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The reading factor

The reading culture in Africa remains challenging. To use the gastronomic analogy, people are snacking here and there but rarely sitting down to the big meal. In the fast moving world of medicine this poses some inconvenient questions.

There is an interesting discussion going on (as I write) on the Health Information For All email list (www.hifa2015.org) about implementation research. How do we bridge that gap between research and public policy and practice? What amounts to reliable evidence and how can that be communicated to those who should be aware. How can you make the case for funding research which might prove that something can be done better, or the clinical outcome be improved?

It got me thinking again about research and scientific journal publishing and reliability of evidence presented; about the implementation question; and about whether the research is being read. On the Africa Health website we've been trying to feature some African journals, but find that quite a few of those listed on African Journals Online (AJOL: www.ajol.info) or the African Index Medicus site (www.indexmedicus.afro.who.int) are struggling to appear as regularly as intended, or not at all. Sadly money is at the root of the problem with the subscription model very difficult to sustain when libraries are starved of funds, and personal incomes are under significant pressure themselves, and the Open Access (OA) model depends on researchers also having an income significantly beyond

what many have. Then there is the debate about how rigorous is the review process. It can be patchy, or worse with a number of rogue publications already outed as being simply outlets for dodgy research.

But what are the publishers judged on? Being indexed is one critical mark of respect for a publication, though this can be a difficult hoop for African publishers (as we know only too well with our sister peer-reviewed titles). The Impact Factor has become a leading indicator, letting people know how often a publication is cited in other accredited publications. But should we also be trying to measure whether the science actually gets read by non researchers or in other words, by potential implementers?

Difficult to know what the mechanism might be, but maybe the reading of journals should become a compulsory part of the Continuing Medical Education programmes set up by individual medical councils? Certainly across much of Africa we do need to question the deficiencies in the reading culture amongst those who are beyond medical school, and try to see how the pursuit of life-long learning can be stimulated.



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