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It's Not Imposter Syndrome: Resisting Self-Doubt as Normal for Library Workers

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Abstract/In Brief

Library workers, as with other professions, are quick to diagnose ourselves and others with imposter syndrome when we doubt or devalue our everyday work. However, methods of coping with imposter syndrome have changed little in the forty years since the term was first theorized, and often centre on feel-good fixes which do not address power imbalances between the sufferer and their workplace environment. Here, I examine the origins of imposter syndrome, and identify factors often misinterpreted as imposter syndrome but which are instead the product of oppressions such as precarious labour, racism, and sexism. By unpacking how oppression and gaslighting shapes a workplace environment, we can then alleviate individuals with imposter syndrome of sole responsibility for their own healing, and hold institutions and managers accountable for the conditions they help to perpetuate.

NB: I use the terms "library workers", "staff", and "employees" interchangeably, to denote people who work in libraries at all levels. Library workers who are volunteers, interns, students, or precariously-employed grapple with imposter syndrome as much as or more than workers who are formally credentialled with an MLIS degree or who benefit from social credibility through their age, gender, or race.

Suggested tags

Imposter syndrome, burnout, organizational development, management, mindfulness

Introduction

Imposter syndrome is an evergreen issue within librarianship, and countless authors, presenters, and researchers have offered solutions to the issue since Pauline Rose Clance and

Suzane Ament Imes first named it in 1978 (Clance & Imes, 1978). The problem is pathologized as a syndrome, yet simultaneously framed as a natural part of entering a profession, particularly for women. Despite this acknowledgement of prevalence, solutions seldom analyze workplace culture or values, instead emphasizing that the afflicted individual should adjust their beliefs and behaviours. By examining imposter syndrome literature, and reframing it in a culturally responsive way, we can identify causes of imposter syndrome, experiences misidentified as imposter syndrome, and how institutions benefit from it. With this knowledge, we can then shift from treating imposter syndrome as a framework of individual affliction, to one which signals a need for institutional change and accountability.

Defining Imposter Syndrome

Imposter syndrome, also called imposter phenomenon, imposter experience, fraud syndrome, and imposterism, is when a person doubts the validity of their accomplishments, attributes them to external forces, and has an irrational fear that they will be revealed as a mistake.

Pauline Rose Clance and Suzanne Ament Imes first coined and researched the "imposter phenomenon" in 1978. Clance & Imes' (1978) groundbreaking work, *The Imposter Phenomenon in High Achieving Women: Dynamics and Therapeutic Intervention;* articulated crucial issues about workplace dynamics and the anxieties of working women.

According to Clance & Imes (1978), "The term impostor phenomenon is used to designate an internal experience of intellectual phoniness which appears to be particularly prevalent and intense among a select sample of high achieving women." (p. 241). The article goes on to explain that men believe their success is due to their own inherent intelligence and worth, while women believe that their successes are due to external factors such as luck, or temporary qualities such as effort (Clance & Imes, 1978, p. 242).

Clance & Imes' (1978) study used a sample of 178 "white middle-to-upper-class women between the ages of 20 and 45" (1978, p. 242). While men are acknowledged as also suffering from insecurity, Clance & Imes (1978) also state that, "We have noticed the phenomenon in men who appear to be more in touch with their "feminine" qualities." (p. 241). Imposter syndrome remains a contemporary workplace issue, yet research around it is centred in whiteness, and invalidates the experiences of queer people, people of colour, and survivors of bullying or abuse.

In their article, Clance & Imes (1978) theorize how women seek validation and find mentorship, stating, "She uses her friendliness, charm, looks, humor, sexuality, and perceptiveness to win the person over", and "She may volunteer to assist a professor with his/her pet research project. She may even become sexually involved with the mentor." (Clance & Imes, 1978, p. 244). It is appalling to consider this credible rhetoric - such thinking positions women as manipulative, while also dismissing the consistent work required to develop emotional intelligence and cultivate relationships. Qualities such as empathy and active listening are coded within the

article as "feminine"; also reinforcing toxic masculinity. Most alarmingly, this viewpoint erases the ongoing history of misogyny, sexual abuse, and abuse of power within academia; which is certainly applicable to librarianship (Ford, 2018).

Clance & Lanford (1993) published a paper fifteen years later, reviewing the original study and subsequent research. Although it states that imposter behaviours manifest differently between genders, the updated study finds no differences between genders as to the degree imposter syndrome is experienced (1993, p. 496). Gender is not mentioned beyond a binary in either work.

Clance & Imes (1978) present several solutions to alleviate imposter syndrome - group dialogue and validation, challenging negative thought patterns, confronting fear of success, affirmations, imagining conversing with someone who they think they have "fooled", keeping a journal of positive feedback, role-playing feeling intelligent, and practicing authenticity (1978, p. 246). The 1993 article recommends therapy which focuses on childhood dynamics and expectations; which delegitimizes the impact of bullying, abuse, or precarity in adulthood. Modern solutions to imposter syndrome have not evolved much from those offered by the article - most of us can recall well-intentioned advice to set good boundaries, or practice mindfulness. However, if we are still as afflicted by imposter syndrome now as when this article was published, over forty years ago, then we need a new approach, reframing the problem rather than the solution.

Patterns of Power and Prevalence

I started questioning imposter syndrome during my various stages as a graduate student; participant in professional development programmes; and in my first librarian role. In each experience, I was surrounded by brilliant, talented people, and it was not unusual for myself or my peers to be awed by others in the room. However, shyness, or gladness to be included among people you admire are not the same as an ingrained disbelief in belonging; and those instances in themselves were not noteworthy. What intrigued me about these environments was that in each one, mentors or authority figures would warn us to shore up against imposter syndrome. Those in positions of power kindly-yet-repeatedly pushed the narrative that imposter syndrome wasn't just a possibility, it was a natural experience that could strike at any point during one's career, but was unavoidable as an early-career professional.

