

Invited Lecture

Towards Professionalism in Medical Journalism

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Most of the journals in the region are small ones containing the specific characteristics of such journals with low circulation, low audiences, and low visibility. They are mostly sponsored by medical universities and without such sponsorship many of them would not exist.

Many of our regional journals are quarterly and such long intervals may further affect their readership and visibility. They are also mostly pure academic medical journals publishing research articles. And non-research health related features to inform the normal population are sparsely published in such journals.

Lack of editorial independence is another problem. Many of the editors of regional journals are part-time editors who have been selected by the sponsor organizations because of many reasons other than their enthusiasm. Such editors usually work in various medical departments where they are dependent on the influential bodies of their system for their academic promotions. In such a system an independent editor whose decisions for accepting or rejecting articles are based solely on the quality of the manuscripts may face a “tit for tat” cycle. Hence this leads to publishing articles without standard criteria for publication. Such editorial dependency can in part affect the way of budget consumption as well as making the contracts and hiring and training the staff.

No real System is available in such journals and direct contact between the authors and editors may increase the pressure on the editors. In many of our regional journals the editorial board, which is composed of

several medical specialists is the main body of decision making. These editorial board members are usually non-professionals with low insight to journalism. Most of the time they do not follow up the manuscripts since the time of submission so their decisions are mainly dependent on the reviewers' comments.

Similar to many western counterparts ethical misbehavior is another problem in some regional journals. This problem can be internal including editorial misconduct and conflict of interest or it can be external when an editor faces fabrication of data, plagiarism, redundant publication etc.

Such characteristics have caused major problems for journals leading to lower reputation compared with standard international medical journals. One major and basic solution is moving towards professionalism in this field. In a professional world academically trained medical journalists replace the non-professionals. Part-time editors will be replaced by full-time ones whose academic evaluation and promotion are based on their editorial capabilities rather than their performance in other non-related medical wards.

By implementing professionalism, editorial systems will be established in journal offices and author-system connection replaces the author-editor counteraction leading to lower pressure on editors. At the same time the professional manuscripts screening system will be implemented to screen the submitted articles and reject those without standard criteria for publication. This system will decrease the load of manuscripts that should be sent for peer review leading to lower resource utilization as well as lower pressure and work load on peer reviewers. Trained editors would be able to appraise the manuscripts according to approved international guidelines so they can mostly decide which article can be published. This process can bypass the decision making by editorial board members leading to more accurate and more ethical decision making.

Language barrier has always been a major culprit in performing unethical behaviors for journals in non-English speaking countries. By academic training editors will learn advanced English to tackle the language barrier as a major cause of ethical misconduct. They will also be able to detect and prevent ethical misbehaviors more easily.

Considering such problems and in order to reshape the face of medical journalism in Iran we chose two different approaches; a short-term approach by conducting structured workshops covering various topics including the

basics of writing, manuscripts screening, peer review, English for academic purposes, and copy editing for editorial board members and editorial staff of Iranian medical journals.

The second but more basic approach was founding an academic Master of Science course in medical journalism in Shiraz University of Medical Sciences in 2009.

The course consisted of various modules such as: Epidemiology, Biostatistics, Online production, Magazine production, Advanced English (general and medical), Medical news and feature writing, Computer driving skills, Media law, Journalism skills, Scientific and Copy editing, and journal design and lay-out.

This approach can be extrapolated to the whole region in order to systematically train the regional editors. A very feasible and easy reach plan can be performing a 3-month fellowship program in medical journalism. Such program can consist of a gist of the modules which are taught in the MSc course as well as some weeks with condensed practical training.