## **INTERVIEW**

## Interview with Andres Martin, new editor (January, 2008) of The Journal of American Academy of Child and Adolescent Psychiatry

This interview, conducted by Normand Carrey, took place in Moncton, New Brunswick on June 2008 during the 2<sup>nd</sup> Annual Atlantic Provinces Child and Adolescent Psychiatry Conference where Dr. Martin was the invited keynote speaker.

- **C:** First of all Congratulations! I understand there was quite a rigorous selection process. In what way did you feel you were prepared for this; what were the surprises?
- **M:** There was an ad hoc committee set up by the Academy that was independent from the journal so that the process was done thoughtfully, in a fair manner and transparent to everyone. I was shortlisted and I had 5 pages to answer 6 important questions.
- C: Everyone wants to publish in the journal

and it has enjoyed immense success as a leader in the field over the years. What did you find out as part of your research?

M: Yes as part of my preparation I've had to look at the numbers. As it approaches the age of fifty, our flagship periodical is ranked first worldwide in child and adolescent mental health, second in pediatrics, and fifteenth in psychiatry. These statistics reflect a longevity, viability and visibility that we as an Academy can feel proud of. As a publication devoted to development, the *Journal* has served as a model for the process itself: from its modest beginnings as a sporadic collection of case studies, it has matured into a methodologically rigorous vehicle for the dissemination of what is best in our field today.

The message conveyed by print circula-

tion and manuscript submission numbers is even more striking: hovering at around 9,000 subscriptions and 450 submitted articles per year, the Journal reaches more than fifteen times as many readers, and receives almost ten times as many manuscripts as it did when it first appeared in 1962. Another way to gauge the Journal's impact or success is through the IF or Impact Factor. Quantifying the Journal's biomedical standing through the IF, during the five-year period ending in 2004 (the last year for which there are available statistics). the Journal's IF steadily rose from 3.175 to 3.529, thus separating from its closest competitor, the Journal of Child Psychology and Psychiatry (JCPP). We have much to be proud of, but should strive to do better.

- **C:** From our conversations, you talked about the art of editorship and it seems to me that you are pushing this to another level. Can you tell me about that?
- M: As I've discovered for myself there is a whole world out there of editor organizations that provide guidance about the editoring process, regardless of the field that you are in. But more importantly, there are organizations to provide advice to established editors but also mentor younger colleagues into the editorship process early on in their careers. The function of editing a journal is too critical to our field such that the pathway to editorship should not be arbitrary but reflect active mentoring into the editor role. There is a stereotype of the editor as an old grey haired figure who is at the end of his career and benevolently takes the task on. Nothing could be further from the truth. At our Journal we were able to secure funds so that we could set up a mentoring program called the John F McDermott assistant editor in residence program for mentoring assistant editors. I understand as well that some of your Canadian journals such as the Canadian Medical Association Journal (CMAJ) have active assistant editor mentoring programs.
- **C:** Tell me about your vision for the journal. Which direction do you want to take it in?
- **M:** The *Journal's* mission can be conceptualized as a tripartite set of interconnected goals. First, it is the place in print where sci-

entific progress can be fostered and propelled into clinical practice. Second, and arguably as important, is its function as a hub for child and adolescent psychiatry. It is where the field converges, achieving coherence in the face of trends that can be as disorienting as they are welcome: the expansion and promise of relevant new research technologies, the acceleration of information transfer, and the unification of a geographically dispersed community into a virtual network without borders. Third, the Journal is an instrument of education. It advances the larger goals of academic medicine by disseminating information across a wide constituency, promoting best practices around the world, and facilitating lifelong self-directed learning for its readers.

I intend to put into practice these three goals through these initiatives:

Broadening the Scope. As Mina Dulcan, the previous editor has demonstrated, strategic editorial initiatives can respond to important areas that have been underrepresented. For example, the Journal has launched successful introductory series on statistical and research methods (under the late Bob Harmon), fundamentals of neuroscience (Paul Lombroso), and evidence-based practice (still under John Hamilton's active direction). I would expand this approach to include areas such as: prevention; policy and health care economics; molecular and developmental neurobiology; qualitative studies; applied genetics; in vivo neuroimaging; and novel approaches to enhance access to care, especially at the interface of our allied professions and practice settings (primary care, pediatrics, schools, juvenile justice).