My interest deepened when during my first six months as a credentialed, compensated librarian, I attended three separate training sessions pertaining to imposter syndrome. These took the form of a workshop for library staff, a workshop for university employees, and a pre-conference workshop at a national conference. The workshops were all led by women, and had majority female attendees. Workshop formats included a combination of presentations, inter-group dialogue, and time for personal reflection. I am thankful for the opportunity these workshops provided to connect with others, practice radical vulnerability, and to talk openly about our internalized worries and shame. Misery loves company, and it can be comforting to step back

and realize that no-one exudes non-stop confidence, and that sometimes we can all take ourselves a little too seriously.

However, every session promoted imposter syndrome as a personal issue - and a personal flaw - requiring growth and grit to be overcome. Nowhere in these conversations did we address power dynamics or institutional accountability, nor did we pause to consider if there were populations whose anxieties could not be helped under an imposter syndrome framework. While I had readily subscribed to the idea that it was inevitable that there would be stretches of time when I felt like a failure, I had not considered those who are systemically made to feel unsafe, lesser-than, or overburdened in their work.

As I considered the suggested remedies for imposter syndrome, I realized they erased my positionality and lived experiences. As a Māori, takatāpui, immigrant, person of colour, and first-generation scholar, I know that libraries and academia were not constructed for my benefit; and that systems of colonization, white supremacy, misogyny, and hatred continue to operate within them and wider society. The lack of belonging I felt did not stem from a lack of self-esteem, but from the knowledge that libraries and academia as institutions *never intended* I belong.

Beyond my own anecdotal evidence, a scan of recent conference schedules reveals that the 2019 ALA Midwinter Meeting offered career counselling, pop-up mentorship opportunities, and sessions including, "Manage Your Stress and Start Living a Healthier Life Today" and "Overcoming Imposter Syndrome: The Perspectives of Two New Academic Librarians". The ACRL 2019 Conference included the session, "When Your Internal Narrative Makes it Hard to Lead: Addressing Imposter Phenomenon of Library Leadership". The 2019 ALA Annual Conference included "AvramCamp", a LITA-sponsored session which promised advice to combat imposter syndrome. Of these conferences, the most high-profile event was the ALA Spectrum Chair's Program, "Imposter Syndrome", where a panel of library workers advised on overcoming imposter syndrome in the workplace. Every year, there are countless other conference sessions on imposter syndrome, as well as the multitude of blog posts and webinars designed to warn us of its existence. As a profession, we keep talking about imposter syndrome, especially targeting library school students, newly-appointed managers, and people of colour. When are we going to stop signalling that fear and anxiety is normal within our profession, and instead examine how these narratives are the result of institutions deflecting the need for change?

Library-specific Literature

Library workers have also created library-specific scholarship on the syndrome. In *Jumping into the Deep: Imposter Syndrome, Defining Success, and the New Librarian*, Lacey & Parlette-Stewart (2017) introduce some of the nuances of imposter syndrome and librarianship, such as overwork, and lack of orientation, job clarity, or mentorship for new librarians. Critically, Lacey & Parlette-Stewart (2017) name library school programmes as an originator of imposter

syndrome, as offering little to no concrete help in transitioning to the workforce. They also name academic librarianship as an intense and competitive field, and draw attention to the role of temporary and contract-based work in breeding feelings of insecurity, worthlessness, and pressure to secure permanent employment.

Lucy Rakestraw (2017) depicts the cycle of imposter syndrome and overwork. Rakestraw (2017) also notes that imposter syndrome is not nervousness or low self-esteem; and summarizes the various personas (Harvey, 1985) in which imposter syndrome can manifest (workaholism, gratitude for "luck", charm, blending in, procrastination), and the ways sufferers deflect their role in success.

I found three studies conducted on imposter syndrome within Library & Information Science. In the first, Clark et. al. (2014) tested levels of imposter syndrome within newer librarians, younger librarians, and those whose jobs required more technical expertise. After analyzing perspectives from 352 respondents, the authors concluded that younger and newer librarians reported higher levels of imposter syndrome than their older, more established peers.

Clark et. al. (2014) also reported inconclusive results regarding technical expertise and imposter syndrome (p. 265). Tenure-track faculty with less than three years in their roles reported imposter feelings at a higher rate than their non-tenure and staff counterparts; and overall, one-in-eight library workers reported feelings of imposter syndrome. Importantly, they conclude by asserting that managers should actively intervene in overwork or fear of failure within their employees, and stress the need for openness, proper training, appropriate feedback, and observation as supervisors of new librarians (2014). According to Clark et al.,"While library organizations may not necessarily cause IP feelings, survey respondents perceived that the culture fosters those feelings" (p. 264).

In the second instance, Barr-Walker et. al. (2019) surveyed over 2000 members of the Medical Library Association, replicating the methods previously used by Clark et. al. (2014). Of the 703 participants, one-in-seven indicated they may have imposter feelings, and the 79% who indicated that they did not hold a health sciences degree reported higher rates of imposter feelings than those who were formally credentialled in their subject area (Barr-Walker et. al, 2019, p. 326). The authors recommend further studies to address intersectional relationships between race, gender, and privilege within library systems.

In the third study, Martinez & Forrey (2019) draw on their experiences as new librarians, and speak to the impact of imposter syndrome on library instruction programmes. They also address an important critique of the original imposter syndrome study with this quote by Pauline Clance:

> "If I could do it all over again, I would call it the imposter experience, because it's not a syndrome or a complex or a mental illness, it's something almost everyone experiences (Anderson and Kang, 2016)." (2019, p. 3).

