

How to overcome barriers to publication in low- and middle-income countries: Recommendations from early career psychiatrists and researchers from around the world

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Abstract

There is an increasing movement toward international collaboration and global discussion in mental health. If provided with the right opportunities, early career psychiatrists (ECPs) and researchers in mental health can contribute meaningfully to this discussion. However, they often experience multiple barriers when attempting to add their voices via academic publications. We represent a diverse group of ECPs and researchers from all six World Health Organization regions. In this piece, we discuss these barriers, grounded in our first-hand experiences, and put forth a series of recommendations. The most potentially beneficial and immediate way forward is ensuring a much-needed mentorship and support, particularly for low- and middle-income countries. In this regard, international organizations, especially those with a particular focus on education, such as the Section on Education in Psychiatry of the World Psychiatric Association, can play a pivotal role.

KEYWORDS

academic, barriers, early career psychiatrists, publication, research

1 | INTRODUCTION

Early career psychiatrists (ECPs) and mental health researchers have a lot to contribute to international mental health practice and research. However, it has often proven challenging for them to make their voices heard in mental health discussions worldwide (Koelkebeck et al., 2020). The phrase “publish or perish” is a well-known maxim representing in stark terms the pressure faced by academics worldwide to publish in order to advance their careers. But ECPs and early career mental health researchers (ECRs), particularly those from low- and middle-income countries (LMICs), risk being side-lined from this global discussion if unable to publish.

The authors of this paper are a group of ECPs and ECRs representing all six World Health Organization (WHO) geographic regions, that is, Africa, the Americas, South-East Asia, Europe, Eastern Mediterranean, and Western Pacific countries, initially connected by the ECPs Section of the World Psychiatric Association (WPA) (Pinto da Costa, 2020), and members of the Global Mental Health Think Tank. We represent a wide range of sociocultural backgrounds and expertise, ranging from recently graduated physicians and psychiatric trainees to those holding assistant professorship positions. Despite this diversity, or better yet, informed by it, we are all invested in research and academic publishing. More importantly, we all see academic publications as a means to achieve genuinely global collaboration, and ultimately, improve mental health care and public mental health worldwide.

We have all had some experience with academic publishing. While some of us have recently published our first papers, others have more experience. Those with more experience in publishing have done so mainly in international journals, and nearly all of us have publications in national or regional journals. We have all experienced several barriers to publication, and we all recognize the importance of

bringing these roadblocks to light, in order to address them. Unfortunately, the literature on this topic is scarce (Oshiro et al., 2020). Still, this is a vital discussion in terms of securing that ECPs and ECRs, especially those from LMICs, can contribute to the global mental health movement.

2 | BARRIERS TO PUBLICATION

Based on our own experiences, we have identified challenges to publication in three domains: the manuscript itself, ourselves as authors, and the scientific journals (Table 1).

The use of English as the lingua franca in academia and its hegemonic role in academic publishing has been widely acknowledged, and we have thus found it necessary to tailor our manuscripts for English-publishing academic journals. Although many journals and institutions offer editing and translation services that could be helpful, financial barriers have often prevented many of us from accessing these services, especially for young researchers from LMICs. At the same time, many academic journals historically commission articles from well-known authors, commonly from high-income countries and established institutions. However, it is rarely the case that ECPs and ECRs, particularly those from LMICs, are asked to contribute.

While an indisputable cornerstone of the academic publication system, the revision process can sometimes be another barrier to publication. Most of us young psychiatrists work primarily as clinicians. Even when working in a university, an inherently more academic setting, our workloads are mainly focused on clinical care. In our experience, this is a challenge more often faced by young colleagues from LMICs, where mental health specialists are scarce and clinical services thus become a precious commodity. Therefore, when reviews get

TABLE 1 Barriers to publication and recommendations

Barriers to publication
Language barriers, that is, academic English
Lack of representation of ECPs and ECRs, especially those from LMICs, in commissioned articles
Financial barriers and lack of access to helpful resources, for example, editing services
Publication fees and open access fees
Time restrictions, mainly due to prioritizing the provision of clinical care
Recommendations
To promote mentorship programs, including peer-led models
To increase tele-educational opportunities
To consider the review process as a teaching and learning experience
To promote double-blind peer review
To dedicate publishing platforms for ECPs and ECRs
To waive or reduce the fees for editing and proofreading services for LMICs
To waive or reduce the fees to publications for LMICs
To save time to allow research and publications for early career psychiatrists and researchers

Abbreviations: ECPs, early career psychiatrists; ECRs, early career researchers; LMICs, low- and middle-income countries.

back after a considerable period of time, we are often already immersed in other clinical responsibilities.

