## **EDITORIAL**

## Publication of Mental Health Research from Poor Income Countries: Resolving the Information divide!

During the recent years, current state of representational inequity in international publication of mental health research from low- and middle-income countries has been in focus. There is an enormous gap between the burden of neuropsychiatric disorders and the mental health resources in the developing countries. Keen to evaluate the nature and extent of paucity of mental health research publication from the lowincome countries, the World Health Organization has initiated efforts to reduce the representational divide in international research communications. It is important to take note of this change in perceptions in the global context, as it has significant messages for Indian Psychiatry with reference to mental health research and its international dissemination.

While tracing a coherent account of the emerging scenario, it is impossible not to recognize the germinal influence of the paper by Patel and Sumathipala (2001) in British Journal of Psychiatry. This paper has been already referred by a number of editorials (Goswami, 2003; Parker, 2002) and other communications. These authors assessed papers published by six leading journals over a 3-year period (1996-1998) and substantiated a case for a very gross under-representation of papers from the rest of the world as compared to the Euro-American countries. Excepting Acta Psychiatrica Scandinavica, which published 16% papers from the low-income countries, all others failed to reach the double figure. For example, the American Journal of Psychiatry had 2.5%, Archives of General Psychiatry 1.3% and Psychological Medicine 6.1% of papers from outside of the Euro-American region.

Subsequently, Saxena et al (2003) looked into the composition of the editorial boards

of leading psychiatric journals. The basic temperamental position was aptly stated by these authors in their communication in the Lancet, "we expected only a small members from developing countries but were surprised..." These authors screened the Editorial and Advisory boards of ten psychiatric journals based on the impact factor rating criteria for the year 2000. Then they looked for a member of these boards who were from a low or middle-income country as per the World Bank guidelines. From a total pool of 530 editors and advisory board members, only four members were from developing countries - 2 from Brazil and 1 each from India and Chinal

On one hand, there may be several factors leading to such a sad underrepresentation; however, all the stakeholders have a duty to perform to correct these imbalances. The relevant question is: does mental health research carried out in developing nations such as India, Ghana and Nigeria enrich science, as we understand? Are the Euro-American readers better off with access to studies carried out in these low and middle-income countries?

The importance of dissemination of medical research information generated by the developing countries cannot be overemphasized. Perhaps, it is particularly important for mental health research. Availability of tesearch data at an international scale does impact on the way health policy and planning are shaped. Any planning on effective implementation of healthcare delivery would have now to be based on evidence base. Internationally published research evidence would carry that extra weight of conviction and significant global and local impact on planning for healthcare. There are obviously good number of clinical and public health questions around critical mental health issues. In answering these responsibly, the planners and policy makers will have to rely on internationally published data for all important advocacy purposes showing the unmet needs and neglected areas of service delivery. The informed ones would endorse that mental health research data from the developing world have important messages for the multi-cultural, polyethnic Euro-American countries.

In an attempt to get an insight into the nature and degree of the representational gulf, the WHO has recently carried out a literature based investigation, involving all journals indexed in the international databases such as MEDLINE, CINAHL, Embase Psychiatry and Sociofile. Only 2-3% of all publications were pertaining to the middle and low-income countries (WHO, 2003). What are really the barriers to international publication of mental health research papers from these countries? Are we convinced about poverty of enquiring minds or paucity of resources!

Clearly, there is a disturbing trend with the international journals. Recently, Richard Horton at the Lancet published a commentary made a case of bias in the leading general medical journals against the diseases of poverty (Horton, 2003). In fact he goes further to point out that this could be a form of institutionalised racial insularity. Particularly, these are the days of impact factor and citation index. Perhaps, medical research priorities are determined by commercial values. Whatever the reasons are, this trend is detrimental to all democratic cultures.

In order to rectify the so-called "information gap" between the richer and poorer nations, the scientific community must first acknowledge the fact that this divide does in fact exist. There is a role of psychiatric journal editors in particular to recognize the ethnocultural bias and launch active initiative to revert the current inequity. It is now necessary to improve and strengthen the information capacity in the low and middle-income countries. It involves training and development issues in the professional bodies concerned primarily with mental health research. There is an urgent need to restore a respectable level of

## GOSVAM

representation in the editorial boards in the indexed journals, commissioning guest editorials and commentaries, commissioning regional editorial members, and introducing columns pertaining to mental health issues in the developing nations.

The leading international general medical journal editors have probably taken the first step. Some of these journals have improved their content base, while others now solicit papers from economically disadvantaged settings. The mental health journal editors are perhaps a bit uncertain. There is a need to strengthen the existing research capacity in the developing nations. This can be solved to some extent by training activities

and the leading psychiatric journal editors and leading psychiatric research funding sources ought to come forward with specific and concrete training agenda. In the recent months, the World Health Organization has taken up these issue and the consensus statement is an intermediate step towards rectifying an unacceptable situation.

## REFERENCES

**Goswami U (2003)** Research tourism, Indian Psychiatry and international databases. Indian Journal of Psychiatry, 45, 1-2.

Horton R (2003) Medical journals: evidence of

bias against the diseases of powerty. The Lancet, 361. 712-713.

Parker G (2002) Acta strides the world stage. Acta Psychiatrica Scandinavica, 105, 241-242.

Patel V, and Surnathipala A. (2001) International representation in psychiatric literature. Survey of six leading journals. British Journal of Psychiatry, 178, 406-409.

Saxena S., Levav A., Maulik P. and Saraceno B. (2003) How international are the editorial boards of leading psychiatry journals? The Lancet, 361, 609.

WHO (2003) Mental Health Research in developing countries; Role of Scientific Journals. WHO information sheet on Research for Change (Revised November 2003), WHO, Geneva.

Professor Utpal Goswami, MD