

Results of the Survey of Academics

Alejandro Treviño-Becerra¹, Francisco Espinosa-Larrañaga² and Miguel Cruz-López²

¹Editor; ²Co-editor, *Gaceta Médica de México*

Introduction

Gaceta Médica de México (GMM) is the official journal of the National Academy of Medicine of Mexico (Academia Nacional de Medicina de México [ANMM]). The ANMM is, in turn, the Federal Government consulting body in matters of health. As of 2017, number 2, volume 153, a change took place in GMM responsible editors. The new editors' purpose is to improve the journal's quality with the publication of articles with higher impact, as well as to reactivate academicians' works publication.

The purpose of carrying out a survey among academicians was: (1) making them part of GMMs diagnosis; (2) finding out the weaknesses, as well as the strengths, they identify; and (3) inviting them to collaborate with proposals for improvement and publications. This, with the purpose of knowing how is GMM quality perceived by academicians and which are the target readers, it is directed to academicians? Medical students? General practitioners? Investigators? Finally, a survey was applied, and the purpose now is to release the results of said survey sent to academicians.

Method

A closed and open-ended questions survey-type instrument was developed, which comprised 29 questions exploring the following: (a) GMM editorial organization, (b) academicians' participation in GMM, (c) identification of problems (weaknesses), (d) identification of strengths,

and (e) proposals for GMM improvement and projection. The instrument was sent to all academicians (census-based sample) by means of the Survey Monkey platform; it was not sent to corresponding and honorary members. The e-mail registered in the ANMM files was used to send the invitation, and the link to Survey Monkey was used to answer the instrument. The period of access and reception of answers was 3 weeks, with two reminders before closure. The analysis of results is descriptive, with absolute and percentage values.

Results

The instrument was sent to 556 academicians, out of which 235 (42%) gave an answer. The survey was answered in similar proportion (47% each) both by full and numerary members. By departments, Medicine stood out with 53% of respondents. 66% of academicians referred regularly receiving the GMM printed version, but only 10.5% of them read it entirely, and 3.5% definitively do not read it. GMM was referred to be circulated at their workplace by 46.6% of respondents.

With regard to interest in and experience at publishing in GMM, 58% of academicians (136) have not published in GMM for the past 5 years. Little has been published by 94% (221), and 6% (14) have published more than 6 articles. Of those who have submitted works for possible publication, 22% (52) have not had their work rejected, while 78% (183) have had some submitted work rejected.

Strengths and weaknesses mentioned by the academicians can be observed in table 1.

Correspondence:

Alejandro Treviño-Becerra
Unidad de Congresos del Centro
Médico Nacional Siglo XXI
Bloque B, Avda. Cuauhtémoc, 330
Col. Doctores
C.P. 06725, Ciudad de México, México
E-mail: atreve16@yahoo.com.mx

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Table 1. GMM strengths and weaknesses identified by academicians

Strengths	Weaknesses
<ul style="list-style-type: none"> – It is perceived as the best Mexican journal – It has international presence – It is regarded as a splendid and important publication – It is an indexed journal – It is freely accessible on the Internet – It is a link with the medical community in general 	<ul style="list-style-type: none"> – Doubts about the editorial peer-review process – Same or higher difficulty to publish in GMM than in international journals with higher impact – Delay in the review of submitted articles and, therefore, in the answer – Poorly sustained negative reviewer rulings – Long, complex, confusing, and grievous process for publishing

Source: survey conducted with academicians, March 2017.

With regard to editorial and contents' organization, 94 academicians (22.1%) do not know how the editorial board is integrated, and 130 (30.5%) would like to belong to said board; those who are not interested refer it is mainly due to lack of time. 81% (190) claims knowing the GMM sections. To the open question "Would you recommend eliminating one or more sections?" 60% (141) suggested eliminating the Clinical Cases and Images in medicine sections. There were opinions against the publication of "simple" review articles and political news, and to lesser proportions, the epidemiological information, molecular biology, and history and philosophy of medicine sections. There were no suggestions for incorporating new sections in answer to the corresponding question.

