EDITORIAL

Cost or community? You decide

J Richmond1, PS Worley2

1Deakin University, Geelong, Victoria, Australia
2Flinders University, Adelaide, South Australia, Australia

Submitted: 4 December 2002; Published: 19 Dec 2002

Richmond J, Worley PS
Cost or community? You decide.
Rural and Remote Health 2 (online), 2002.

Available from: http://rrh.deakin.edu.au

In the last millennium, the human transmission of information followed a steady trajectory from an oral tradition to the universal availability of print, and on to the digital reality of the World Wide Web (WWW). The communication of medical and scientific information has followed the same route, but now lags behind human intent, straddling the division between digital and print. Medical publishing will hesitate on this threshold until advances in technology make the WWW as reader- and comprehension-friendly as the print environment. Also at issue is the major publishers' commercial association with scientific research.

Cost vs community

While a vast amount of information is available on the Internet, not all of it satisfies the imperatives of scientific enquiry, and what does is embroiled in the debate surrounding access and equity. The major medical publishers have long supported scientific enquiry by providing a forum for publication. Ironically, they are bound to print publication until they resolve the Quixotic quest of generating revenue in the borderless, free-access environment of the WWW.

The end of the quest may not reveal the hoped-for pot of gold. Because the limitless pool of the Internet effortlessly disseminates information, the end-user may soon be relieved of their annual journal subscription. Now that distance and culture have ceased to present obstacles to the transmission of information, the costly interventions of print production and distribution are redundant. To date, the characteristic availability of information on the WWW has been more an obstruction to large commercial organisations than a benefit; it has, however, united groups of people who share a common concern.
The quiet revolution

At *Rural and Remote Health* the Web-availability of the journal has enabled simultaneous communication of health and medical information to the rural and remote community, health professionals, educators and policy makers all over the world. For almost 2 years, users in remote locations have had access to peer-reviewed medical information at precisely the same time as their urban peers. Picture this: a health worker in a remote community accesses a newly published study on sport and physical activity in rural communities at the same time as a physiology researcher in her university laboratory on another continent. This is the quiet revolution in communication.

The evolution of your journal

In the ever-evolving environment of the WWW, to be static means extinction. Despite the success of *Rural and Remote Health* 1 & 2 in terms of site hits, return visits, a growing pool of registered users and contributors from many countries, the journal team is preparing for a new phase in journal’s life. When accessing *Rural and Remote Health* 3 (2003), users will become aware of changes that have been occurring for some months behind the scenes.

Staff additions

To accelerate the change process, the existing part-time team of Paul Worley (Editor-in-Chief), Jenny Bigelow (Journal Manager) and Emad Hiio (software developer and technical support) has been expanded. The appointments of Leah Busby (marketing and administration) and Jennifer Richmond (editorial) will enhance the presence of the journal on the Web and in the community, and increase the level of editorial support available to authors, especially those for whom English is a second language, or for whom writing in an academic journal is a daunting challenge.

New look

The journal’s familiar face is changing. A new-look home page with updated links will navigate users through the site. A detailed contents screen will feed through to individual article text and abstracts. At article level, internal navigation enhanced with hotlinks will take users to and from the abstract, full text, major parts of the article and listed references. Authors will be encouraged to provide an image file of themselves for publication. For those who have access to the technology, a supplied sound file with information about the article will be linked to the image.

New scope

The journal has broadened the categories of articles accepted and now welcomes the submission of commentaries, review articles, clinical case reports or clinical reviews, policy project and conference reports, personal views and biographies/tributes/obituaries in addition to editorials, original research and book reviews. Letters are still published via the familiar on-line forum. An additional service will be offered on a trial basis in 2003 when the Editor will publish a monthly ‘Journal Search’ feature, alerting users to articles of interest in other journals.

Excellence and quality

Fundamental to providing the highest standard of most relevant material is the journal’s international panel of reviewers, many of whom are members of the international Editorial Board. Our reviewers work quietly behind the scenes to promote excellence in rural health publication via the peer-review of submitted papers. Their work in 2002 has been greatly appreciated and is acknowledged.

Reflecting the increasing complexity of and exacting standards for refereed medical articles, a detailed, on-line Instructions for Authors is now available to assist contributors prepare for publication. As always, editorial queries and questions about presentation of material may be emailed directly to the journal team at ejrh@deakin.edu.au

© J Richmond, PS Worley. 2002. A licence to publish this material has been given to Deakin University http://rrh.deakin.edu.au/ 2
In line with current standards for peer-reviewed publications, users will notice an increase in the amount and type of author information provided with published articles. This and a steady increase in the number and importance of indexing and abstracting services that cover Rural and Remote Health will promote the excellent work of our contributors.

As your journal moves out of its infancy, the journal team will focus on quality issues. In 2003, users will be asked to respond to a survey about how well we are meeting your needs. And because it is understood that longer articles are often printed for ease of reading, the print link will soon provide improved output in a formal 2-column format with full author detail, far exceeding the usual standard of Web printing.

The journal needs your input

Already Rural and Remote Health material is accessible via The Regional Institute Website and stronger links will be forged with other rural institutions and organisations. However, as is the equation of any change, the end result will reflect the effort expended. The journal relies on the continued support of the rural health community that it serves. This may be in terms of the voluntary service of reviewers, feedback from and re-visits by users or, most importantly, contributions from those in the field of rural health, worldwide, in the community of the WWW. You decide.

References


