered my computer and have on my screen everything that the Harvard School of Medicine has in their library, how does that impact? Or should it impact, or where is the public health library that we can access?
CH: It certainly doesn’t require, now, that you collect the physical materials to the extent that you had to in earlier days—

CP: We had to in (inaudible).

CH: —when there was no other access to them. There are so many ways to get at the medical literature now. The only thing is getting your hands on the material once you find out it exists. (CP laughs) Some of this will be available through the computer itself, although this can be a kind of an expensive proposition.

And I think before any agency undertook to establish a library and depend on computer access, they would need to understand that this is not a cheap process.

CP: It’s gonna cost a lot of money.

CH: It’s a very efficient process and, probably, the simplest way to handle things, but it does cost. And they need to be aware of that. And they also need to be aware that they need some trained personnel to handle it.

CP: I hope that everybody understands that by this modern day of such technology.

CH: Well nowadays, when physicians and nurses and so on can go directly to the computer and look up information themselves, I think some of them make the mistake of thinking they found everything there is to find. But, if they have someone who trained in finding things, they may learn that there’s a lot there, that they did not quite dig into.

So I still believe there, a place for librarians; they may call them information specialists, but they’re still librarians and they’re still—

CP: Their basic learning is library science.

CH: That’s right. That’s right. Somebody’s got to manage this information and who better to do it?
CP: Than those trained to do it?

CH: That’s right.

CP: Fascinating. Well, the new department of health does not have a library. Doctor Howell was committed to a library, and what they have— They’ll (inaudible) to their library, but it is a poor excuse.

CH: Sounds like maybe the first library they had at the State Board of Health.

CP: Yes, about the same thing, about the same thing. There’s piles of materials all over the place. You—you’re free to thumb through ’em if you want to, see what you can find, (CP laughs) so.

CH: That’s a slow and tedious—

CP: It surely is, it surely is.

CH: —and usually unsatisfactory.

CP: Looking over your total career now as a librarian, you got hooked in Tennessee on medical library stuff; but think in terms of libraries like the University of South Florida Library, for example, that encompasses everything under the sun, including a reasonable public health library at the College of Public Health.

What’s your advice to a young person coming along? Suppose we have a person who is in library science watching this tape—and I can envision a student specifically pulling your tape up to see what a medical librarian has to say about a career in medical library business—what kind of advice do you give?

CH: I think, first of all, you have to have an interest in that kind of material. There are a number of different libraries, and I think there’s one to suit almost any taste. So you need to have an interest in medical material; some kind of science background, I think, is very helpful—
CP: It would certainly help.

CH: —so far as the language, the terminology, as so forth is concerned. I found that very helpful when I went into medical library.

Of course, my own preference, because of my experience, is to prefer a small library. I had an opportunity to go into a large medical center library, but because I was destined to come to Jacksonville, I had to turn down that opportunity; and at the time, I regretted it but I—never again, never again.

CP: Yeah, you didn’t look back.

CH: I think that it’s kind of the difference— I went to a small college for my undergraduate work and I think, at the time, had I gone to a large educational facility—a state university or something like that—

CP: Your attitude might have been very different.

CH: —I might have been lost in the crowd. But in a small, private college, I found myself and was extremely happy with the training I got there. And that may have preconditioned me to a small library. But in—and I’m sure you get this experience in a large medical center library too— There are patrons that you feel a especial relationship with and you just knock yourself out to help them when they come to you.

But in a small library, everybody has to come to you. (CP laughs) And so you get to deal with the gamut of patrons. And it’s—it’s the rewarding part of being a librarian. I remember that some of the people who worked at the State Board of Health, they would come to me or call me and ask me for information, and they would always apologize when they asked.

And I could never understand why they did this; and I would assure them that if they didn’t ask me, I wouldn’t have a job. There was no reason for my being there. That this was exactly what I was supposed to be doing.

CP: Now, I have to remind you of our collegiate training. You go in and ask a librarian in a college, and you’re a college student, for some help and they will backhand you,
“You’ve had an orientation for this library, go do it yourself.” That’s the way we came out.

