

Article

Setting up the *Journal of Transport and Health*, a New Cross-Disciplinary Journal

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Academic Editor: Andrew Kirby

Received: 3 March 2015 / Accepted: 5 May 2015 / Published: 6 May 2015

Abstract: The *Journal of Transport and Health* is a new journal, bringing together the impacts of transport on health and inequalities and the ways changes to transport policy and/or infrastructure affect these. It aims to: promote dialogue between the two research communities it serves; improve the quality of data and its appropriate use; and encourage transfer of research into practice. The first volume of four issues was published in 2014; it is already abstracted and indexed in SafetyLit, ERIH PLUS, TRID, the TRIS and ITRD Databases. A substantial achievement is that the Social Sciences Citation Index added the journal within the first year, from the first issue onwards, which is rare. Before the end of 2014, the journal had exceeded its target by 2015 for: numbers of manuscripts submitted; editorial decisions made; articles accepted for publication; and articles downloaded. Challenges have included recruiting sufficient reviewers; setting standards for acceptance of manuscripts; and editors' time commitments. In 2014, articles were downloaded in 77 countries, and we received submissions from 27 countries. Despite the plethora of scientific journals, *Journal of Transport and Health* has obviously filled a gap in interdisciplinary research “whose time has come”, in a timely and attractive manner.

Keywords: transport; health; cross-disciplinary; journal; launch; metrics

1. Setting up the new journal

1.1. Introduction

The *Journal of Transport and Health* is a new journal, whose first volume of four issues was published in 2014. Dr Harry Rutter and I had discussed founding a journal to cover the intersections between Transport, Health and the Environment (“*THE Journal*”) about 15 years previously but neither of us had the time or knowledge to develop the idea.

I was approached in February 2012 by Elsevier’s managing editor for transportation journals. They had identified a gap for scientific publications about the health impacts of transport and wanted to start a journal to cover this. His initial approach had been to Dr Rutter, who had suggested me.

By February 2013, Elsevier and I had invited associate editors; assembled an editorial board; and agreed the title, aims, objectives and scope of the journal. Shortly after, the Guide for Authors was written, the front cover was designed, and both the journal’s home page and electronic system were live. The first manuscript was submitted in April 2013, and the first research article was published online September 2013.

1.2. Purpose of the Journal

The stated purpose of the journal is devoted to research on the many interactions between transport and health. These include, for instance:

- the impacts on public health and inequalities of:
 - active modes of transport;
 - noise and air pollution generated by transport;
 - road traffic injuries;
 - community severance;
- road danger and its reduction:
 - actual safety and security hazards associated with transport;
 - perceptions of danger and factors affecting these;
- factors affecting transport choices:
 - urban form;
 - location and accessibility of health and other facilities;
 - age, health and disability;
 - socio-economic inequalities;
 - rurality;
 - logistics systems, especially for food transport and distribution;
 - tourism and leisure travel;
- synergies between sustainability and health impacts of transport;
- economic and health impact assessments; and

- policies that promote or discourage healthy and sustainable transport modes, transport systems and communities.

1.3. Interdisciplinary Research

The journal aims to bring together the impacts of transport on health and the ways in which health benefits can be increased and adverse health consequences minimised through changes to transport policy and/or infrastructure. It fills a niche “whose time has come”. One reason for this is increasing awareness of the synergies between transport policies devised to be environmentally sustainable and those designed to improve health [1]. Secondly, the work of the World Health Organisation, among others, has increased understanding by policy-makers and practitioners of the impact of social and environmental factors on health (the social determinants of health and health inequalities) and of the role of professionals outside healthcare in determining the population’s health [2]. In England, this has been followed by the reorganisation of public health, with most practitioners relocating from the healthcare system to local government offices.

Three particular aims of the journal are: To promote dialogue between the two research communities it serves; to improve the quality of data and the appropriate use of data; and to encourage transfer of research into practice. So far it appears to be achieving the first of these; is working towards the second; and it is too early to be able to assess the third. Although most of those submitting articles are academics, the readership appears to include practitioners as well. However, this may be less likely in future, when the initial open access to the first two issues ceases, particularly at a time of public sector cuts making journal subscriptions unlikely.

