Transforming academic publishing in public health

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Received 16 Septembrer 2024; Accepted 22 September 2024

A modern parable, the parable of the drowning priest, took place in a small town. In it, a heavy rain soon turned into a flood [1]. As the water rises, the local priest remained in the temple, surrounded by water, and started to pray. A resident came up in a canoe, and said to the priest, "Please get in, the waters are rising fast." The priest said "No, I have faith in the gods; they will save me." The water continued to rise. The priest climbed up the balcony and continued to pray. Another resident came up in a motorboat and yelled out to the priest: "Come in, we need to get you out of here, the flood bank will break any minute." Again, the priest said: "I will stay, the gods will see me through." Then the flood bank broke. The flood rushed over the temple until only the roof was above water. With the priest on the roof, clinging to the spire, a helicopter descended, and a rescue worker called down to the priest on the megaphone: "Grab the ladder, this is your last chance." And yet again, the priest yelled back: "No, the gods will save me". The priest later drowned, and disappointed, met the gods in the afterlife, and asked: "I had strong faith in you, why didn't you save me from the flood?" The gods shook their heads in unison: "What did you want from us? We sent you two boats and a helicopter."

The parable of the drowning priest is like the story of academic publishing in public health, which has been thrown several lifelines, several opportunities for transformation, but has yet not taken them, believing, it seems, that something magical will come from the gods and make things right. We may trace the history of what we know today as academic publishing to Europe; where journals served as situated platforms to connect European scholars – and in public health, especially also practitioners, policymakers, and activists – one to another [2]. The first point of potential transformation was perhaps for scholars in countries in the global South to have retreated from following Europe; from believing the falsehood that a European public health journal could, at the same time, function as an African public health journal. At the point of territorial decolonisation, African countries already had thriving newspapers which served important social and political functions – including for health, and to advance the cause of decolonisation [3]. Nigeria, for example, had its first television station – the Western Nigeria Television – in 1959, one year before independence from Britain. It was also the first television station in all of Africa [3–5]. We could have, similarly, uncoupled ourselves from Europe, and committed to developing an academic publishing landscape that could rival Europe's – as we did for newspapers, and for radio and television. Instead, we treated and continue to regard academic journals in the global South as necessarily inferior to those in Europe and North America [6–8].

The second point of potential transformation was the invention of the internet; a road not taken by the scientific communication industry, globally. It is endlessly remarkable, even unbelievable, that the forms that academic publishing, academic journals, and academic papers take in public health have not changed substantially since the internet radically altered the possibilities of communication; the possibilities of connecting a system to more of itself. Unlike public health, physics – especially particle physics – radically transformed its scientific communication in the wake of the internet [9,10]. In physics, the default now is to post research papers on arXiv.org, an open-access archive that was set up in 1991, once they are ready to be seen by others. The publication is immediate, and free of charge. Physicists do not read journals, rather they read arXiv.org. It is how they now disseminate their work. Journals, formal peer review, come later. Since physics journals are hardly differentiated in prestige or by impact factor, where an article gets published neither affects the reception of the work or the career prospects of its authors. The authors would often replace the version in arXiv.org with the final accepted version. Socialisation into the arXiv.org way of life begins early in a physicist's career. This different future remains available to public health, but it will require a significant change in culture. Perhaps the time will come when journals finally quit the business of publishing research, as open peer review and online, live post-publication peer review become increasingly popular.

The third potential transformation started as the open access movement, which was championed in medicine and public health and widely taken up in most other fields but ended up in the unfortunate and unaccountable monetisation of open access [11–13]. In most fields, the accepted financial model of academic publishing had been that individuals pay directly to access an article or gain access through institutional subscription. It placed most published research beyond the reach of individuals and institutions in low- and middle-income countries. The open access movement helped shift the burden of payment to individual researchers (and their funders or employers), but it has also meant that individual researchers (and their funders or employers) in low-income and middle-income countries are asked to pay fees that are beyond the reach of most. Even when journals grant waivers, they are typically either partial or punish collaboration with researchers in high-income countries, whose presence as co-authors often lead to a refusal of waiver requests. We have swapped one form of inequity for another. The movement was captured. The industry quickly shape-shifted to sell open access at elite prices. But what we know from the growing popularity of pre-print publications on platforms quite like arXiv.org in public health – catalysed, in part, by the need to make research findings quickly available to inform the Covid-19 response – it is now clear that, like in physics, most academic publishing in public health can occur on free or low-cost platforms [14]. Again, this different future remains available to public health, but it will require a significant change in culture, not least a necessary shift away from journals being used or regarded as markers of prestige and credibility.

There is much room for experimentation, for reimagining the status quo in academic publishing in public health. The Journal of Community Systems for Health is, one, all too rare, positive response to the repeated offers of rescue, of transformation, from the hold of the current Eurocentric, capitalist, prestige-driven model of academic publishing in public health. The Journal of Community Systems for Health upholds the "values of fair open access" and "aims to return the control of publishing to researchers". The more researchers can really control academic publishing, the greater the chances that we will be able to innovate, away from the Eurocentric, capitalist, and prestige-driven industry whose raison d'etre is income and a maintenance of the status quo. Also, the greater the possibility that we can build platforms or sub-platforms that serve specific spaces or causes alongside platforms that serve global spaces and causes. The parable of the drowning priest points to climate change and illustrates the nature of what is at stake. To meet to the public health challenges that trouble us, we need platforms to connect within specific local spaces (researchers, policymakers, practitioners, and activists). We also need to see the global origins and resonance of those same challenges, and have platforms to connect (researchers, policymakers, practitioners, and

activists) in global spaces.

Much will depend on our willingness to take and run with an offer of response such as the Journal of Community Systems for Health represents; an offer by a network of researchers from five academic public health institutions in Zambia, Uganda, South Africa, Tanzania, and Sweden. The health of populations, of communities, and of systems for health depend, at least in part, on our response to it, and to other efforts to work outside the current mainstream. No gods will come, magically, and save or rescue us from the status quo. All that the status quo needs to persist is for us to do nothing, to say no to opportunities available to us, presented to us, for change. Let us say yes, this time.

DECLARATIONS

Funding

This work was funded, in part, by the Australian Government through the Australian Research Council (ARC) grant number DE230101551. The views expressed herein are those of the author and are not necessarily those of the Australian Government or the ARC.

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