CH: Maybe that’s the reason I like small libraries. (CP and CH laugh) You can’t do that in a small library.

CP: Now that’s—that’s my— I think that’s a fairly universal opinion of librarians of college students. You know, the librarians are there to give you a hard time. They belong — Every one of those books belong to them personally and don’t you touch ’em. (CP laughs)

CH: Nope, nope. I’ve never had that; I’ve never had that feeling about a librarian.

CP: Good.

CH: It was always the personal dealings with the people that needed the information; that was the rewarding part of it. Handling the books, checking in journals was tedium. It was using them; it was knowing where to find information or finding out information. It was always a challenge to get a question from somebody that required me to dig a little bit to find it. Because I thought, “Gee, not just anybody can do this.”

CP: You’re one in a million, Carolyn. I don’t believe that’s a typical librarian attitude that you’re reflecting.

CH: I don’t know. I’ve met other librarians like that. Maybe they’ve just—

CP: Oh, I’ve known a number now; I don’t think that all of them that I know— I remember two particular libraries plus this one—besides this one—where the librarian— You’d have died if it hadn’t been for that lady’s interest in what you were about. You know?

CH: (murmurs in agreement)

CP: But that was not true in my undergraduate and graduate days. That was not true. (CP laughs)
CH: Well, maybe I never had to deal with undergraduates (CP and CH laugh) and that’s the reason I can be so warm-hearted about this relationship with library patrons.

CP: So your advice to an upcoming librarian would be to search out your area of interest having to do with things in the library and then concentrate. If it be birds, well go to a zoological library and be a specialist in zoology.

CH: And don’t turn down the possibility that you might wind up in a small library. Some people think that unless you’re in a very large, prominent library—

CP: Library of Congress for example. You ain’t made it.

CH: Yeah, you really not met the challenge. But no, I much prefer, because of my experience, the smaller libraries.

CP: Great. It pleases me that your experience with the public health library was profoundly rewarding, and you’ve made a point that I want to emphasize: that the folks that came to you were highly committed to what it was they were doing. That might be unique.

No, it’s not unique in public health but us—probably is outstanding in public health communities, that the librarian will run into more people who are genuinely concerned about what it is they’re after than they would be in the average corporate setting.

CH: Well, let’s face it, people who go into public health as a choice for a career—

CP: They don’t do it for the money.

CH: That’s right, that’s right.

CP: (CP laughs) Do it for the money.

CH: They do it because of the service that’s involved and what they think they can contribute to it. And I think that the quality of people that are in public health are
reflected by that. I do remember one problem I used to have with the staff of the State Board of Health and I'll have to mention it.

CP: Oh no. That wasn’t in preventative medicine was it? I mean in preventable diseases?

CH: This was with the staff as a whole.

CP: Okay, go ahead.

CH: When I came in 1968—of course, as I said, they’d been without a librarian for a year and a half, and a secretary had been in charge at the library. And I don’t know whether she was simply afraid to confront the people that would come in to borrow things from the library or whether this was her philosophy: that, when they came in, they would find the book or journal on the shelf and they’d say, “I want this on indefinite loan.” Indefinite loan has come to be a terrible phrase to me.

And they would get it. They would check it out on indefinite loan and take it off to their office. And often it was never seen again. When I came and I did an inventory of the materials, I found a large portion of what had been the library collection had been checked out on indefinite loan. We had a drawer of cards on indefinite loan. And I thought, This really isn’t the way I want to run a library. (CP laughs)

So I started going after some of the offices or the offices that weren’t directly located where I was; I would send them a memo with a list of the things that, according to my records, they had on indefinite loan and asked them to report on their whereabouts. Well, in a lot of cases, they had no whereabouts; they were gone.

CP: (CP laughs) Oh boy.

