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Mapping the Literature of Allied Health: Healthcare Chaplaincy

Emily Johnson
University of Illinois at Chicago, emj11@uic.edu

Diane Dodd McCue
Virginia Commonwealth University, ddoddmccue@vcu.edu

Alexander Tartaglia
Virginia Commonwealth University, aftartag@vcu.edu

Jennifer A. McDaniel
Virginia Commonwealth University, jamcdaniel@vcu.edu

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Mapping the literature of health care chaplaincy 🗫 🔁

Emily Johnson, MLIS; Diane Dodd-McCue, DBA; Alexander Tartaglia, DMin; Jennifer McDaniel, MSLS

See end of article for authors' affiliations.

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Objective: This study examined citation patterns and indexing coverage from 2008 to 2010 to determine (1) the core literature of health care chaplaincy and (2) the resources providing optimum coverage for the literature.

Methods: Citations from three source journals (2008–2010 inclusive) were collected and analyzed according to the protocol created for the Mapping the Literature of Allied Health Professions Project. An analysis of indexing coverage by five databases was conducted. A secondary analysis of self-citations by source journals was also conducted.

Results: The 3 source journals—*Chaplaincy Today*, the *Journal of Health Care Chaplaincy*, and the *Journal of Pastoral Care and Counseling*—ranked as the top 3 journals in Zone 1 and provided the highest number of most frequently cited articles for health care

chaplaincy. Additional journals that appeared in this highly productive zone covered the disciplines of medicine, psychology, nursing, and religion, which were also represented in the Zones 2 and 3 journals. None of the databases provided complete coverage for the core journals; however, MEDLINE provided the most comprehensive coverage for journals in Zones 1 and 2, followed by Academic Search Complete, CINAHL, PsycINFO, and ATLA. Self-citations for the source journals ranged from 9% to 16%.

Conclusions: Health care chaplaincy draws from a diverse body of inter-professional literature. Libraries wishing to provide access to journal literature to support health care chaplaincy at their institutions will be best able to do this by subscribing to databases and journals that cover medical, psychological, nursing, and religion- or spirituality-focused disciplines.

INTRODUCTION

The Mapping the Literature of Allied Health Professions Project of the Nursing and Allied Health Resources Section (NAHRS) of the Medical Library Association has the goal of identifying core literature in the fields of allied health. It is hoped that this identification will be of great use to collection development librarians and library patrons involved in research and education in these fields. Each individual study in the larger project examines citation patterns over a three-year period for a specific discipline, identifying core journals, journals providing access to the most relevant literature, and databases that provide access to this literature. The study outlined below focuses on assessing the literature in health care chaplaincy, as reflected in key journals for the discipline.

HEALTH CARE CHAPLAINCY

Since the early twentieth century, the practice of health care chaplaincy has evolved from ordained, faith-based chaplains to specially trained, interfaith spiritual care providers employed by health care organizations. Professional chaplains are expected to meet minimum standards of education, training, and

This article has been approved for the Medical Library Association's Independent Reading Program http://www.mlanet.org/education/irp/.

Supplemental Table 5 is available with the online version of this journal.

Highlights

- Health care chaplaincy is a broadly inter-professional field that draws from and contributes to medical, nursing, psychological, and religion or spirituality literature.
- Two of the three source journals were sponsored by professional chaplaincy organizations.
- Journals and books were cited with almost equal frequency.

