

PREFACE



Embracing failure

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Talking about failure is difficult. In preparation for this issue, I asked medical librarians and information professionals within my network if they were willing to contribute to this issue on “Embracing failure”. Some of them politely replied that they were thrilled about the topic, but that they thought they had nothing substantial to contribute as “I believe I have never failed in anything I did in a professional context”. Reading this kind of replies, I wondered if they could be true and thought of three possible explanations:

1. they have not identified that something was a failure;
2. they have forgotten about their moments of failure;
3. they have difficulties admitting that something they were involved in failed.

Most people in my network have accumulated between ten to twenty or even more years of professional practice. I have difficulties believing that within this time span they have not made any mistakes. I certainly have, because you simply can't make an omelette without breaking eggs.

So why did we plan an issue themed “Embracing failure”? Failure is defined as a “lack of success”, or as the Dutch designer Erik Kessels puts it “everything from flop to disaster and all points in between”. I am glad that our community seems increasingly interested in opening up and talking about making mistakes in our professional context. Colleagues who are willing to share their experiences enable the whole community to learn and improve their professional practice.

I am thankful to our two colleagues from England, Elinor Harris and Tom Roper, who organised the first workshop in our community called “Talking about professional failure: what can we learn from each other?” at last year's EAHIL Conference in Cardiff. Not only was it courageous of them to offer a session on this obviously challenging matter, but they also prepared it in an excellent way by undertaking a literature review. In their contribution to this issue, they have summarised the available literature and the workshop's outcomes. I am sure you will find reading their article as enlightening as I have.

Next, our colleague from Switzerland, Gerhard Bissels, provides an article with outspoken insights into spotting a job in our field that you should rather not take on. I am impressed that he was willing to publicly share his and other colleagues learnings about assessing an available post. Especially younger librarians will appreciate these hard to otherwise find tips.

I am also grateful to the two anonymous authors who provide anecdotal evidence about mistakes they have made in their roles. I report their experiences at the end of this Preface (Annex 1 and 2).

I am also thankful to the English editor, who helped spotting some spelling and style mistakes before this issue was published.

Finally, in addition to reading the contributions we have compiled in this issue, I encourage you to browse through the references cited by Harris and Roper. They provide a dent to the literature on published failures within the library context.

In conclusion, I firmly believe that reflecting on and talking about professional mistakes is the first step to overcoming them, and I encourage you to embrace failure in the future. To this end, I am very much looking forward to chairing the “All hail the fail” session (together with Teresa Lee) at the EAHIL Workshop in Basel. See you there!

Annex 1. “Notting out humans”

After only three months of having started a new job in a research context, I was asked to support the search process of an extensive systematic review evaluating psychological therapies for obese adults. When I first started delving into the topic, I was confronted with a multitude of psychotherapeutic schools. From cognitive behavioral therapy, mindfulness-based stress reduction, Balint groups, third wave therapies, biofeedback, emotion-focused therapy, motivational counseling, to name just a few of the over 50 options available and practiced in the different health care systems around the world. I diligently checked the terms and synonyms describing psychological therapies in the MeSH thesaurus and was finally overwhelmed by the even more extensive listing and descriptions in the thesaurus from the American Psychological Association used to index abstracts in PsycINFO.

After more than one week spent identifying and selecting the appropriate terms and communicating back and forth with the team about their inclusion, I had developed an extensive index search strategy for MEDLINE. I was therefore quite happy, that at least for the study design component of the strategy I could rely on a published and validated search filter for RCTs. This widely used filter includes a renown line using double negation to safely NOT-out animal studies. It goes "animals/ not humans/" (in Ovid syntax) and this set is then used to be "notted out" from the main results. Only that I – probably exhausted by looking up all those terms on psychological therapies, carefully trying to catch all the variants out there – wrote down this line the other way: "humans/ not animals/". I did not notice my error, nor did the rest of research team, whom I had sent the search strategy for final comments. In their defense I should mention that they were not expert searchers but epidemiologists and clinicians.

It took me another three days to translate the search strategy to the syntax and descriptors used in six other databases. Then I ran it, downloaded the results and imported them into a reference management software to deduplicate the records. I sent the final search results to the team, over 8000. Half a year later, I asked them how they were doing. The contact author wrote back that she was just about to embark on maternity leave and had only managed to screen the first roughly 1000 hits. Her maternity leave lasted for over two years, as she ended up having several children in a row, and the project was never finalized.