**Rigor Contextualized.** The challenge for our periodical is to place the range, breadth and depth of its papers within a meaningful framework so that readers can incorporate them into practice. Methodological rigor and scientific vision should never be sacrificed for greater accessibility or clinical appeal: instead, rigor should be contextualized for a readership as diverse as ours. Take an example from the basic sciences: the discovery of the MECP2 gene underlying the pathophysiology of Rett's syndrome. Within a few months of that seminal finding being published in Nature Genetics, the Journal included what I consider to be a paradigmatic example of rigor contextualized: a brief News Flash explaining the profound implications of the finding to our field. In three pages of text, the column made a compelling case that this rare disorder holds heuristic clues to solving puzzles as complex as autism. Along the way, we received a brief refresher on molecular genetics, realized that serious science need not be impenetrable, and got a glimpse of what the future might hold. The piece has remained pertinent, as recent discoveries associating single genes with Tourette's syndrome and reading disability have demonstrated.

Editorials. The Journal should be poised to embrace breakthroughs and help its readers comprehend them. Without the context provided by invited editorials. commentaries, or debate formats kicking off each and every issue, the Journal risks becoming a series of detailed missives between researchers: intense and important for sure, but inaccessible for many of our readers. Well-conceived pieces from diverse thought leaders would yield immediate results for readers, as suggested by the fact that editorials are the most frequently visited electronic sections of the American Journal of Psychiatry (AJP) and the New England Journal of Medicine (NEJM).

Controversy Embraced. Over the years, our field has been shaken by controversy on a regular basis. However, a look through past issues suggests that the Journal may have shied away from 'hot button' topics. Recent controversies in pediatric psychopharmacology, such as the association between antidepressants and suicidality, or between stimulants and cardiovascular mortality, suggest that we may have responded too little to mobilize research and policy, and too late to guide practitioners in a timely fashion. Consider the first example: almost three years after the suicidality maelstrom took off in Britain, the Journal has yet to implement its ensuing scientific legacy, namely the registration of clinical trials prior to the enrollment of subjects as a prerequisite for publication. Consider the second: as child and adolescent psychiatrists prescribe psychotropics and ponder questions about safety, they must seek advice elsewhere. The *Journal* may have been silent on these matters out of a valid desire to be thoughtful, measured, and empirically grounded, but in the process it may also have lost a crucial opportunity--that of embracing and being a voice for clarity and science within controversy.

Commentaries. Only by embracing controversy can one appreciate its potential rewards: today's controversies are tomorrow's hypotheses. Invited commentaries would allow the Journal not only to provide urgently needed guidance to clinicians, but serve as springboards to generate hypotheses, challenge assumptions, and direct future research. Just as other journals (such as the NEJM and JAMA- Journal of the American Medical Association) publish solicited perspectives from relevant fields outside medicine, particularly from law and public policy, so too we could invite experts in fields that pertain to pediatric mental health to provide a welcome outside perspective, geared towards the education of our readership and fostercollaboration between ing fields. Moreover, commentaries can be tools of advocacy, taking a stand on behalf of families, children, and their needs. As a case in point, consider the 2000 study describing high rates of psychotropic use among preschoolers. It spawned a rapid flurry of published commentaries and opinions (although not in our pages), which in turn contributed to the securing of funding to conduct clinical trials in this age group, results of which will be eventually published in our pages.