The authors surveyed 172 early-career librarians, and found 85% felt insecure, underqualified, or in danger of being discovered as a fraud (Martinez & Forrey, 2019, p. 6). Respondent narratives highlighted the lack of training librarians receive on how to teach classes. The article concludes with advice to "find a friend" and combat the isolation associated with negative self-talk. However, they also include a paragraph on "how employers can help", and the importance of setting clear expectations and providing consistent feedback (Martinez & Forrey, 2019, p. 6).

Overall, research on imposter syndrome reinforces the narrative that overcoming it is an individual effort, but recent opinion pieces offer more holistic, radical viewpoints which acknowledge the role of systems in perpetuating imposter syndrome. For example, Mullangi & Jagsi (2019) state:

> Imposter syndrome, in many ways, is analogous to another, related, epidemic—that of clinician frustration—often termed burnout. Studies show that a third to half of medical students and clinicians are experiencing depression and anxiety, much higher rates than those observed among their non physician peers. A single such affected physician can be prescribed medication, encouraged to seek talk therapy, or asked to take a therapeutic leave of absence. But at the aggregate level, administrators are acknowledging that they have a part to play in addressing the structural environment—long hours, rising case loads, and an increase in administrative tasks related to electronic medical records, which can contribute to frustration. (p. 403)

The ways in which institutional cultures and conditions may cause harm includes a variety of pathologized experiences, including imposter syndrome, low morale, and weaponized gratitude. Likewise, white supremacy within workplaces often surfaces as positivity culture, bootstrapping, and the mythology of " professionalism" and "a good fit" (Mirza & Seale, 2017; López-McKnight, 2017; Watson, 2017). We need to research and address how whiteness intersects with imposter syndrome, and how it informs whose expressions of need or assurance we affirm and reward.

White Supremacy and Imposter Syndrome

As the initial imposter phenomenon study was conducted with white study subjects, it is not too surprising that solutions to imposter syndrome are also rooted in whiteness. This whitewashing manifests in three major ways - tone policing, disregard for collective cultures, and homogeneous expectations of behaviour.

The suggested means of overcoming imposter syndrome overwhelmingly amount to "developing confidence" or "being positive" (Clance & Imes, 1978). This positioning assumes that everyone with imposter syndrome lacks confidence or assuredness. However, one can be confident in one's own abilities or values, without being rewarded or in alignment with

institutional priorities or workplace culture. Put another way, feeling devalued does not automatically mean someone feels worthless, and can instead indicate a lack of recognition or safety to express confidence in the workplace. Advising performance of confidence can function as a form of tone policing, or shutting down concerns from a vulnerable party - particularly if the advisor has enough privilege to ignore existing power dynamics.

Using a framework which suggests that anxiety diminishes with confidence or poise makes another assumption - that confidence is uniformly accepted by everyone, in all environments. It is not enough to simply be confident when expressions of confidence or positivity are routinely ignored or shut down. For example, librarians of colour consistently have their credentials questioned, or their achievements diminished as tokenization or affirmative action by coworkers and patrons alike (Brinkman et. al., 2015). Women are criticized for everything from their email punctuation to their style of dress - and studies demonstrate managers are less likely to hire women they deem unattractive, regardless of how confident those women are and what dress or grooming standards are in place for other genders (Huang, 2018).

Not only can confidence be ignored, but there are negative consequences for asserting one's boundaries - consider the routine violence towards people who dare to turn down romantic advances. This notion of confidence is a preference for whiteness, not equally enjoyed by those who are not white, cisgender, heterosexual, male, or otherwise depicted by dominant narratives within society. Even Clance (1978) approaches this, stating, "The phenomenon may be further maintained in response to the negative consequences that are likely to befall the woman in our society who displays confidence in her ability." (Clance, 1978, p. 5). Establishing boundaries is only useful if you have the means to aggressively defend them, or if you are already respected.

Clance (1978) posits that it is possible women eschew an image of success or independence out of fear of being seen as less feminine, but I argue the likely modern scenario is that success risks jealousy, bullying, or being undermined within a competitive workforce, and that deferring to those higher up the ladder is part of the everyday emotional labour performed to manage the emotions of those with more power than ourselves.

Lastly, the imposter syndrome framework does not leave room to explore cultures outside of whiteness. Confidence is not a homogeneous state which manifests in the same way for everyone, and yet under imposter syndrome, we are assumed to have a shared understanding of exactly how a "confident" person acts and speaks. Gestures, facial expression, eye contact, loudness, dress, tone, and posture are just some of the ways in which our non-verbal communication can vary - but the workplace standards by which we judge these features as expressing confidence or professionalism are driven by racism and white supremacy.

As a Māori, I cannot help but reflect on the differences in how pride and humility are perceived in Aotearoa and the United States. In Te Ao Māori, society is collective and emphasizes the importance of and interconnectedness between relationships, land, and ancestors. These values are enshrined in some of our commonly used whakataukī, such as "ehara taku toa, i te

toa takitahi, engari he toa takitini" (my success is not mine alone, it is the success of the collective), or "kāore te kumara e kōrero mō tōna ake reka" (the kumara does not speak of its own sweetness). Achievements are often acknowledged as the result of generations of work, knowledge, and care by the community; a mindset that does not diminish our own role in the slightest. Naming those who have raised, influenced, and helped us is a joyful, community-driven practice, and one common among cultures that value community wellbeing over individual competition and success.