CH: And so I thought, My budget is simply not big enough to supply every office in the State Board of Health with its own collection. (CP laughs) So I appealed to Doctor Sowder’s office for some help. And he—

I’ve always wondered if maybe he didn’t like Doctor Ford that much because he assigned Dr. Malcolm Ford to be my authority figure. (CP laughs) And Dr. Ford and I agreed that, in future, I was to start calling these things in, get as many of them back as I could; and in future, if anyone walked in the library and asked for something on indefinite loan, I was
to say, “Your request needs to be put in writing to Doctor Ford. And only with his signature of approval will I give it to you on indefinite loan.”

Well, this usually stopped it. They didn’t want to go that far with it. The few that did, Dr. Ford invariably turned down. (CP laughs) His word to them was, “If you need it that constantly and that badly, buy it—

CP: Buy you one.

CH: “—out of your budget. Don’t use the library budget.”

CP: I would agree with that philosophy.

CH: So I have always admired Doctor Ford for the backbone he used in standing up for me, because I could not have done it. (CH and CP laugh)

CP: Yeah, that’s marvelous. Now, what have we left out?

CH: Oh, let’s see. I’d hate to say I’ve drained my mind of all the information I had about the State Board of Health but I can’t think of anything else (inaudible).

CP: You brought to us a written statement of the history of the State Board of Health Library. Let me mention that, that we do have it and it is available—will be available to any reader who wishes to check it out.

CH: This was written by Elizabeth Bonenburger, who was the first medical librarian hired at the State Board of Health.

CP: And you brought us some other hard copy. What are the other things you brought us?

CH: I brought one clipping from the newspaper with a photograph of the State Board of Health, which was made—the date’s missing from it—but it must have been made during the 1940s.

CH: And then a couple of other pictures that were made in the library, when it occupied
the long room in the annex building behind the Julia Street building, with a number of
people whom we can’t identify, and no one bothered to identify them at the time the
photograph was made.

CP: Well, maybe we’ll have some viewers who could identify them and we’ll let—

CH: It’s possible somebody’s been around long enough that they’ll recognize them.

CP: And we’ll ask anybody that recognizes the people in the pictures, “Please let the
library know that you can identify the pic—the people in the pictures, and we’ll
communicate that back to Carolyn and to the Julia Street artifact collection,” of which
there is one. There’s an accumulating collection of artifacts for the Julia Street building.

CH: Okay.

CP: After it’s activated.

CH: Will that collection be open then to—

CP: Yes. Anybody—you’ll get involved with it, one way or another. You can mark my
words.

CH: I would love to be.

CP: You gonna get involved with it. My wife would be very glad to get back the room. I
got a bunch that’s supposed to come over here. (CP and CH laugh) Yup. And a lot of—

CH: Won’t it be a marvelous day when that comes to pass.

CP: And a lot of—a lot of libraryable [sic] material, I think, is there, a lot of old State
Board of Health stuff, printed materials.
Well, this—is just exciting! You know, I didn’t know that history of the public health library. I’ve read the annual reports. I know Doctor Porter’s posture; I know Doctor Porter. I’ve read everything that Doctor Porter’s written, I think. But this history of the library, I did not know. And I appreciate your bringing that to our attention.

CH: Well, I’m glad to be able to share it with you.

CP: Both orally and in writing too, that piece of history. But you represent the modern piece of history and the fact that you’ve recounted for the formal record, the demise—the lack of a better term—demise of the Florida Public Health Library. And what happened to it all. I don’t think there’s another person that could recount that history. And we now got it for permanency; the history of that in one place. I thank you for that too.

CH: Thank you.

CP: So, anything else you need to add that I forgot? Or that you had forgot?

CH: I don’t think of anything. May think of something later on, but I think that’s it so far.

CP: Okay, it’s a compliment to have you with us.

CH: Thank you.

CP: And on behalf of the School of Public Health and the libraries of the University of South Florida, I doubly thank you, Miss Hall, for coming and sharing with us this fascinating piece of very valuable public health history in Florida. What would we do without our libraries? But you’ve convinced me: what would we do without our librarians? And I love you all very dearly. Thank you for coming.

CH: Thank you.

CP: And I’m Skeeter Prather. We’re done.

End of interview