As an international, multidisciplinary journal that intends to cover transport and health issues in high, medium and low income countries, we felt it was important to have an editorial board that covers all relevant disciplines and types of country. The publisher and I drew up a list of about 60 individuals from around the world whom we knew were interested in transport and health, plus people who had volunteered in response to an initial survey from Elsevier distributed through a range of networks and websites to gauge demand and desired scope. The initial list was primarily from the UK, the USA and Australia; we also searched for individuals from continents that were not represented. I reduced the list to a third, to be a more manageable number, using country, discipline, areas of expertise, and enthusiasm for the proposed journal to obtain as representative a list of potential readers and authors as we could at that stage.

1.4. Organisational Structure

I am the editor-in-chief. Because of time constraints, and in the absence of substantive funding to “buy out” my time, we decided to invite six associate editors. Three are based in the UK (two known personally to me, plus one member of a transport and health network who was particularly supportive and enthusiastic of the enterprise and covers a different discipline). The other three are from Australia, New Zealand and the U.S.A. The number of manuscripts each has dealt with has greatly exceeded what they agreed to, but so far all remain enthusiastic about and committed to the journal. Manuscripts for which an editor is an author are handled completely by a different editor, who can consult other

editors if there is the need to discuss it with someone else; this is particularly the case where I am an author but would be the person whom a handling editor would contact to discuss a tricky manuscript.

The current editorial board comprises 18 members, in addition to the editors. We found it most difficult to recruit board members from Africa, South America, the Middle East, and Asia. It was probably a mistake to offer all those who accepted the invitation a three-year term on the editorial board, as a regular smaller turnover would be more useful. I now have some contacts in areas of the world less well covered by the existing board and must decide whether and how to expand the size of the board, given the rapid growth of submissions. New board members will need to complement the existing supportive and committed network of people we have assembled across the field from all the relevant disciplines.

2. Metrics

As an academic in a worldclass university, traditional Impact Factors have been important to my institution and therefore to my career. However, as a public health physician based in a medical school but working in the field of transport and health, I believe that topic-based metrics, such as the Excellence in Research for Australia (ERA) system, are better. ERA graded journals within a specialty. This produces a fairer assessment. For example, the best journals in small fields, such as social sciences, transport, or public health, have far lower Impact Factors than mediocre journals in topics such as cardiology or internal medicine, where there are so many researchers publishing papers. In ERA, the top 5% of journals within a specialty were graded as A* (“Virtually all papers they publish will be of a very high quality”) and the next 15% were graded A (“The majority of papers in a Tier A journal will be of very high quality”). However, this metric was dropped in 2011 because of institutions in Australia setting targets for the number of publications staff should achieve in A and A* journals [3].

Being a new journal, the *Journal of Transport and Health* is not yet indexed in PubMed, the main health bibliographic database, although we have applied for this to happen as soon as two years have passed (one for publication of a full volume and a second for published papers to be cited in other published papers). It is, however, abstracted and indexed in SafetyLit, TRID, the TRIS and ITRD Databases. In the meantime, we have to hope that health researchers use Scopus, Science Direct, and Google Scholar when searching the literature, not only PubMed. A substantial achievement is that the *Journal of Transport and Health* was not only added to the Social Sciences Citation Index (SSCI) only 11 months after the first issue was published, but it has been included from the first issue onwards, which is rare.

Similarly, the journal cannot have an Impact Factor until June 2016 at the earliest. This has no doubt deterred some authors from submitting manuscripts altogether, while others are known to be submitting their “high impact” papers elsewhere, at least initially and their lower impact papers to the *Journal of Transport and Health*. This was one reason for the timing of the launch of the journal: The most recent UK Higher Education Funding Council Research Excellence Framework assessment included papers published by October 2013; the next assessment is expected to include papers published 2014–2019. This would give time for the Journal to acquire a respectable Impact Factor but the good news for UK academics is that journal Impact Factors are no longer considered important: It is

the (international) impact of a specific article that carries weight. This is line with the San Francisco Declaration on Research Assessment (DORA) [4].

Other metrics are also very important, particularly in the digital age. We had set targets for the first three years for: The numbers of manuscripts submitted; editorial decisions made; articles accepted for publication; articles downloaded; and citations. On all but the last measure JTH exceeded before the end of 2014 not only its 2014 target but its 2015 target as well. For example, by October 2014 there had already been more than 22,000 downloads. Regarding citations, there has as yet been very little time to generate these.