Implications

- For full coverage of the health care chaplaincy literature, librarians should consider searching in databases beyond MEDLINE, for example, CINAHL and Academic Search Complete, to assure comprehensive coverage.
- Health care chaplaincy researchers and educators considering publication will find the study useful for identifying relevant journals from related disciplines.

clinical competence. Formal theological education at the master's degree level (72 credit hours) and 1,600 hours of accredited, supervised clinical pastoral education (CPE) are fundamental to preparation for professional chaplaincy. The history, scope, and requirements for clinical pastoral education can be found on the Association for Clinical Pastoral Education (ACPE) website http://www.acpe.edu. The

ACPE is recognized by the US Department of Education as an accrediting agency for pastoral education including the clinical training of health care chaplains. Accredited CPE programs are located in a variety of health care settings, with a sizeable number at academic medical centers. The Association of Professional Chaplains (APC) http://www.professionalchaplains.org exists as a national interfaith organization responsible for certification and professional development of clinical chaplains. APC also recognizes research as a required standard for maintaining professional competence: "The chaplain practices evidence-based care including ongoing evaluation of new practices and, when appropriate, contributes to or conducts research" [1].

The Joint Commission has long held that patients have the fundamental right to considerate care that safeguards their personal dignity and respects their cultural, psychosocial, and spiritual values. The hospital accreditation manual specifically states that "the hospital respects the patient's cultural and personal values, beliefs, and preferences...and accommodates the patient's right to religious and other spiritual services" [2]. For patients receiving end-oflife care, hospitals are expected to assess and reassess "social, spiritual and cultural variables that influence patients' and families' perception of grief" [3]. The World Health Organization has developed a spiritual and religious inventory for gauging quality of life [4]. Professional health care chaplains are in a unique position to provide comprehensive spiritual assessment and deliver interventions designed to address spiritual and religious concerns [5]. A 2011 Wall Street Journal article emphasized the increased roles for chaplains on patient medical teams [6]. While the exact number of chaplains currently working in health care is not available, correspondence with the APC reports 3,078 certified individuals and 1,037 additional members [7]. The ACPE reports more than 600 certified educators and more than 500 clinical members [8]. The demand for clinical chaplains, as members of an inter-professional care team, is projected to mirror the 10%-20% increase for other "helping" professions in health care for 2010–2018 [9]. This complements a US Bureau of Labor Statistics projection that identified an emerging demand for health care, personal care, and social assistance professionals [10].

Few journals focus on chaplaincy and pastoral care exclusively. Among journals that cover chaplaincy-related topics, three peer-reviewed publications are generally recognized among professional constituents: Chaplaincy Today, an electronic journal published by APC and provided to all APC members; the Journal of Health Care Chaplaincy, a print and electronic journal by Taylor & Francis; and the Journal of Pastoral Care and Counseling, a primarily electronic journal published by Journal of Pastoral Care Publications and sponsored by national and international chaplaincy organizations. In addition to chaplaincy-specific journals, the needs of clinical chaplaincy education are enhanced by the interchange of ideas with a number

of different disciplines. Emphasis on the contributions of clinical chaplains as members of inter-professional care teams prompts clinical chaplain education to incorporate literature from other disciplines (i.e., nursing, palliative care, organ donation, etc.) that relates to spirituality, patient and staff support, and the unique needs of specific patient populations. Emphasis on the role of clinical chaplains as it applies to new protocols or innovations to hospital processes prompts chaplain education to incorporate literature from health administration and the organizational sciences. Emphasis on pedagogical innovations to chaplain training and orientation prompts the incorporation of literature from education and the behavioral sciences.

To date, no articles have been published that recommend specific journals for clinical chaplaincy practice or education. Additionally, no reported studies have evaluated faculty ratings of journals or the perceived quality and relevance of specific journals. This study seeks to fill this gap in the literature.

METHODS

The health care chaplaincy mapping study employed the methodology outlined in the NAHRS Mapping the Literature of Nursing and Allied Health Professions: Project Protocol [11]. The study evaluated the citation patterns from selected journals from the discipline of health care chaplaincy over a three-year period as an indicator of which journals provide the highest number of citations for the discipline.