Even among Pākehā (New Zealanders of European descent), humility, celebrating others, self-deprecating humour, and downplaying achievements or expertise are the norm, but do not signal lack of confidence or self-esteem. While Tall Poppy Syndrome - criticizing those who stand out or who are conspicuously successful - also features in Aotearoa culture, a down-to-earth attitude is prevalent back home, and thanking others stems from connectedness and community.

In my experience as an introvert raised within a collectivist culture, practices such as sharing credit, honouring elders, and not forcing myself towards extroversion often leave me feeling misunderstood in American workplaces. But beyond being underestimated, an individualistic workplace can be isolating, controlling, and abusive. How can we advise workers to be vulnerable and authentic, if institutions replicating whiteness may in fact end up harming workers who express themselves with trust or authenticity?

Imposter Syndrome as Gaslighting

When confronted with a peer who is routinely anxious or dissatisfied with their achievements, many of us are quick to suggest imposter syndrome is the problem - a problem many of us can relate to and want to destigmatize. After all, we are a service profession that loves to help, particularly by providing information and resources.

While it is admirable to want to help others overcome their difficulties, it is worth pausing to examine how these circumstances may result from concrete factors other than imposter syndrome. Workplace difficulties can manifest due to inadequate onboarding, job creep, or budget cuts (Lacey & Parlette-Stewart, 2017); as well as more malicious reasons such as racism, bias, or bullying (Kendrick, 2017). Changing these environments takes a lot of uncomfortable, hard work, including questioning who and what we value and reward on an institutional level. What is less work for institutions is to shift accountability back onto the individual - which, very plainly, is gaslighting.

Psychology Today defines gaslighting as a form of psychological manipulation where the victim is intentionally fed false information as a means of creating self-doubt. We typically discuss gaslighting in the context of relationships, particularly domestic partnerships and intimate relationships. I use the language of gaslighting here to unpack how employer-employee

relationships can be fraught with unbalanced power dynamics and a need or desire to control the behaviour of the employee.

Consider the following examples:

- Insistence that the lack of librarians of colour is a "pipeline issue" that can be fixed by diversity residencies, instead of a "racism issue" that persists despite short-term hires
- Requiring job candidates to submit "diversity statements", without requiring the institution to state how they protect, promote, and retain minoritized employees
- What experience and scholarship "counts" towards a tenure/promotion timeline
- Insistence that Indigenous Elders should be cited as "personal communication" within citation styles, not as knowledge sources in their own right
- Unofficially tasking diversity resident librarians with teaching the university how to work with minoritized people [As Alston, Chiu, Colbert, and Rutledge (2019) state, "While residents can bring fresh, positive energy into a library, they are new professionals and therefore should not be expected to work alone as change agents" (p.67).]

In each example, workplace policies can directly contribute to a culture of anxiety, uncertainty, stress, and internalized blame within their employees. The onus is on the worker to become resilient and less sensitive, gracefully absorbing harm for the comfort of the institution. As Tewell's (2020) work on resilience states, "Most often, the ideal means of addressing this need is for the people with the perceived deficit to apply themselves, to conform, or otherwise assimilate to dominant culture" (p. 139).

It is important to note that even if the intent of these workplace messages is not malicious - say, due to policies out of one's control, or simple lack of awareness - that the impact upon workers can still be demoralizing. While not everyone has the power to overturn institutional practices and policies, they can openly acknowledge that anxiousness is a rational response to a situation fraught with power dynamics and inequalities.

While in my experience, employers are willing to have discussions about imposter syndrome and cultivating resilience during work hours, there is not much more support offered to enact any of the suggested ways of decreasing stress levels, let alone examining institutional causes of stress. Again, it behooves any institution to avoid examining chronic anxiety in its employees beyond a surface level, and to insist that any meditation, yoga, or similar wellness practices take place on an employee's own time. Furthermore, as Tewell (2020) writes, "The people not asked to show grit are the ones creating the terms and conditions." (pg. 148).

It's a start to encourage employees to adopt a "power pose", or meditate for a few minutes to alleviate pre-meeting jitters - but such practices are rendered ineffective when workplace culture allows meetings to run long, be scheduled back-to-back, and for people to be ignored, bullied, or subjected to microaggressions. You cannot meditate racism, misogyny, and overwork away.

If you still need to attribute the anxieties of yourself or your colleagues to imposter syndrome, rather than critically examine the culture of your workplace, I have a suggested diagnosis: You may have what I call *imposter imposter syndrome*. Imposter imposter syndrome is when someone maintains a chronic belief in the inherent shortcomings and discomfort/imposter feelings of individuals, in order to maintain their own comfort and ignore or diminish societal and institutional patterns of injustice and oppression.

Imposter imposter syndrome is a coping mechanism - if it is others who are individually at fault, then you can pretend that you will always have the favour or skills necessary to avoid harm in these systems. If you believe that other people are just inherently unhappy or uncomfortable in work environments, you can absolve yourself of being complicit in perpetuating these systems, consciously or otherwise. If you keep attributing your own poor feelings to imposter syndrome, then you can pretend that with enough work, you can feel better, even if your conditions remain the same.

Coping mechanisms develop for a reason - they can provide protection and hope during difficult times. But inherently blaming others for how they feel or avoiding taking a holistic look at the systems you participate in can be maladaptive. Luckily, as with concepts such as vocational awe (Ettarh, 2018), once you recognize imposter imposter syndrome, you can work to unlearn and resist it. One approach to doing so is trauma-informed care.

Trauma-Informed Care

Just as with cultural differences, expressions of trauma can also be misattributed to imposter syndrome. Clance & Imes (1978) identify working excessively hard, intellectual flattery or phoniness, and leveraging charisma as imposter behaviours. Likewise, the personas of Workaholic Imposters are known to spend disproportionate and unnecessary effort on tasks compared to their peers, and Chameleon Imposters deflect the need for support (Harvey, 1985; Young, 2011).