As regards the question "What changes would you propose to improve GMM quality?," the answer that there should not be format changes stood out, although some suggested changes to the cover. 60% of academicians who answered the survey consider that GMM periodicity should be monthly and the print run increased. With regard to the publication being preserved both in paper and electronic media, the answer was positive in 202 (86%) of the 235 academicians who answered the survey.

In relation to distribution, 43% (102) requested for the journal to be distributed by specialized courier service, in second place, that delivery should be using the Mexican Postal Service and, in last place, by ANMM own messenger service.

Questions 28 and 29 sought to explore how useful our journal is the most favorable answers, with 40%, were being the ANMM official journal and that the most important GMM offers to non-academician doctors or health-care personnel is support to continuing medical education mainly by means of the publication of original and review articles and editorials.

Table 2 summarizes the open answers related to suggestions to increase GMM quality.

As for the question "Do you plan to publish in GMM in the future?," 66% (155) of academicians have not

planned to submit a document for publication in the future. The answers given by the surveyed academicians for deciding to publish in GMM in the future are shown in table 3.

Some concrete answers to the question "What do you suggest to improve GMM?" that were mentioned more than twice are the following:

- Promoting that academicians publish at least one clinical or basic research original article, or else an opinion article about controversial topics or a high-level review article at least every 12–24 months.
- Making a bibliometric analysis of quality indicators and finding out the number of citations of articles published in GMM.
- The review of articles should be made by academician experts on the subject and not only by the editors.
- The editorial should be based on some published original article, or there should be several editorials of articles deserving it, which gives citations to those articles.
- The Letters to the editor section, which gives citations to the referred articles, should be promoted.
- It is important for the journal's impact factor to be increased since different evaluating organizations, which scientific researchers must adhere to, only consider publications in high-impact journals to be valid. Increasing or decreasing the journal print run, as inquired in question 23, does not impact on quality.
- The process of article submission for review has great operational problems; it should be carried out in Mexico, not in Spain.
- In the past few years, GMM has shown a tendency toward publishing "colloquial" articles that do not contribute to primary care physicians' knowledge and neither to public policy.
- With regard to primary care physicians' continuing education, see the Lancet, JAMA, or BMJ example, whose main readers are primary care doctors

Table 2. Open answers with suggestions to improve GMM quality

Main and more common suggestions for improvement
<ul style="list-style-type: none"> – Publishing it in English – Better and larger diffusion – Quick publication of accepted articles, and with no delay – Integrating it to a larger number of international indices – Incorporation of a section of academicians' free opinions including news, letters to the editor, and reflection articles – Rising the impact factor and making a bibliometric analysis

Source: survey conducted with academicians, March 2017.

Table 3. Answers given by the surveyed academicians for deciding to publish in GMM in the future

Why submitting a new contribution?	Why not submitting a new contribution?
<ul style="list-style-type: none"> – Making results on Mexican population public – Submission of symposiums the publication of which is not common 	<ul style="list-style-type: none"> – Low impact factor – Review takes too long – High grade of difficulty in reviewers' answer – Rejection of works after long wait, which subsequently is accepted by journals with higher impact

Source: survey conducted with academicians, March 2017.

since these journals have positioned themselves as benchmarks for this health-care personnel updating, in contrast to what GMM does.

- Considering that the ANMM is a consulting body for the government, GMM should be oriented toward covering that purpose.
- Making a better selection of original research articles and developing a clinical update section for general physicians that favors the quality of care of the population that are primary care services users.
- Making the electronic page more friendly, with a link to the journal.
- According to the journal's current impact factor (0.312), being more permissive in the publication of articles that surprisingly are rejected and then accepted in journals with higher impact.
- The electronic version should be ready in due time and proper form.
- Migrating to the publication of articles in English, leaving the Spanish option online.
- Making the journal's editorial management more efficient including the submission of articles for review by means of a friendlier platform.

Discussion

We consider the answers of the 235 academicians to the instrument to be a representative sample of

academy members. After the reception of answers was closed, we found out that many academicians did not receive the invitation or the survey because their electronic address was not updated.