The protocol calls for source journals to be selected from the discipline through a variety of methods. The authors of the study, two health sciences librarians and two faculty members teaching pastoral care and counseling, made an initial hypothesis that the core journals would be Chaplaincy Today, the Journal of Health Care Chaplaincy, and the Journal of Pastoral Care and Counseling. However, for this study, the authors chose to query a purposive sample of seven nationally prominent faculty members generated using the following inclusion criteria: active involvement in health care chaplaincy as a researcher and/or educator; association with US CPE programs; experience as editors, reviewers, and authors; and more than ten years' experience as a professional chaplain. Although sampling bias may be introduced by use of nonprobability sampling, within the context of this study, purposive sampling is appropriate because it provides representation of those who are most involved as both consumers and producers of published theory and research. The faculty sample averaged more than twenty years of experience and represented different geographic and institutional affiliations in the United States.

Members of the sample were contacted by email by one of the researchers and asked to name the top five journals they regularly read in their role as hospital chaplains. A total of twenty-one different journals was generated from this sample. Through an iterative process, consensus was reached on three source journals—Chaplaincy Today, Journal of Health Care Chaplaincy, and Journal of Pastoral Care and Counseling—which agreed with the authors' original hypothesis.

All articles published between 2008 and 2010 in the three source journals were considered for inclusion in the study. Items that were excluded from the analysis were editorials, historical reprints, reference lists, and books reviews. Each reference was assigned a unique identifier, and the following elements were collected: source journal title, volume and issue, format of cited reference, publication date of cited reference, and article title. The formatting categories assigned to each reference were, in order of importance, journals, books, government documents, Internet, and miscellaneous. Journals were defined as serial publications, either print or electronic, produced on a periodic basis. Books, whether print or electronic, included monographs, textbooks, book chapters, manuals, and encyclopedias. Government documents were documents published by government agencies that did not meet the aforementioned criteria for journals and books, and included publications on the Internet. The Internet category was assigned to websites created and maintained by any nongovernmental organization. Finally, the miscellaneous category was used to categorize any items that did not fall into the previous four categories and could include personal communications, unpublished research, dissertations, and newspaper articles. In the case of references that could be classified as more than one format, the format that occurred highest on the list was chosen to categorize the reference. All references were entered manually into a Microsoft Excel spreadsheet.

The final reference list was sorted to determine the total number of citations from each source journal and proportion of formats present. Because the study used nominal data, a chi-square analysis was conducted to determine whether the use of publication formats varied significantly for the entire sample over time. To determine the journals producing the highest number of citations in health care chaplaincy, Bradford's Law of Scattering was applied. This law predicts that for any discipline or specialty, there will be a small set of journals that produce the highest number of articles in the field. A larger number of journals will produce an area of scatter beyond that set that captures journal titles that are referenced less frequently in the discipline. Ranking the order of journal titles in decreasing order of citation frequency allows the list to be divided into three zones of frequency, where each zone produces approximately one-third of the total citations. Zone 1 will contain a small number of highly productive journals in the discipline, Zone 2 will produce a larger number of moderately productive journals, and Zone 3 will produce an even larger number of journals with low productivity.

Major bibliographic indexing or abstracting databases were consulted for the coverage of cited journal titles in Zones 1 and 2. Because of the interprofessional nature of health care chaplaincy, it was judged best to include databases that covered health, counseling, and religion and/or spirituality. Five databases were selected to meet these criteria: MEDLINE (produced by the National Library of Medicine), CINAHL Plus with Full Text and Academic Search Complete (produced by EBSCO), PsycINFO (produced by the American Psychological Association), and ATLA Religion Database with ATLA Serials (produced by the American Theological Library Association and selected due to its wide coverage of scholarly literature in religion). Indexing coverage of each journal in Zones 1 and 2 was determined for 2010 or the last year of publication available in each database. Each of the selected databases was searched to determine if it contained journals from Zones 1 and 2. If the journal was found in a database, the number of articles indexed from it for 2010 or the last available year of publication was captured. These numbers were compared for each journal across the selected databases. Per the NAHRS protocol, the database indexing the highest number of articles for a journal was assigned a full coverage score of 5. The remaining 4 databases were assigned a coverage score based on the ratio between the number of articles indexed and the maximum number of articles indexed for 2010 or the latest available year of publication. Coverage scores were given according to the following rule: 5=95%-100%, 4=75%-94%, 3=50%-74%, 2=25%-49%, 1=1%-24%, and 0=lessthan 1%. The scores were compared to determine which database provided the most comprehensive coverage for Zones 1 and 2.