More specifically, workers with these personas who are new, precariously employed, or trying to prove their worth may question their right to take sick days or annual leave, and stay late or work during lunch breaks and weekends. Similarly, they may eschew celebrating their achievements in favour of looking ahead to their next project or task; and be more likely to accept extra work, such as covering early morning or weekend shifts - even if they feel overworked, or that this extra work will not provide an opportunity for growth. It is employers and institutions that benefit from this naive bootstrapping - at least in the short term - while workers with these characteristics risk their own burnout.

Similar characteristics can be identified within trauma responses and survival mechanisms, including "flight" (workaholism and perfectionism), and "fawn" (people-pleasing, difficulty saying no) (Virzi, 2020; Walker, n.d.). Further overlap exists between imposter syndrome, depression, and "freeze" trauma responses (inability to make decisions, spacing out, isolating oneself).

Not only do we potentially carry our trauma with us into the workplace, but we can also encounter direct, complex, historical, and vicarious trauma on the job. Within our profession we can be impacted by anything including mass job layoffs, institutions being defunded or outsourced, refusal to grant tenure, violent terrorist acts, and sudden pleas for help or medical assistance from our community. At our professional meetings and conferences, we can be confronted by people who have harmed us or others, and we can be dehumanized and attacked behind closed doors, away from our support systems.

Even on a good day, free from direct violence and microaggressions, intergenerational trauma can manifest when we enter library and university buildings constructed by the labour of enslaved and incarcerated persons, on stolen Indigenous lands. White supremacy is reflected in institutional mascots, statues and monuments, subject headings, plundered objects, award names, and the languages and types of knowledge we deem as being valid or having scholarly merit. Complex trauma can surface through the prolonged process of job searching or experiencing job insecurity, through months or years of having to absorb others' job duties due to budget cuts, or through counselling students experiencing personal crises, year after year.

Librarianship, like social work, is a "helping profession" viewed with vocational awe (Ettarh, 2018). Those whose lived experiences include trauma may intentionally go on to serve similarly impacted populations (e.g. - people of colour, at-risk youth, undergraduate students), and as such risk their own retraumatization and burnout (van Dernoot Lipsky, 2009).

As a Māori librarian, I often reflect on being an Indigenous person and a first-generation university student, helping new first-generation university students navigate a colonial system of learning. The work is rewarding, but also uncomfortable, and the cyclical nature of it brings to mind this passage by child protective agency worker Harry Spence (n.d.):

> I started really thinking about what it was like to be engaged in trauma and in
> creating it at the same time…we hire 24-year-olds right out of college, give them
> a months' training, and then they go observe the most complicated families in our
> culture, and then they have an obligation to predict the future, and if they're
> wrong they'll carry blood on their hands and they'll be publicly crucified.
> (Spence, n.d., as cited in Van Dernoot Lipsky, 2009, p. 235).

Trauma-informed approaches to library work continue to grow, with multiple universities offering a conjoint degree in library science and social work, and public library systems such as Denver and San Francisco featuring licensed social workers onsite. However, as with EDI work, trauma-informed librarianship focuses primarily on patrons, despite our own needs.

To begin reflecting on trauma-informed approaches, consider the six guiding principles of safety, trustworthiness & transparency, peer support, collaboration & mutuality, empowerment, and cultural, historical, and gender issues (2018, Center for Disease Control). A trauma-informed

approach does not inherently pathologize nervousness, and it allows people to acknowledge and work through concerns, without punitive judgement. Similarly, a trauma-informed approach might make job expectations and support clear, while holding institutions accountable for co-creating conditions conducive to healing with their staff.

Conclusion: Shifting the Burden

Claiming the label of having imposter syndrome can be a relief - it can allow you to articulate your struggle, and to develop a shared understanding of it with others. With a "diagnosis", you can then work towards seeking a cure; and taking steps toward action can be empowering and energizing in themselves. For those who find this an effective and straightforward process, I am glad; and hope that you are able to support others in turn. However, if attempting to advocate for your needs, and celebrate your contributions with confidence still results in feeling dismissed, underappreciated, and approaching failure, consider if the imposter syndrome framework is really serving you - or, if it actually serves someone else.

Much of the traditional advice for overcoming imposter syndrome is useful as a short-term coping mechanism, and can potentially help individuals perform confidence and adhere to mainstream expectations. However, the imposter phenomenon has persisted for over forty years, and evidence suggests that it is not just a product of individual neurosis, but often one of collective anxiety due to neoliberal pressures, racism, sexism, and bias against minoritized people.

Literature on imposter syndrome is plentiful, and usually contains exercises to give individuals some relief. In 1981, Joan Harvey created the "Harvey Imposter Phenomenon Scale", which was followed by Pauline Clance's "Clance Imposter Phenomenon Scale" in 1985. Both instruments consist of statements which the subject responds to on a Likert scale, resulting in a score measuring their likelihood of suffering from imposter syndrome.

Building on this work, I have developed some exercises not for those with imposter syndrome, but for those who manage people and institutions. The appendix for this article contains two tools I have created for people to examine their workplace policies and practices, and their own management styles. The first is an "Institutional Imposter Phenomenon Test"; which is a flexible self-assessment addressing onboarding, communication, trust, boundaries, psychological safety, accountability, job clarity, institutional culture, and anti-racism efforts. The second is a response to the 2018 "Problem Woman of Color in the Workplace" infographic by the Safehouse Progressive Alliance for Nonviolence, and illustrates how pushing minoritized employees out of organizations is not an inevitability, but that managers need to reflect, advocate, and make intentional efforts to retain their talented staff.