Three years later, a different team wanted to make a new start on the topic and synthesize the evidence. The principal scientist had plans to apply for a research grant and asked me whether she could incorporate my original search strategies into the application. I consented. Only two days later, she contacted me as she had discovered an error in the strategy. And there it was. Three years ago, I had accidentally notted out the humans instead of the animals in my MEDLINE strategy. I was shocked,

thanked her and was very relieved about the fact that the initial project had not been finalised. Of course, I instantly started checking all the other search strategies I had developed until then, to see whether I had made this mistake in other occasions. Fortunately, this was not the case.

What I learned from this experience is that it is very easy to make errors, especially if you are distracted by other aspects of the task. Even if we are professionals, we are still professional humans, and humans make mistakes. It showed me how important it is to have my search strategies peer reviewed by another medical librarian. A colleague can look at the strategy with a fresh eye, see the forest despite the trees, and notice inconsistencies. This advisable practice helps avoiding important errors, such as wrong usage of operators, omission of search lines, spelling mistakes and erroneous combinations of search blocks. Or in my case, accidentally changing the order while typing the search filter into the search platform. Ever since then, I store most search filters which I use on a regular basis in my database accounts, so I can add them with a click. Error free. Therefore, I would like to recommend the implementation of search strategy peer review to any library providing a systematic review service. For this purpose, the guideline cited below proves a useful resource.

Reference

McGowan J, Sampson M, Salzwedel DM, Cogo E, Foerster V, Lefebvre C. PRESS Peer Review of Electronic Search Strategies: 2015 Guideline Statement. *J Clin Epidemiol.* 2016 Jul;75:40-6. doi: 10.1016/j.jclinepi.2016.01.021.

Annex 2. Don't build your policy on the sandy land

Beginning a new job is an exhilarating and nerve-wracking experience. In my case the situation was intensified by the fact that I hadn't only switched jobs, I'd gone from a university setting to an international organization, from a specialised role within a library of about 300 staff members to being a solo librarian in an institution of 300 people total. I'd traded one country, nay, one continent, for another. It would have been an understatement to say that I felt the pressure to succeed.

The internal pressure was just as strong, if not stronger, than any external pressure put on me by my supervisor or the administration. Among my first duties was the launch of the institution's new open access policy. While much of the work of drafting the policy had been completed by my predecessor, promulgating it and devising the workflows and tools to support the new policy fell to me.

As is usual for me, and I'm sure nearly all librarians, when faced with an unfamiliar task, I began furiously researching and compiling information. I scrutinised the open access policies of other institutions; I read their related FAQs; I assembled a huge file of reading material to prepare for the discussion with senior scientists. I did all my homework. The meeting went off without a hitch and everyone endorsed the open access policy. There were smiles all around. In the course of this discussion it had also become evident to me that the institution's views and practices around copyright were muddled, to say the least. My first instinct should have been to stop, to reassess, to clarify and to further communicate. After all, how can constructing even more complex workflows and policies and procedures on shaky ground ever be a fix for the lack of a firm foundation? Instead, feeling the pressure to perform, to take action, to prove my value, I went forward with the open access policy despite the nagging voice that said I should've been focusing on laying the groundwork.

Implementing a new policy and expecting immediate full compliance is, of course, unrealistic. I knew it would be an uphill climb. Having said that, I underestimated the inertia and confusion that resulted from entrenched practices that had downplayed issues of copyright and institutional licensing standards. I found that my colleagues, while welcoming the open access policy in and of itself, were less welcoming when it came to figuring out the attendant paperwork that came with trying to put that policy into practice. I felt the strain of implementing a new policy while simultaneously trying to improve the groundwork on which it should have been built in the first place. Looking back it's fair to say that the open access policy has been a mixed failure, the upside being that it's also been a mixed success. It has brought to the surface the many inconsistencies in our practices around scientific publishing, especially when it comes to handling publisher copyright agreements. This has largely been an opportunity to do the cleaning up that was overdue. At the same time the general support for open access and the creation of a central open access fund have fuelled the steady rise of the institution's proportion of open access articles since the policy implementation.

With the benefit of hindsight would I have done things differently? Yes, certainly. If I were advising myself of four years ago, this is what I would recommend:

1. Stand confident in your view that underlying policies need to be clear and well understood before implementing related ones on top of them.
2. When implementing new policies and procedures, make sure to think through the minutiae of process. The devil really is in the details.
3. Resist the urge to act on deadlines that appear arbitrary. At the very least, try to understand what timelines are negotiable vs. non-negotiable.
4. When faced with a new task in a new institution, take a step back and appreciate the context. Don't just bury your head in research and think that gaining subject expertise is going to be enough.
5. You have been hired because your colleagues trust that you will bring value to the institution. Take your time to understand how best to do this.

