Centering the *Medical Journal of Australia* in the landscape of medical information in 2023

Virginia Barbour ២

The *MJA* has a unique responsibility and opportunity to report, reflect, and be an advocate for health priorities across Australia and our region



A s 2023 begins, no-one would argue that we are short of medical information. Sifting and assessing the daily tide of information and misinformation — to obtain actionable and reliable evidence that can influence and inform health care has become one of the key problems for both medical professionals and the general public. Health care faces many challenges, and the need for high quality

evidence has never been greater. These challenges include the increasing burden of chronic disease on an already strained health system, even as we continue to navigate the COVID-19 pandemic, and prepare for whatever epidemics lie ahead. And, as evidenced by the recent devastation in our region, the increasing significance of climate change as a major risk to human health is ever more apparent. What should be the priorities of the *MJA* now?

National medical journals such as the *MJA* are key components of the landscape of medical information, especially in these uncertain times. With the advantage of good national and regional connections, national journals are uniquely placed to provide early insights into and perspectives on the medical priorities of the day, as well as publishing local and regionally important research. They can act as nodes of national medical research communities and hold decision-making bodies, including state and federal governments, to account.

The *MJA* has a unique responsibility to report, reflect, and be an advocate for health priorities across Australia and our region. To do this well it must be underpinned by core principles, all intertwined: a commitment to diversity of contributors, editorial staff, and reviewers; equity of access to both the publishing and reading of research; and a commitment to quality, integrity, and innovation.

The *MJA* must maintain deep relationships with the people who undertake research and provide and receive health care across Australia and our region. It must do so by engaging with a diverse community of editors, reviewers, and contributors from all states and territories, and beyond. Australia is a signatory to the *United Nations Declaration on the Rights of Indigenous Peoples*,¹ which requires significant effort to recognise the rights of Aboriginal and Torres Strait Islander peoples to collective and individual self-determination. Your views as readers of the Journal as to how we can support the four Priority Reforms of the *National Agreement on Closing the Gap*² are welcome anytime.

Making medical research open to all is no longer negotiable. The priority is now to do so in a manner that ensures equity of access to publishing as well as equity of access to reading and using research findings. Further, the content of our Journal must be accessible beyond the medical professions. With its journalistic expertise at *MJA Insight*+, through its podcasts and other public outreach, the *MJA* already has a solid foundation to build on.

Now is also a good time to examine the inner workings of journals. There has been much innovation in publishing technology over the past decade, and the MJA has opportunities to embed initiatives that support reproducibility and transparency in research into its practices and to experiment with innovative publishing options for all types of clinical research. Practices such as clinical trial registration and structured reporting of trials and other study types are accepted, but there are now community expectations and opportunities for more, including best practice standards for data and code availability and processes that support study analysis and replication. By aligning the technology and practices that underlie open access with principles of integrity and transparency, technology can maximise the impact of a journal's content. The COVID-19 pandemic has shown us that traditional models of peer review and publishing are not the only — and are often not even the best options for responding to the needs of clinicians, researchers, and the community. As we emerge from the pandemic, the time is right to consider a range of alternatives, including integrating our processes with external initiatives, such as international preprint servers, and exploring options for experimentation in publishing processes.

In these very important times for medical publishing, I couldn't be more excited to be joining the *MJA* as Editor-in-Chief. I would like to thank Professor Nick Talley, the outgoing Editor-in-Chief, who has guided the Journal through the very turbulent recent period, bringing it to the other side stronger and in a position to take on the challenges than undoubtedly lie ahead. I'm looking forward to working with the fantastic *MJA* team, its Expert Advisory Group, and our peer reviewers — and, of course, with our readers. If you have ideas for your *MJA*: we want to hear from you!

Competing interests: I am the director of Open Access Australasia, a paid position. I am a member of the National Health and Medical research Council Research Quality Steering Committee. I am an unpaid advisor to a number of national and international open access and research quality and integrity organisations, including coAlition S (https://www.coalition-s.org), the San Francisco Declaration on Research Assessment (DORA; https://sfdora.org), the Confederation of Open Access Repositories (COAR; https://www.coar-repositories.org), and Cochrane (https://www.coahrane.org).

 \odot 2022 The Author. Medical Journal of Australia published by John Wiley & Sons Australia, Ltd on behalf of AMPCo Pty Ltd.

This is an open access article under the terms of the Creative Commons Attribution License, which permits use, distribution and reproduction in any medium, provided the original work is properly cited.

- United Nations. United Nations Declaration on the Rights of Indigenous Peoples. 13 Sept 2007. https://www.un.org/development/desa/ indigenouspeoples/wp-content/uploads/sites/19/2018/11/UNDRIP_E_web.pdf (viewed Dec 2022).
- 2 National Agreement on Closing the Gap. July 2020. https://www. closingthegap.gov.au/national-agreement (viewed 2022).