I have created these tools with institutions in mind, but all institutions consist of people who need to hold themselves accountable on an individual level to create positive change. Ultimately, whether a manager or colleague, you cannot control how someone feels or responds

to a situation - but you can take a hard look at how your complicity or behaviour might contribute. We all have agency for compassion, as stated by van Dernoot Lipsky (2009):

> I often remind my colleagues that we may unknowingly influence systems simply by altering the way we interact with them. We must never underestimate the power of changing ourselves, of committing to being a force for liberation, light, wellness, justice, and right action wherever we go. (p. 200)

The original imposter syndrome study, and the suggestions it provides are rooted in white supremacy, and it is important we recognize this intersection before we rush to suppress it with wellness or deflection. There is unlimited potential to research how workplace conditions contribute to low morale, anxiety, and trauma, but we do not need to do more studies to know these environments are unacceptable, and that we can immediately begin to improve things for ourselves and our colleagues through reflection and a commitment to doing better.

Acknowledgements

APPENDIX A: INSTITUTIONAL IP TEST

Institutional Accountability Scale - Imposter Syndrome Test

Context
This test flips the perspective of the Clance Scale and Harvey Scale, which were developed for individuals to test if they are at risk of developing imposter syndrome; and instead test to see if your management style or institution creates an environment which cultivates imposter syndrome.

Instructions
Using the scale below, rank how true each statement is for you. Part A asks questions regarding your personal leadership style, and is applicable for all people, not just those with an official managerial or supervisory job title. Part B asks questions pertaining to the overall culture and practices of your institution. I have used the words "employees", "colleagues", and "workers" interchangeably.

Power structures and privilege do not impact everyone uniformly - so you can choose to take this test while considering the experience of a specific employee, or workers at your institution more collectively. Answer as quickly and honestly as possible - and do not belabour your answers, although you can certainly take more time to reflect on them later. Instructions for scoring the test follow.

For suggestions and questions on reuse, please contact the author Nicola Andrews via nicolaandrews.net.

Part A: Supervisor Questions

Onboarding

1. I actively mentor new employees, including connecting them with people, and consistently letting them know of opportunities that may interest them.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

2. I take the time to understand my employees (including name pronunciation and pronouns) and actively work with them to understand their needs, goals, and interests.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

3. New employees seem to transition into their roles with ease and certainty.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

Communication

4. I announce meetings and agendas with enough notice to prepare and receive feedback.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

5. I practice active listening, and if colleagues choose to share their experiences with me, I believe them and take them seriously.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

6. If I receive constructive criticism, I can reflect on it and respond, without deflecting or immediately responding out of guilt.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

Confidence in Others

7. I publicly and privately name and praise the work of my colleagues and direct reports.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

8. I am comfortable with multiple expressions of confidence and leadership style.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

9. I am comfortable letting others lead projects or meetings I attend.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

Boundaries

10. I practice healthy boundaries in what personal information I share with others.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

11. I model positive work-life balance, and do not have expectations that employees work prolonged work hours or beyond five days in a row.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

12. I am comfortable with not knowing the answer to a question or problem.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

13. I am happy for my colleagues if they accept an internal promotion, or job elsewhere.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

Psychological Safety

14. Colleagues feel comfortable sharing their goals and aspirations with me.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

15. Colleagues seek my help with professional references, workplace concerns, or advice.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

16. Employees respectfully push back if they disagree with a decision I have made.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

Accountability

17. I consider how my behaviour contributes to the culture of my workplace.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

18. I actively work to correct problem behaviour in the workplace, including bullying or microaggressions, even if I could easily avoid getting involved.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

19. I talk to staff about responding to traits such as "directness", "boundary-setting", and "abrasiveness" in the same way for all genders and identities.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

20. I have the power to advocate for others, and to navigate power dynamics/difficult conversations on their behalf.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

21. I make ongoing efforts to address my complicity within systems of white supremacy, and educate myself on social justice and anti-racism beyond surface level understanding.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

Part B: Institutional Culture Questions

Job Clarity

1. There is a structured, effective, and welcoming onboarding procedure for all new hires.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

2. Job roles and responsibilities are well-defined, and expectations for success are clear.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

3. There is a practical, consistent, and transparent method for providing feedback on job performance, both formally (annual review) and informally (ad hoc basis).

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

4. If workers are asked to assume extra tasks, they are given the resources necessary to do so (staffing, budget, time/release of other duties, job title/authority).

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

Job Security

5. Workers are not employed at the institution under a temporary, fire-at-will, probationary, or residency-based contract.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

6. It is acceptable for workers to miss a day or two of work - requiring them to give notice, but not reason - without worrying about increased workload upon return.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

7. The institution has stable or growing budgets, hiring patterns, and projected growth.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

Institutional Culture

8. There is no tangible divide between formally credentialed and non-credentialed staff.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

9. We do not compete or have rivalries with other departments, institutions, or campuses.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

10. There is a culture of competition/excellence which is healthy and based in growth, not fear or scarcity.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

11. There is room within the organization to both celebrate success, and acknowledge and work through mistakes or failures.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

12. The institution favours maintenance, innovation, public services, and technical services work equally; as reflected in markers such as its mission, budget, and communications.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

13. The community (patrons, stakeholders, board, administration) has a clear understanding of what we do, and supports us through advocacy, donations, or other means.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

Equity, Diversity, and Inclusion

14. Workers of all identities can see themselves reflected at all levels of the organization.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

15. Our institution makes substantial efforts to recruit, retain, and promote employees from all backgrounds, without subtly or explicitly demanding they assimilate into our culture.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

16. The institution demonstrates a value of EDI (equity, diversity, and inclusion) through measures such as having a public diversity statement, a diversity committee, and an ongoing commitment to dismantle white supremacy at all levels of the organization.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

17. Workers are able to openly and safely express their opinions to supervisors and administration, whether agreement, questioning, or dissent.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

18. If wellness initiatives are poised as a solution for workplace stressors, then ongoing resources and work time are provided for employees to meaningfully engage with them.