- **C:** In a sense journals are becoming dinosaurs. With the internet everything is going electronic especially the open access journals. Can you tell me how you are addressing this challenge/opportunity?
- M: The *Journal* has kept pace with developments in publishing technology, going online in 2000 and instituting the web-based submission and review process in 2004. And

vet, in our technological era, we must do more than just keep pace: we must harness what is available and remain flexible to incorporate what is to come. Downloading abstracts and other select features onto PDAs is a feature already available in several leading journals, and we may all be reading the entirety of our issues on such devices a few years hence. The Journal must be attentive to such developments. But more immediately relevant, expanding its electronic features will enhance the Journal and the way we make use of it: electronic table of contents alerts, cross-journal searching, the use of hypertext, the tracking and exporting of citations, and even access to datasets for additional analyses are but a few examples. Gauging from circulation numbers, readers have embraced online use: in just one year there was a 2.3-fold increase in the mean number of page views per month, up to 178,000 in 2005. Many of these website 'hits' have come from abroad, as half of the institutions that currently subscribe to the Journal through Ovid are outside of North America. Impressive as these trends are, we could do even better. For example, only 19% of subscribers have activated their online use, and electronic features such as downloading of pdf files remain cumbersome.

We need to take advantage of the technology available through IT (information technology). The orange-bound issues that we receive in the mail will continue to arrive each month, and remain important for our readers to peruse and settle down with, as this format most easily allows. But it would be shortsighted to invest our efforts exclusively on print, as this medium is unlikely to enable the Journal to reach its optimum global readership. Rather, we will maximize the impact and influence of its contents by improving electronic resources available via a modernized, user-friendly website. A print circulation of 9,000 is a very good place to have arrived at, but far from a comfortable place to remain, especially considering that subscribers are overwhelmingly American and that large regions of the world cannot afford our overseas rates (when having reliable mail delivery services at all).

Together with Lippincott, Williams and Wilkins, the *Journal*-if not the Academy more broadly-must make a serious cost-

benefit analysis and reassessment of its rate policies. Specifically, the bundled rate of print and electronic copies may be hurting more than helping us at the fiscal, scientific and outreach levels. As things now stand, full access to the Journal requires payment from non-subscribers. This policy may well prove penny-wise and pound-foolish, and is largely out of synch with other leading journals. As their experience has already demonstrated, the fees that would be lost to free downloads would be more than made up for by increased visibility, impact and circulation, and through compensating revenue from higher advertisement fees. At a minimum, the Journal could easily provide free online access in the developing world through the HINARI initiative of the World Health Organization.

- **C:** How do you view the task of an active editor?
- M: I see it as quite an interactive process with my editorial board, the various authors out there that I would like to appeal to and the readership. Let's not forget the peer reviewers who I'm ever so grateful to. The journal's work would grind to a halt without them. I'll break it down for you into the following categories:

Straddlers. By fence-straddlers I refer to our many colleagues working out on the frontiers to expand our borders, those with professional 'dual citizenships': scientists whose work and publications fall largely in other domains (such as brain imaging, genetics, basic neurosciences, or healthcare policy) yet who retain a core identity as child psychiatrists. These straddlers, and many others working in areas germane to our field, are not likely to publish their breakthrough findings in our Journal. But we owe it to our readers and our discipline to find ways of bringing their contributions into our sphere. One concrete way of doing so would be through their focused pieces and invited commentaries.

**Bouncers.** The inclusion of even some of the features outlined before could quickly expand the girth of the *Journal*. But they would do so only to a point, one determined by the realities imposed by publisher and operating budget. Still, the task at hand is in large measure one of balancing the task of selecting relevant manuscripts while unfortunately rejecting others, hence the editor as academic bouncer. No one likes to have their paper rejected but I intend to make this a transparent process and hopefully a learning experience for the author submitting his work (see my midwifery comment below). Peer Review. To remain lean, journals rely on the peer review process, and the quality of their papers can be only as good as their reviewers. The editorial board and myself will update explicit guidelines to reviewers. This strategy has been implemented by others and has proven productive for the Journal's book review section during my watch. Second, I would provide objective and transparent feedback to all reviewers on a yearly basis. Through the electronic review manager software it would be simple enough to derive basic statistics for each reviewer, including number of manuscripts reviewed, timeliness, score correlations, and percent agreement with final decisions. Reviewers would also be provided with their peers' reviews (still blinded, at the same time as the manuscript's authors). This statistical and educational information would provide instructive feedback to reviewers, as well as help the editor continually enhance the pool of reviewers. Third, there should be fluidity into (and out of) said pool. To that end, all first and senior authors of accepted manuscripts would be automatically offered reviews, and this explained to them on acceptance of their paper; as would investigators with NIH funding relevant to child mental health (determined through the CRISP database). Finally, asking senior child and adolescent psychiatrists to identify up-and-coming talent within their ranks would help recruit a vibrant new cadre of reviewers. Through these combined recruitment efforts we could assign more reviewers to each manuscript (I would aim for a median of three rather than the current two).

