The Journal: The Next 5 Years

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It seems that a tradition is in the making! The first editorial of the year for the past 4 years has addressed journal-specific issues. Volume 28, introduced the “new” editorial staff. Volumes 29–31, respectively, introduced, the vision of the Journal, the major thematic thrust of the Journal, and a reflective editorial on the relationship of the Journal to both sponsoring organization and governing body of the American Academy of Insurance Medicine.

In this first issue of volume 32, 2000, I want to describe in detail the direction of the Journal and underscore that it is a valued asset of the American Academy of Insurance Medicine. As such, the Journal is one of our most public faces, and it must reflect the industry from the perspective of the medical departments of life and disability insurance companies. The Journal carries, primarily, morbidity and mortality studies, commentaries, and opinions from the perspectives of its readers concerning our unique medical discipline. In other editorials, I have outlined the “Discipline of Insurance Medicine,” the “Role of the Medical Director in a Life Insurance Company,” and the “Role of Organized Medicine and the Life Insurance Industry.” In my editorials, I have also written from a business perspective on the “Quality of the Attending Physician Statements,” “Opportunities for Reducing Claims Costs,” and “Mortality Trends and Profitable Business.” Finally, I have raised ethical issues in writing on “Scientific Fraud.”

There are many, many aspects in the production of an academic journal. Indeed after attending the Council of Biology Editors annual meeting and its introductory course for journal editors last year, I have discovered many more. The relationship we have established with our new printing company has taught me still more. My hope is that the Journal continues on its path of continuous quality improvement. There are many issues to consider, a few of which include the following:

- Mission.
- Goals.
- Governance.
- Ethics.
- Business development.
- Thematic objectives.
- Production objectives.
- Management and relationship with printer.

These areas are obviously interdependent, but they are also dynamic in and of themselves. The relationships do not remain static and necessarily take different emphases when one area becomes more prominent than others. My intention is to monitor this closely so that whatever the changes in emphasis, the Journal will continue in its forward progression to be an influential vehicle for knowledge about an industry. At this time, our mission statement reflects this:

To publish the most authoritative series of original contributions and review articles concerned with all aspects of insurance medicine.
The goals by which this mission will be achieved include the following:

- To produce a timely and consistent flow of literature of high quality.
- To develop over time, a reference of considerable stature.
- To promulgate (knowledge) as widely as possible.
- To promulgate the core body of knowledge (particularly in terms of outcomes management and morbidity/mortality methodologies).

GOVERNANCE

Previously I have written about the relationship of the Journal to the Academy of Insurance Medicine and the relationship of the editor to the Governing Body of the Academy. Essentially, there must be trust and respect in both directions.

EDITORIAL BOARD

The editor of the Journal of Insurance Medicine has formed the Editorial Board. Each member of the board is appointed to a renewable 3-year term, although on the initial appointment, the terms differ so that the expiration of terms do not all fall on the same date. The board has the following roles:

- As an advisory group or as individual advisors to the editor.
- A group to assist in the recruiting of manuscript reviewers.
- A group that will take on the responsibility to review or have reviewed certain manuscripts.
- A group that can act as an advisor to the editor for Journal policies and disputes.
- A group with an individual and collective reputation in industry and related fields.

Advisory Group: There will be an opportunity for the Editorial Board to meet at least once a year. The board members are invited to sponsor authors from both inside and outside the industry. It is hoped that each board member will be able to mentor an author each year. It is also hoped that during the term of office, each board member will contribute to the "Opinion Section" of the Journal. He or she will also be asked to be a peer reviewer for at least one editorial. A key role for individual members of the Editorial Board is to identify and encourage colleagues to become manuscript reviewers.

The Editorial Board will be advisory to the editor in matters pertaining to written policy such as the Ethics Policy and others to be developed, including a policy on advertising, definition of original articles, etc.

Associate Editors: Each associate editor has a specific task. He or she primarily will be responsible for a principle area of interest, such as Case Studies, Literature Reviews, Medical Graphics, Mortality and Morbidity Methodology, Education, and International Affairs.

