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Commentary

Factoring Health Equations

Comment on “Do You Recommend an Interdisciplinary Field to Your Graduate Student?”

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Abstract

The International Journal of Health Policy and Management (IJHPM) is a new journal that aims to stimulate not only inter-disciplinary research relating to health, but even an entire new generation of such journals. The challenges of improving human health worldwide clearly suggest ‘why’ such a journal is needed, but ‘how’ bridges and junctions across fields of study towards this end might be found poses other questions. From the agnosticism of many sciences with respect to human health, to the great faith others place in more esoteric movements for human well-being, both suggest finding common factors in the many equations that affect human health. Particularly, as it is typically defined professionally, it might pose more fundamental challenges than those which appear first. However, the first editorial and edition quietly assure that the journal is in good hands, and that the search for a new generation of journals has begun.

Keywords

Health Co-Production, Quasi-Health Professional, Inter-Disciplinary Research

For most of us, publishing a simple article is a great accomplishment. A basic idea is quickly jotted down, but then the torturous process of cross-checking data and references, and improving the structure and content stretches our endurance. By the time the final revisions and editing are started, one is exhausted. The excruciating pain of a final edit can be unbearable. And, it has not yet been reviewed. It is then with a mix of awe and admiration to hear of colleagues who manage to launch and publish a new journal. It is only humbling to read in the editorial to the first edition of that new journal (1) that the first concerns of its editors is not the higher reaches of one or more of the ever branching arms and fruit of science and research related to medicine and human health but, the inter-disciplinary truck and roots that might connect those branches, and; the enthusiastic students from which future discoveries will surely seed. Yet, while the first editorial leaves us with no doubt ‘why’ this is needed, the vexing question of ‘how’ left this reader wanting more—a sign hopefully of a good series to come.

The editorial points out correctly that the challenges of human health clearly unconstrained by academic boundaries; particularly perhaps with respect to infectious diseases. Similarly inter- and trans-disciplinary research and action are needed to understand and address these challenges. But, a

second and more challenging argument is perhaps implied by suggesting that not only is a new journal needed, but a whole new generation of journals. This is a far bolder, but somewhat enigmatic, assertion. Clearly, there are now so many medical and health related journals that it is almost impossible for any one to both: really see the wood for the trees and structure and prioritize the information contained within them. It also makes it extremely hard for a new journal to assert itself.

It would therefore seem that the editors might even be suggesting that a new generation of journals, particularly with a goal of inter-disciplinary research, is both needed but more difficult by the (unintended consequences of) now centuries of old searches for fundamental evidence to improve human health. The result of this search is of course not only much knowledge but also, according to the World Association of Medical Editors (WAME) approximately 20,000 health and medical ‘scientific’ journals for the accumulation and dissemination of that knowledge worldwide by 1995 (2). The WHO’s own HINARI Access to Research in Health Programme counts some 11,400 journals in 30 languages (3). It is the case that since the late 1970 a large proportion of many of the most prominent of these journals that now adhere to Uniform Requirements for Manuscripts Submitted to Biomedical Journals (URM) are increasing comparability, and at the other end of the research life cycle; the Cochrane Initiative is perhaps the most well known of efforts internationally to catalogue and compile the resulting (meta-)evidence. But, where are the junctions, what is the anatomy of that knowledge and how can all this evidence be not only compiled, but also structured and prioritized in terms of its explanatory power?

The traditional approach to distinguishing the signal from the noise is almost certainly a journal, paper or author ranking; the wisdom, as it were, of the academic crowd. But, this presents a new and ambitious journal—or indeed generation of journals—with a particular challenge. Ranking favours incumbents. Hence, when the editor of the *Lancet* whispers, the world typically listens. But, the academic crowd also get things wrong. Medicine and human-health-related sciences, as other fields, are littered with examples of important findings only emerging after vigorous resistance from the defenders of professional orthodoxy. Naturally orthodoxy has its value. It is necessary for the dispersal of knowledge (as understood at any point in

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time) but then, also and by the same measure, it is resistant to any change and revision, even necessary change. Hence, the acceptance of any new idea is as important as the idea itself, but any (genuinely) new idea is unlikely to start with general acceptance. How can (new generations of) health-related research journals both be part of spreading and also challenge orthodoxy?

With this contradiction perhaps in mind, the current President of the Executive Board of WAME has suggested a revision to ranking approaches that might favour new and innovative (generations of) journals and articles above the established heavy weights. Rather than focusing on the number of (journal rank weighted) citations, as is tradition, by including measures of how many times a paper in a (new or) lower impact journal is later referenced in higher impact journals there may be better measures that offer newer journals greater opportunities to move up rankings (4). As with a virus therefore, the ability of an idea to spread maybe more important than where it enters the body (of health literature). Only time will distinguish fundamental (or even seminal) contributions, even contributions that can spread across scientific fields and publication databases—and indeed even into popular discourses and measures such as Google’s ‘N-grams’—from contributions that refine or simply contribute to the gradual acceptance of the initial work. The challenge for editors will be to find ways to identify and find, and risk the opprobrium of publishing, challenging material. And, particularly material at the junctions between fields. But, and comfort to a student weighing up a future in science or just qualifying as an applied medical or health professional, all are essential contributions in the same process.

Habibzadeh’s idea may therefore be a useful and interesting starting point. It suggests that it is important to both acknowledge and receive acknowledgement, but also that true scientific enquiry requires the occasional risk; and to challenge inevitable orthodoxies. This would be a fragile balance and the one on which I hope we can expect to hear more. For example, there exists much inter-disciplinary quantitative research, indeed within the entire fields of social and other sciences that do not take the goal of human (physical) health as their starting point, but may

be highly relevant from economic growth to ecological decline. Similarly, there are many non-medical and health professional, personal and collective actions, stretching from ‘health co-production’ and the quasi health-professional to the esoteric and even (quasi-) religious, that by focusing consciously and rather on accepting and compressing ill-health and ‘unwell-being’ than improving ‘health’, within therefore the inevitable constraints of what is by definition a mortal human life, do much to promote human health and well-being. Can or does inter-disciplinary medical and health professional related research extend to such qualitative (‘unscientific’) but nevertheless widely followed, believed and often historic movements?

The goal of the IJHPM to bridge human health-related and other sciences, and even to encourage others to do so, is both as challenging as it is important, and it raises many fundamental questions, but on the basis of the editorial and the first edition, the Editors quietly assure it is in good hands. I hope we can look forward to many future editions, and editorials that also leave us looking forward to more. Good Luck to the whole team.

Ethical issues

Not applicable.

Competing interests

None.

Author’s contribution

MGR is the single author of the manuscript.

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