Lastly, some journals, particularly those which are open access, require publication fees. These are not easily affordable, except for researchers from high-income countries with dedicated funds.

3 | RECOMMENDATIONS

We initially thematically grouped our recommendations into three main areas: reducing existing barriers, increasing the support provided to ECPs and ECRs, and creating new avenues and platforms for ECPs and ECRs to contribute to academia. Not surprisingly, these three areas overlapped significantly. Therefore, instead, we present our recommendations as a series of potential steps (Table 1).

A cornerstone step is to increase mentorship opportunities (Ramalho et al., 2016). There are several ways by which ECPs and ECRs could access mentorship and support programs. Perhaps the more straightforward option is for local mid- or senior-career professionals to support their early-career peers. This would require potential mentors to allocate some of their time for mentorship, and local institutions to recognize the value of this time and compensate them accordingly, particularly in financial terms. Unfortunately, this is not always possible. It could be, for example, that there is a scarcity of local specialists that could provide that support, or local institutions may have constraints that prevent them from providing mentorship.

These mentorship programs could also be provided by international organizations, such as the WPA or the WHO. International

organizations, like the WPA, can play a central role in increasing the visibility and dissemination of research outputs from LMICs (Botbol, 2020). The recent “Train the Trainer” virtual workshop (World Psychiatric Association, 2021), organized by the Section on Education in Psychiatry of the WPA, is an example of how mid- and senior-career psychiatrists can contribute to the professional development of ECPs beyond their clinical practice. Similarly, the WPA working group on Digitalization in Mental Health and Care is another example of an international organization harvesting the possibilities offered by advances in telecommunication technologies to support mental health professionals around the globe (World Psychiatric Association, 2019).

Continuing professional development, provided via tele-education, could prove pivotal moving forward. It could assist with reducing access inequities to training opportunities, while at the same time increasing international collaboration and LMICs' representation in these training opportunities. Tele-education and telemental health or telepsychiatry could be used to support ECPs and ECRs from LMICs with fewer local mentorship or research opportunities. Moreover, they could simultaneously open up possibilities for research training, mentorship, and support with research dissemination via international research collaborations. In this regard, local, regional, and international research organizations could play an important part in further supporting ECPs and ECRs from around the world to participate in global mental health discussions.

Two other potential ways by which ECPs and ECRs could receive extra support are via peer-led models and through journals themselves. Two recent examples of successful peer-led models of support are the one put forth by Ransing et al. (2021) and the Global Mental Health Think Tank. The first was an international web-based and peer-led mental health research group, and the second is a wider network of ECPs and ECRs to which all authors of this paper belong. There are various advantages to this type of model. The model emphasizes collegiality and a sense of equity and creates and strengthens international relationships.

Scientific journals can also provide mentorship and support to ECPs and ECRs via workshops and other resources. Reviewers could act as mentors and educators, particularly for early-career professionals, by reframing the reviewing process as a teaching and learning opportunity. In this regard, a double-blind peer review process could ensure all authors receive valuable feedback, regardless of the stage of their career or institutions of affiliation. This could, however, prolong the revision time and thus, reduce the likelihood of timely publications. A way by which journals may circumvent this is by developing extensive revision criteria that both reviewers and authors could access. This would add transparency to the revision process, provide an extra resource for authors new to the field, and expedite the revision process.

It is critical to ensure access to key resources that are not easily accessible for most ECPs and ECRs, particularly those from LMICs. These resources include, for example, access to editing and proofreading services. Accessibility to these support services could be increased by reducing or waiving required fees. A potential resource that

journals could provide is a space specifically targeted for ECPs and ECRs to submit their manuscripts, only offered by a handful of journals. A good example is the Young Psychiatrists Forum, a space provided by the Asia-Pacific Psychiatry Journal, where young psychiatrists are invited to discuss their research, training, and clinical work. Finally, a fundamental resource that local institutions should provide, albeit with external funding support when necessary, is protected time for research and publishing.

4 | CONCLUSION

Equipped with the right opportunities, ECPs and ECRs can make a significant and meaningful contribution to global mental health discussions. The most potentially beneficial and immediate way of ensuring that ECPs and ECRs, particularly those from LMICs, can contribute to the global mental health movement is by providing them with support and mentorship. In this regard, international organizations, especially those with a strong online presence, such as the WPA Section on Education in Psychiatry, can play a pivotal role.

CONFLICT OF INTERESTS

The authors declare that there is no conflict of interest.

DATA AVAILABILITY STATEMENT

Not applicable

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