ETHICS

The Publications Committee, an ad hoc committee of the Academy of Insurance Medicine has recommended the following statement:

The Journal of Insurance Medicine may carry advertisements either in the Journal, as attachments to the Journal, or associated with the mailing of the Journal. There may also be advertisements in association with the Journal on the Web site dedicated to the Journal.

Services or products eligible for advertising will be relevant to the practice of insurance medicine. These will generally fall into the following categories:

- Insurance Medicine Laboratories.
- Paramedical or APS service organizations.
- Publishers of professional textbooks or professional journals.
- Employment-related advertisements.
- Other services or products of particular interest to the practice of insurance medicine.

The appearance of advertising in the Journal of Insurance Medicine is neither an American Academy of Insurance Medicine guarantee nor an endorsement of the product, the
service, or the claims made for any product or service by the advertiser or manufacturer. The American Academy of Insurance Medicine reserves the right to decline any submitted advertisement, in its sole discretion.

The editor of the *Journal of Insurance Medicine* determines the eligibility of advertising and the placement of advertisements in the *Journal* for products intended for diagnostic, preventive, or therapeutic services.

Scientific and technical data concerning a product's or service's safety and efficacy may be required before advertising is accepted for publication. To determine eligibility of advertising for books or journals, a copy will be requested for review.

**BUSINESS DEVELOPMENT**

Ultimately, I believe *Journal* operations, both editorial and business matters, can be self-supporting—the latter from nonmember subscriptions. As the *Journal* moves toward this state, more and more of the business functions listed below can drop from the editor's plate and become resident with an appropriate professional.

- Managing editor.
- Production editor.
- Publisher.
- Advertising manager.
- Subscription manager.

**THEMATIC OBJECTIVES**

To publish 4 issues each year. By the year 2002, we hope to be able to increase that to 6 issues per year. The initial extra numbers will come from a series of monographs *vide infra*. At this point one of our unique core competencies is in the development of mortality studies. Originally, they were referred to as abstracts, which in the true definition of the term is correct. However, our colleagues, those particularly from the clinical branches of medicine, associated the term abstract as a “potted” version and disdained the publication. To us, an abstract is quite different. We take one or more original articles and very often have to refer to the source and the original data to age and gender match the outcomes. Very often the conclusion we draw is different from the original observation, and sometimes, it is quite the opposite. In fact, I have made an effort to introduce our mortality studies to clinical colleagues and persuade them to use some of them as “best practice” targets.

We have published a call for papers in which we note that the preferred format for articles is in the following styles:

- Reports of original research and original reanalysis of published or unpublished data from a mortality perspective.
- Descriptions of evaluation of methods.
- Commentary articles that offer an analysis of important or controversial aspects of the field.
- Opinion pieces that take industry challenges and discuss potential solutions, often in a stimulating and provocative way.
- Case reports or studies with discussion.
- Literature reviews that include a brief synopsis of the article or articles reviewed and then an analysis that places the article or articles in context.
- We also encourage letters to the editor, which may be comments on a previously published article or may even contain new data. If they are of the former variety, I will give the author or authors of the original article an opportunity to respond.
- The editor has planned to start publishing cumulative monographs at the rate of 2 per year from 2002. The first selections will be chosen from a 5-year cumulative index, original mortality studies, case studies, seminal literature reviews, and methodology articles.

**PRODUCTION OBJECTIVES**

As we move into the next millennium, it is important for the *Journal* to become dependable in both content and time.
MANAGEMENT AND RELATIONSHIP WITH THE PRINTER

As I have mentioned elsewhere, the key to the development of the Journal is the relative financial independence, insofar as that can be achieved by a not-for-profit organization. The 2 biggest revenue opportunities are the sale of nonmember subscriptions and advertising. Allen Press has included us in its Buyers’ Guide$^{13}$ and Buyers’ Guide to Health Care Journals.$^{14}$

In conclusion, I have attempted to develop a road map for the future of the Journal, that is, the future of our Journal. It may seem to be ambitious, but we all need a challenge. I have deliberately painted an overview, often in the scantiest of detail, so all of us will have the opportunity to impact the Journal, its development, and content by having the chance to give input into future developments.

REFERENCES