3. Learning from Experience—Special Issues

The first special issue was published in December 2014, on “Walking & Cycling: The contributions of health and transport geography” [5]. It started as a suggestion from the two co-organisers of a day conference and was intended as a themed section within a general issue. When only one of the conference speakers submitted a paper, one of the handling editors offered to become Guest editor for a whole special issue. The second special issue was published in 2015, on “Travel and older people”. For each of these, we solicited full articles, which were handled by a sole Guest editor, although one or two assistant guest editors were involved in a small minority of submissions.

Because the initial special issue was delayed and the second kept to time, the first moved from being the third to the fourth issue of 2014, with the second the first issue of 2015. This resulted in a nine month gap between general issues, which is not ideal. However, online publication of Articles in Press within a few weeks of acceptance means that authors and others can still cite an accepted paper as published online regardless of the issue to which it is assigned. I have, with authors’ agreement, held an article for a specific issue, whether themed or general, where it fits better, such as manuscripts that fall within the remit of a special issue but were submitted before the call was publicised. So far all authors who have been asked about holding back print publication for a later issue have agreed with the suggestion.

We learned some lessons from these first two special issues but have repeated other mistakes. The workload for a single editor for a whole issue is excessive, disrupting other work and/or incurring delays in the processing of manuscripts. For the third and fourth special issues (“Built Environment, Transport, and Public Health” and “Public transport and health: Publicizing the evidence”) we have appointed panels of three and four editors respectively. This made agreeing the scope of the special issue a more protracted process.

The second difference was to issue a call for abstracts for the special issues, rather than full papers. Authors were instructed to email these to one of the guest editors, rather than using the online submissions system at that stage. The abstracts were reviewed by the editors. Authors of abstracts of sufficient standard and falling within the scope of the special issue have been invited to submit a full paper, with a strict deadline to enable sufficient time for review, revision, and decisions. High quality abstracts that do not fall within the issue’s scope have been passed to me, so that where it falls within the journal’s general scope I can contact the author to invite submission of manuscripts through the journal’s usual submission system.

The mistake with these latter two was to issue the calls at similar times, because of the tendency for a cycle of a dearth then a glut of ideas. In future, I intend to issue a call for submissions to a single special issue every six months, to avoid having two consecutive special issues as it delays final publication of articles awaiting the next general issue, although online publication is not affected and in practice it may be of importance. In the meantime, we are seeking potential guest editors for a special issue on measurement issues in research on transport and health.

4. Challenges

4.1. *Electronic Submission System*

The first challenge for the editors was using the publisher's electronic submission system. It works extremely well for authors, which is probably more important, but is not intuitive on the editorial side. Elsevier shares a similar problem to England's transport and sewerage systems: Early adopters end up with old technology. A new system is gradually being rolled out across all Elsevier's journals. In the meantime, we have instituted a few changes for the journal's second year.

4.2. *Setting the Standard for Acceptance*

Perhaps the most difficult challenge has been assessing what the threshold should be to accept a manuscript. As a new journal, we need to balance publishing sufficient articles against the standard being sufficiently high that readers will want to read the journal and authors will be attracted to submit to the journal. Given the number of submissions we have received, we seem to have struck the right balance. A 50% acceptance rate sounds high but needs to be discounted to allow for a proportion of commissioned papers (HotM2 updates, see Section 4.3 below, and some special issue papers which have already survived a preliminary filtering process before formal submission); the quality of published papers suggests we are indeed getting it right.

Most papers currently have an initial decision of "revise and resubmit if you can deal with the reviewers' comments". In most, but not all, cases the author does resubmit. Having received letters from other journals implying that a second or third revision of my manuscript would lead to publication, only to be rejected eventually, I decided that unless there were special circumstances, the decision after a first revision should be to accept the paper (as it is or subject to further amendments), or to reject it.

Immediate rejection is easy when the paper falls outside the scope of the journal; so far, relatively few have been rejected immediately on the grounds of poor quality. In the future, we need to reject more manuscripts before rather than after sending them for review. This will give authors a speedier decision and will spare our reviewers but does require the handling editors to read new manuscripts more thoroughly and critically.