**Editorial Board.** The lessons learned by former editors should be incorporated into the future of the *Journal*, and the

new editor should work closely with Drs. Dulcan, McDermott and Lewis to that end. I have started to do so with each of the three. In addition to former editors and legions of reviewers, the *Journal* and its editor rely on the all-important editorial board, and on associate, deputy, and assistant editors. I believe that the editorial board should be rich in straddlers and recruit among dedicated and responsive bouncers. Subject to approval by Council, I would also advocate for a larger board: the range and broadness of our field demand, in my view, such an expansion.

Midwifery: Reviewing and Editing. As integral as straddling and bouncing are to the tasks of the editor, a third strand weaves into this delicate mix: that of midwifery. Manuscripts (particularly first ones) as well as authors (particularly emerging ones) are often in need of assistance in order to deliver on their latent promise. While never lowering standards, the Journal and its reviewers and editors should be pivotal in this developmental process of scientific and personal maturation. Let me provide a concrete example. Two years ago I worked on the pediatrics ward alongside a bright medical student as we cared for a four-year old boy with metastatic nephroblastoma. The clinical and human story that emerged between the student and the child's family was a powerful one, and one we all believed merited being told. One year and some fifteen drafts later, that clinical experience appeared as the evocative Tie it and Trust, by Shobi Ahmed, in the Journal of the American Medical Association. There are three generalizable points I hope to make by sharing this experience. First, the editor as midwife: bringing forth others' labors of love and rejoicing in their hard-won accomplishments. Second, personal narratives that convey clinical immediacy and texture should also find a way into the pages of the *Journal*, perhaps along the lines of JAMA's A Piece of My Mind. Third, and most critically: while midwifery is a metaphorical figure of speech, the mentorship it alludes to is

a critical task for our specialty to thrive. When it comes to the *Journal*, editorial mentorship can help bring together the critical skills of scientific reasoning, organization, writing, and presentation to turn inchoate pieces into manuscripts suitable for publication.

Engaging the Team. Rather than just increasing the number of reviewers and editorial board members, as editor I have set specific mechanisms to engage them. Editorial positions should not be viewed as mere honorifics: they entail a commitment of work and dedication. To this end, I have assigned specific sections or initiatives to given members. I've set clear mechanisms to obtain their feedback and suggestions, as well as those of our readers. I strive to establish an ethos of collaboration and collegial teamwork. I've established work sessions for the editorial board, to take place at the annual Academy Meetings and mid-year Institutes. Through these initiatives, editorial board members would become engaged in actively refining the direction and priorities of the Journal, instead of being called upon as occasional trouble-shooters.

- **C:** Where do you see the gaps?
- **M:** There are obviously many gaps, but also this can be seen as balancing and maintaining priorties, and not losing site of our journal's founding philosophy. I'll restrict my comments to this question under two broad topics:

**Clinical Imperatives.** Achieving a perfect balance between research and practical priorities will always remain an elusive goal. Nevertheless, the Journal must serve as a bridge: between researcher and clinician, between clinician and patient. So that children and families can more readily reap the benefits of the advances in our field, the expansion of features relevant to the front-line clinician should remain a priority. In addition to the Clinical Perspectives already in place, features that would benefit most of our readership include in-depth clinical exercises; grand rounds; 'images in child and adolescent psychiatry'; columns on practical aspects of funding, managed

care, conflict of interest; and debate forums. These would be regular features, peer-reviewed, under consistent editorial oversight. Review papers responsive to other practical priorities, such as Board certification or the accrual of Continuing Medical Education (CME) credits, represent the next step forward from our *Ten Year Reviews*. Finally, self-contained 'mini reviews' such as those included in special sections could be selectively used instead of longer reviews or as their complements.