As a secondary analysis, the proportion of self-citations for each source journal, was determined. Self-citation was defined as an occurrence of a journal that cited itself in a list of references, for example, using an article from the *Journal of Pastoral Care and Counseling* as a reference for a later article in the same journal. Given that there were few titles devoted exclusively to health care chaplaincy, it was of interest to determine the rate of self-citation by each source journal. The percentage of self-citations found in the source journals during the study period was reported by journal. Self-citation is not uncommon in journals that are prominent in a selected discipline, as authors tend to reference seminal work in their own research [12].

RESULTS

A total of 2,377 references cited by 126 articles appeared in the 3 source journals during the period 2008–2010, for an average of 19 citations per article. The *Journal of Pastoral Care and Counseling*, a quarterly publication, had the greatest number of citations at 1,556, for 65.46% of the total. It contained 81 articles with references in the 3-year period, for an average of 19 citations per article. The *Journal of Health Care Chaplaincy*, a biannual publication, contributed 598 citations, for 25.16% of the total. There were 35 articles in the 3-year period, for an average of 17 citations per article. *Chaplaincy Today*, published biannually, had 215 citations, for 9.05% of the total. There were 25

Table 1
Cited format types by source journal and total frequency

			Source	journals				
	J Health Car	e Chaplaincy	plaincy J Pastoral Care Couns Cha			ncy Today	Totals	
Cited format type	no.	%	no.	%	no.	%	no.	%
Journal articles	377	63.0%	641	41.0%	107	49.8%	1,125	47.3%
Books	162	27.1%	830	53.1%	84	39.1%	1,076	45.3%
Government documents	21	3.5%	13	0.8%	0	_	34	1.4%
Internet resources	20	3.3%	10	0.6%	10	4.7%	40	1.7%
Miscellaneous	18	3.0%	70	4.5%	14	6.5%	102	4.3%
Total	598	100.0%	1,564	100.0%	215	100.0%	2,377	

articles, with an average of 9 citations per article in that journal.

Table 1 provides the distribution of citations among the 5 format types: journal articles, books, government documents, Internet resources, and miscellaneous sources. The table presents an overall representation, as well as by source journal. Journal articles (47.3%) and books (45.3%) made up the majority of cited references. There was some degree of variation in the formats cited among the 3 source journals. The *Journal of Health Care Chaplaincy* had the greatest use of journal articles (63.0%), while the *Journal of Pastoral Care and Counseling* used more books (53.1%) than any of the other resource formats.

Table 2 represents the currency of the literature cited. The majority of the citations from the source journals, nearly 79%, date from the previous decade or later (i.e., 1990-"in press"), and nearly 90% date from the previous 2 decades (1980–2000). Nearly 10% of the citations are dated prior to 1980, and an even smaller number of references were dated from earlier than 1961. Books were the most frequently cited material in the pre-1961 range at 5.9%. Not surprisingly, Internet resources correlated with currency; more than 90% of Internet resources were cited in the 2001–2010 date range. A chi-square analysis for the format of cited works by the publication period, as shown in Table 2, was significant at α =0.01 (note that government documents, Internet resources, and miscellaneous resources were collapsed into 1 category for the analysis).

A total of 404 unique journal titles were cited, with a total of 1,125 journal article citations. In applying Bradford's Law of Scattering, 3 approximately equal zones were created. In Table 3, the first zone, with one-third of the citations, contains 10 journals (2.5%). This group constitutes the "core" journal literature for the field of health care chaplaincy. In the second zone, 77 journals were required to produce another one-third of the citations, for 19.1% of the total journal count. The final zone was made up of 317 journals, for the remaining 78.5% of the journal citations.