Among the academicians who answered the survey, 96.5% read GMM completely or partially, which indicates their interest toward GMM, and almost half of them recycle it at their workplace, which increases the number of readers, estimated at five additional readers for each academician who shares it at workplace.

For GMM to increase its print run and periodicity and be distributed by specialized courier service, it should have more economic and human resources available, which would have to be generated by the journal itself. Increasing the print run, publishing the journal with a monthly periodicity and distributing it by private courier service imply having larger economic resources. Currently, the ANMM cannot afford to finance this proposal given the limitation of its revenue. On the other hand, getting such funding is not among the GMM functions since by being freely accessible on the Internet, there is no demand for subscriptions. Ethical principles in terms of funding also preclude the use of publicity. If quality is increased, a more expedite and simple peer-review system will be achieved, and having advertisers would even become a source of income for the ANMM.

The proposal of GMM being published in English to increase its quality called our attention since the language a document is written in does not improve its quality. However, we recognize that publishing in English can attract authors from other countries and with that the possibility of better quality manuscripts.

As part of a GMM evaluation and follow-up process, the proposal to carry out a bibliometric study would allow for us to have hard data on its evolution and visualize the changes required to improve its quality.

Of note, most surveyed academicians (94%) have not published much in GMM in spite of it being their official scientific journal and do not mention as a cause that 78% of them have had some submitted work rejected.

Among GMM strengths, academicians identify that it is an indexed publication, with free access through Internet, with international relevance and that it serves as a link between the ANMM and the national medical community in general. These are facts that are indubitable, recognizing the difficulty measuring the link would imply.

On the other hand, we can resume the weaknesses as delay and doubts about technical peer-review and

a non-friendly platform. Both situations also influence on academicians not planning to submit works to GMM for publication in the future.

With regard to whether academicians plan to publish in GMM in the near future, two of its strengths are expressed as reasons for publishing: Making information on Mexican population public, which we consider to be important and that GMM is a good instrument for continuing medical education through the publication of its symposiums. Conversely, the reasons that inhibit academicians from publishing are GMM main weaknesses identified by academicians: Low impact factor, tardiness in the peer-review and publication process, difficulty to understand reviewers' requests and poor diffusion and distribution.

When open answers are read, two points stand out: (1) the imperious need to improve the peer-review process in order not to cause discouragement and disappointment in the authors due to its slowness and (2) defining the type of journal GMM should be and identifying what is it that we can offer to retired academicians in order for them to continue publishing their experiences and reflections if this is their wish.

The survey was a productive exercise with the state-of-the-art methodology. The answers show interest and academic commitment, which validate GMM and the ANMM itself, and enable the editors and board of directors reconsidering the behavior to be followed with GMM in our coacademicians opinion about our journal, with the sole intention to improve it with academicians, editors, printers, translators, technical, secretarial and liaison personnel, distributors, and potential advertisers efforts.

Periodic publications are indubitably an instrument for contemporary physicians' continuing education and a tool for the training of the new generation of health-care professionals.

Recommendations and Conclusions

From the observations and answers to this survey, as well as from the experience obtained and poured by the editor and coeditors over these months, together with observations by the Permanyer Publishing House and the work of GMM editorial assistant, the following points are obtained:

- The editors must know and evaluate each one of the received works to, in case of being suitable, sending them to the reviewers, or otherwise rejecting them with promptness.
- The pool of reviewers has to be tripled, which requires for other non-academicians and young investigators to be invited.
- To avoid falling behind, peer-review should be in a short-term and under a format that allows for authors, editors, and reviewers themselves to readily identify acceptance or suggested revisions, or the reasons for rejection, and verifying when this is accomplished with promptness.
- The decision-making periods between manuscripts reception and publication have to be shortened. In total, we must not exceed 8 months.

In addition, a system will be sought for GMM delivery simultaneously to the publication of the corresponding issues.

Already, as an immediate result of the survey, the Clinical Cases and Images in medicine have been eliminated. All articles should faithfully adhere to the instructions for authors, the revised version of which is published and remains in force as of this 2017, number 5 issue.

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