5	4	3	2	1
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

Scoring your Results

Add up your scores for Part A and Part B and record them below:

Part A: _____/105 possible points

Part B: _____/90 possible points

The higher your score is, the more likely it is that elements of your institutional culture, workplace policies, or your own mentorship and leadership style have the potential to contribute to the development of imposter syndrome, burnout, and low morale within your workplace. This can be uncomfortable to sit with - but try not to get overwhelmed. If you took this test voluntarily and are willing to grapple with the results, there is hope.

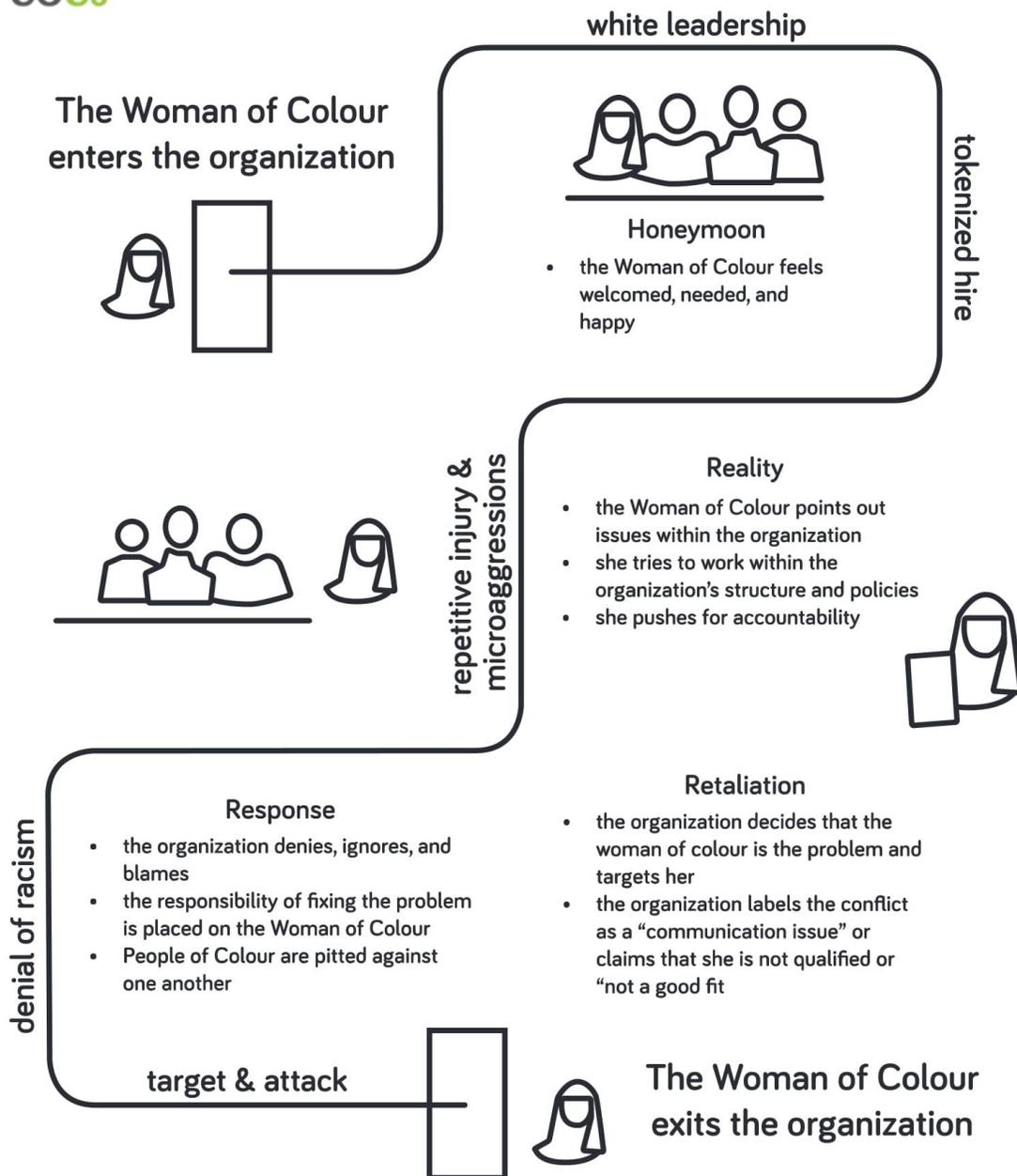**Prompts for Reflection**

- How do you feel about your results?
- Are results consistent for Part A and Part B?
- Are there sections of the test which stuck out to you?
- What do you have the power to influence, question, or change?
- How are you going to ensure that if changes need to be made, that the burden of managing change does not fall to those most in need of it?