Basic and Applied Research. The Journal should remain a prime venue for the publication of clinical and applied research findings. Indeed, for areas such as psychopharmacology and epidemiology, we should become more methodologically exacting. Seminal breakthroughs and important basic research will continue to appear in other primary sources. As a publication with a largely clinical readership, we must find ways of rapidly incorporating those findings into practice and applied research. The News & Views columns of Nature and the annual research reviews published as supplements by several journals (including the JCPP) provide effective templates to consider adapting to our needs. Straddlers would take the lead in this new venture, attracting in the process high quality submissions from their areas of expertise.

- **C:** Again the internet has dissolved national boundaries and other globalization forces affect how we view the world, and by extension children, families, diagnoses etc. We are truly becoming transcultural. How has this affected the journal and how is the journal shaping this in turn?
- M: Yes the internet and other forces have dissolved national boundaries. One constituency that I would look to include as external advisors is that of international representatives. The *Journal* has done well in attracting international science, as reflected by the fact that 41% of papers in 2004 had a corresponding author with a non-U.S. address (up from 27% in 1998). Still, we could do better, as suggested by the fact that the majority of foreign submis-

sions come from other English-speaking countries. The strategic involvement of such colleagues could broaden our readership, attract more foreign submissions, and help build collaborative networks that are internationally diverse. I have appointed 4 international editors (to cover the globe I hope) who can guide us in what international trends are developing out there.

- **C:** I know that you are a bibliophile, i.e. you like to read broadly in a lot of different areas. How did that influence you; where do you see it fitting in with your current duties?
- M: Yes I do read broadly across a lot of different areas, in medicine, literature and humanities. My original interests were in philosophy and literature. I guess you could say that I'm a jack of all trades and master of none, sometimes a fact I've lamented but that's actually good training for this position because an editor should be broad based. I guess that my various positions from head of the book review section, to Clinics of North America to being editor of three textbooks on general child psychiatry and pediatric psychopharmacology have helped me to remain broad based.
- **C:** I've heard in one of your lectures about your famous rule in psychiatry of "never worry alone". How does that apply to editorship?
- M: I have surrounded myself with a good team of people. We are on the phone every week to discuss critical issues. In the end the end I'm the editor and I have to make the decision but I do have a group that I can discuss issues with.
- **C:** I know that the rising number of submissions means the competition for authors to get in is getting tougher. What advice do you have for authors?
- M: Well actually what you say is partially true. Yes our impact factor is higher and we do have more submissions but I am surprised that there are other fora inside the journal's pages that people do not take full advantage of to get their views in. For example there are letters to the editor, the clinical perspective section and even the book review section can become a forum for expressing one's opinion or a place for younger colleagues to start. I also invite

people to engage our editorial board and our section editors. We don't bite. While there are no guarantees about promises to accept and publish a submitted work, there is nothing wrong with corresponding with editors or section heads to get a feel for what the journal is looking for.

There are also some very simple salesmanship techniques that I find people are not taking advantage of. Let me give you a few hints about how an editor's mind works. In cover letters, authors should make the case for their paper, how it is novel and how it fits in with journal priorities rather than just submitting the standard cover letter. We are open to persuasion. Also since we have so many submissions to screen, we rapidly screen out papers that do not have succinct titles and abstracts. I suggest that people should craft their abstract even ahead of writing the main body of the paper rather than after the fact.

- **C:** That's very good advise, thanks. This is a topic that I, as newly minted editor, have dreaded to look into, the IR. Any suggestions for us?
- **M:** You should not be afraid of this. You have to start somewhere. It's an objective way by a third party to gauge your progress.
- **C:** What advice do you have for the "Indigo Journal" (*JCACAP*)? We obviously can't compete with the resources that you have.
- M: Yes but there are unique opportunities here. We don't publish case studies but they are still valuable for clinical hypotheses or for qualitative studies. Your journal could represent more regional and cultural views across Canada as well as inviting first time international authors. And of course you have the theme issues which serve as an effective way to summarize the current state of knowledge in a particular area. So yes you can appeal to a niche or a need out there without duplicating what is already done.
- **C:** Thanks for your time and we look forward to further collaborations with you.

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