The core journals titles in Zone 1 (Table 4) included the 3 source journals along with general medicine and psychiatry journals (for example, Southern Medical Journal and International Journal of Psychiatry in Medicine). As explained above, to analyze the indexing coverage of journals in Zones 1 and 2, the 5 selected bibliographic databases were compared for coverage in 2010. Of the 5 databases, MEDLINE provided the most comprehensive coverage for Zones 1 and 2 (63.7%). Academic Search Complete and CINAHL provide the second- and third-place coverage levels, at 58.0% and 56.3%, respectively. PsycINFO provided 44.8%, and ATLA Religion Database provided the smallest coverage at 7.9%. No database provided complete coverage of the journals in Zones 1 or 2. Table 4 provides the results for titles in Zone 1; the complete list of Zones 1 and 2 appears in Table 5 (online only).

Because the source journals were determined to be the 3 most highly productive journals in this analysis, Table 6 was produced to determine the percentage of

Table 2Cited format types by publication year periods

	Cited format type											
Publication	Journal	articles	Во	oks		rnment ments	Inte	ernet	N	lisc.	T	otal
range	no.	%	no.	%	no.	%	no.	%	no.	%	no.	%
2001–2010	655	58.2%	336	31.2%	26	76.5%	36	90.0%	54	52.9%	1,107	46.6%
1991-2000	350	31.1%	384	35.7%	5	14.7%	1	2.5%	26	25.5%	766	32.2%
1981-1990	81	7.2%	174	16.2%	1	2.9%	0	_	7	6.9%	263	11.1%
1971-1980	18	1.6%	66	6.1%	0	_	0	_	4	3.9%	88	3.7%
1961-1970	3	0.3%	52	4.8%	0	_	0	_	3	2.9%	57	2.4%
Pre-1961	18	1.6%	63	5.9%	2	5.9%	0	_	1	1.0%	85	3.6%
Unknown	0	_	1	0.1%	0	_	3	7.5%	7	6.9%	11	0.5%
Total	1,125	100.0%	1,076	100.0%	34	100.0%	40	100.0%	102	100.0%	2,377	100.0%

Chi-square (df=12, n=2,377)=384.8, P<0.0001.

Table 3
Distribution of cited journals and references by zone

	Cited j	ournals	Cited journal references				
Zone	Zone no.		no.	%	Cumulative total		
1	10	2.5%	374	33.2%	374		
2	77	19.1%	377	33.5%	751		
3	317	78.5%	374	33.2%	1,125		
Total	404	100.0%	1,125	100.0%			

self-citations for each journal. The percentage ranged from 9%–16%, which could be considered normal regarding the "uniqueness or novelty of their subject matter" of journals devoted to health care chaplaincy [12].

DISCUSSION

The preponderance (79%) of cited literature from the 1990–2010 timeframe reflects the increased interest in publishing in the past 2 decades. Future updates of this study could allow comparisons of citation patterns to determine the impact of recent efforts by APC to encourage research literacy and research participation by chaplains.

From the pre-1961 period through 2000, the percentage of books and journals cited was roughly equal. However, in the most recent decade, 2001-2010, this relationship changed. Journals were cited more frequently than books. Even so, the use of books was relatively high, in comparison with other disciplines [13]. One interpretation is that there is consensus on seminal works that are relevant to health care chaplaincy, particularly those that may pertain to theoretical frameworks of pastoral care and spirituality. This may also reflect the development of the discipline that has historically been influenced more by theoretical principles than evidence-based practice. A second interpretation is that this percentage of book citations reflects either authors' reluctance to use journal publications, which would generally represent more timely sources, or lack of familiarity with potentially relevant journal sources. The diverse

Table 6
Self-citation by source journals

Journal	Total journal citations	Frequency of self-citation	Percentage
J Pastoral Care Couns	641	72	11.2%
J Health Care Chaplaincy	377	34	9.0%
Chaplaincy Today	107	17	15.9%

range of patient populations with which chaplains work allows opportunities for them to similarly broaden their range of relevant articles across disciplines. This may speak to chaplains developing a mastery of library databases and deliberate efforts to expand their knowledge of disease or diagnosis-specific journals.