APPENDIX B: "PROBLEM" WOC IN THE WORKPLACE INFOGRAPHIC

The "Problem" Woman of Colour in the Workplace

The Woman of Colour enters the organization

white leadership

tokenized hire

Honeymoon
- the Woman of Colour feels welcomed, needed, and happy

repetitive injury & microaggressions

Reality
- the Woman of Colour points out issues within the organization
- she tries to work within the organization's structure and policies
- she pushes for accountability

denial of racism

Response
- the organization denies, ignores, and blames
- the responsibility of fixing the problem is placed on the Woman of Colour
- People of Colour are pitted against one another

Retaliation
- the organization decides that the woman of colour is the problem and targets her
- the organization labels the conflict as a "communication issue" or claims that she is not qualified or "not a good fit
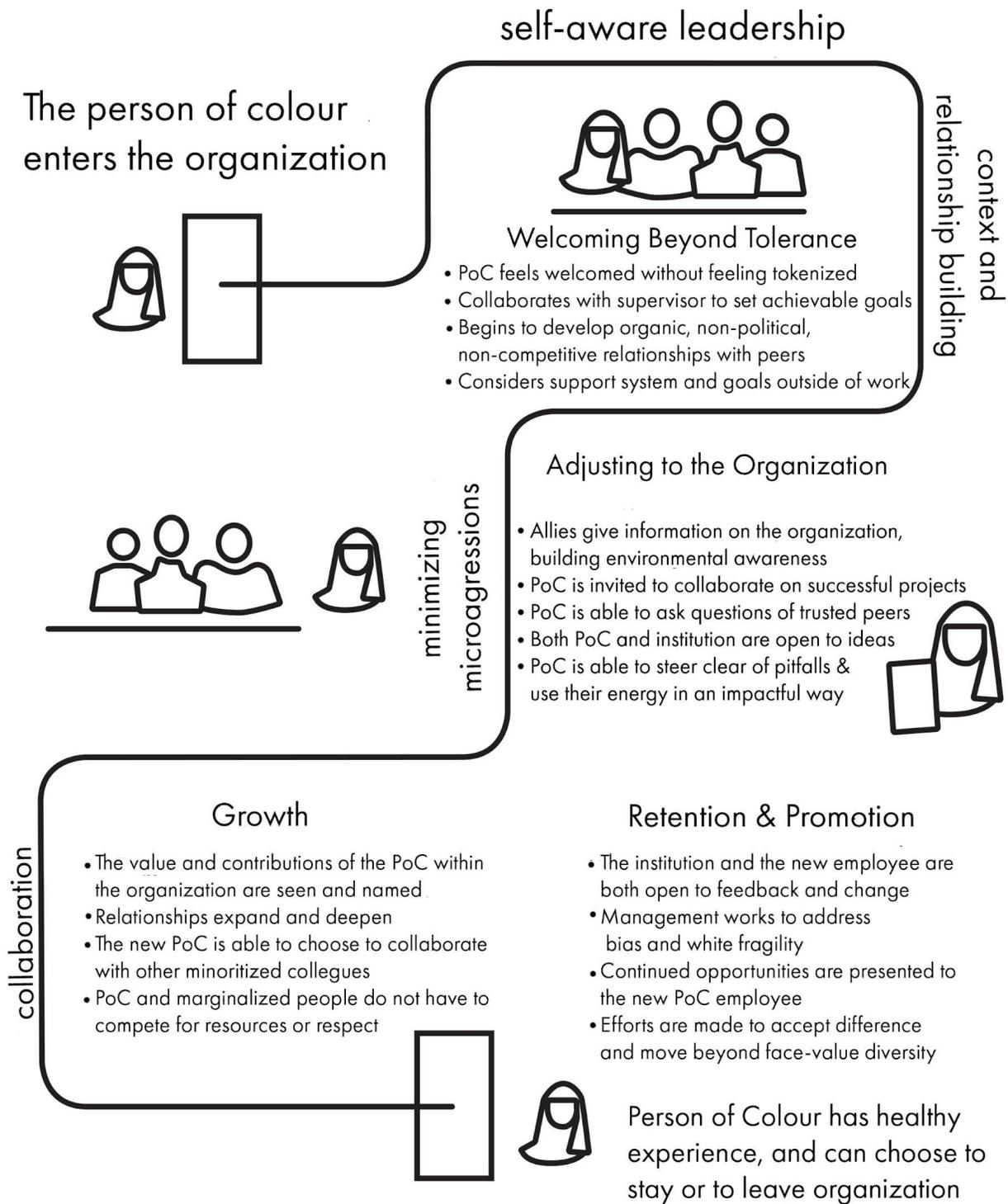
target & attack

The Woman of Colour exits the organization

Adapted from "The Chronicle of the Problem Woman of Color in a Non-Profit" by the Safehouse Progressive Alliance for Nonviolence
www.coco-net.org

APPENDIX C: REIMAGINED POC INFOGRAPHIC

Actively welcoming and retaining people of colour in the workplace - a collaborative approach to autonomy and allyship

self-aware leadership

The person of colour enters the organization

context and relationship building

Welcoming Beyond Tolerance
• PoC feels welcomed without feeling tokenized
• Collaborates with supervisor to set achievable goals
• Begins to develop organic, non-political, non-competitive relationships with peers
• Considers support system and goals outside of work

Adjusting to the Organization
• Allies give information on the organization, building environmental awareness
• PoC is invited to collaborate on successful projects
• PoC is able to ask questions of trusted peers
• Both PoC and institution are open to ideas
• PoC is able to steer clear of pitfalls & use their energy in an impactful way

minimizing microagressions

Growth
• The value and contributions of the PoC within the organization are seen and named
• Relationships expand and deepen
• The new PoC is able to choose to collaborate with other minoritized collegues
• PoC and marginalized people do not have to compete for resources or respect

collaboration

Retention & Promotion
• The institution and the new employee are both open to feedback and change
• Management works to address bias and white fragility
• Continued opportunities are presented to the new PoC employee
• Efforts are made to accept difference and move beyond face-value diversity

Person of Colour has healthy experience, and can choose to stay or to leave organization

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