The concentration of journal self-citations is note-worthy. It may signal consensus within the discipline and confirm that this small cluster of journals represents the central literature of health care chaplaincy. It may also be a warning that health care chaplaincy is at risk of becoming insular, which would result in lost opportunities for chaplains to share and integrate their literature across other areas in which they are firmly entrenched through interprofessional teams.

After completion of this study, *Chaplaincy Today*, one of the selected source journals, announced that its last issue would appear in December 2012. APC members, who currently receive it as a part of their membership fees, will receive the *Journal of Health Care Chaplaincy*, beginning in 2013. Although it is difficult to predict the impact on chaplain readership, without either an increase in the number of articles per issue or number of issues per year, this change will result in fewer publication opportunities for clinical chaplains at a time when increased research knowledge and participation is being encouraged.

CONCLUSION

The discipline of health care chaplaincy draws from a number of health care fields for its research, education, and practice goals. As shown in the study, the

Table 4
Distribution and indexing coverage from cited journals in Zone 1 in 2010

	Cited journal	# of citations	CINAHL score	MEDLINE score	ATLA Religion Database score	Academic Search Complete score	PsycINFO score
Zone 1							
1	J Pastoral Care Couns	153	0	5	0	0	0
2	Chaplaincy Today	62	0	0	5	5	0
3	J Health Care Chaplaincy	44	5	3	0	5	0
4	South Med J	27	0	5	0	5	0
5	J Religion Health	21	3	5	2	3	3
6	Int J Psychiatry Med	15	5	5	0	0	5
7	Ment Health Religion Culture	15	5	1	0	5	5
8	J Advanced Nurs	13	4	5	0	4	3
9	Psycho-Oncol	13	3	5	0	3	3
10	JAMA	11	3	3	0	5	1
Total indexing coverage for Zone 1			28 (40.0%)	37 (52.9%)	7 (10.0%)	35 (50.0%)	20 (28.6%)

Database coverage score: 5 (95%–100%); 4 (75%–94%); 3 (50%–74%); 2 (25%–49%); 1 (1%–24%); 0 (\leq 1%).

three source journals selected for the study (Journal of Pastoral Care and Counseling, Journal of Health Care Chaplaincy, and Chaplaincy Today) produce the highest number of articles most frequently cited. Since practice occurs in a variety of health care settings, it is important for librarians who support research and education in this discipline to provide access to journal literature in the fields of medicine, psychology, nursing, and religion or spirituality. MEDLINE provides excellent coverage but should not be relied upon as the sole source of database coverage for this field. Libraries should also consider providing access to databases such as CINAHL, Academic Search Complete, or PsycINFO. Additionally, the ATLA Religion Database should be strongly considered for its focus on topics in religion and spirituality, subjects that are not covered comprehensively in the other multidisciplinary databases. Finally, librarians who support research in health care chaplaincy should be mindful of searching across multiple databases, such as the ones previously listed, to ensure comprehensive retrieval of literature.

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AUTHORS' AFFILIATIONS

Emily Johnson, MLIS, ejohnson24@vcu.edu, Research and Education Librarian, Tompkins-McCaw Library for the Health Sciences; Diane Dodd-McCue, DBA, ddoddmccue@vcu.edu, Associate Professor, School of Allied Health Professions, Department of Patient Counseling; Alexander Tartaglia, DMin, aftartag@vcu.edu, Senior Associate Dean and Professor, School of Allied Health Professions, Department of Patient Counseling; Jennifer McDaniel, MSLS, AHIP (corresponding author), jamcdaniel@vcu.edu, Research and Education Librarian, Tompkins-McCaw Library for the Health Sciences; Virginia Commonwealth University, Richmond, VA 23298-0582

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