4.3. *Non-Research Articles*

When setting up the journal, and as stated in the first issue's editorial [6], we also intend to publish non-research articles of relevance to interdisciplinary researchers and practitioners. These include short articles describing organisations around the world that aim to bring together transport and health

practitioners, such as the Transport and Health Study Group (THSG) [7] and the Transportation Research Board's Health subcommittee [8]. A second category is articles based on the THSG's *Health on the Move 2* [9] (HotM2), the greatly revised second edition of *Health on the Move*, the first report to bring together the wide range of impacts of transport on health and inequalities [10]. To avoid another 20 year delay between updated editions, we aimed to publish two chapters per issue, updated and written as journal articles, as an enduring yet up-to-date resource. We have also commissioned invited commentaries on the HotM2 articles, to provide a more global perspective of these UK-focussed articles. However, authors of all these types of articles have been slow at producing their manuscripts and responding to editors' and reviewers' comments. Despite the challenges, we feel these commissioned articles are worth the effort.

4.4. Reviewing Manuscripts

All articles published in the Journal have been reviewed, including Viewpoints and Commentaries, although for the latter, this is sometimes undertaken by an editor rather than an external reviewer. Editorials are also read by another editor prior to acceptance. We do not select reviewers from the same institution as any of the authors.

The biggest challenge has been finding sufficient reviewers. Editors started by inviting editorial board members (who gave a commitment to review manuscripts as part of their board duties), colleagues, and members of their networks, as well as using reviewers suggested by authors. Even when they are not used, we have generally added them to our database. Elsevier's submission system also has a facility to select reviewers from among other databases. Reviewers are mainly selected by matches between the manuscripts keywords and the reviewers' profile. A check in January 2015 found that 87% of our listed reviewers did not have a "personal classification" and therefore would not appear as suggested reviewers. We now contact people registered on our database but with no personal classification to ask them to log in and complete their personal details, in particular the "personal classification".

We are very aware that we need to retain reviewers' goodwill. Except when necessary, we aim not to ask people too frequently, waiting at least three months between manuscripts, except for asking them to review a revision of an amended manuscript they have already reviewed.

We are therefore trying to expand our pool of reviewers. In December 2014, we launched a form on the journal's homepage, inviting people to volunteer to become a reviewer. Because we wanted to assess both their areas of expertise and their level of seniority and experience, the form is very long—probably much too long. So far, we have had no volunteers, although individuals I meet and invite personally at conferences are often willing to be involved—so I take their business card and we enter their details ourselves. We are also registering all authors of accepted manuscripts as potential reviewers. However, the main function of reviews are to aid the editors in making speedy decisions for the authors. The editors have now been asked to assess reviewers, so that those who take too long or do not respond at all have their reviewer status rescinded.

4.5. Time

One of the biggest challenges has been finding sufficient time. I log in to the submission system almost every day to deal with items I need to act upon. About once a week I check more generally whether there are any unexpected delays, with a more detailed check about once a month. For example, I recently discovered one associate editor had not sent a manuscript out for review nor had made a decision on another manuscript with two reviews; it transpired that the submission system had decided his (unchanged but unusual) email address was not valid, so had stopped sending him email notifications of actions required. This was rectified, but initially only for certain types of notifications.

Every few months I check the status of “revise and resubmit” manuscripts, asking authors who have not resubmitted whether they plan to do so or, if it has been six months, notifying them that we are removing the manuscript from the system. As a new journal, I have been more flexible as there has not been the competition for space that more established journals have. I am also aware that where substantial revision is required, a longer period may produce a good paper that is worth publishing. As we become more established, I will probably shorten the grace period; my letter informing them of the removal of their manuscript also explains that they may submit a revised manuscript as a new submission.

4.6. Funding

Funding is always a thorny issue for journals. *Journal of Transport and Health* is a ‘hybrid’ journal, with most articles available only on subscription and to those in developing countries but with the option of authors, their institution or funders paying for open access. Open access is, of course, particularly important for a wider readership whose employers do not subscribe to the journal, including practitioners. It is generally used by authors who work in institutions that require open access for papers to be considered in the Research Excellence Framework; for reporting studies whose funders require open access; or when publishing articles that authors are aiming particularly for practitioners. Larger institutions have managed to pay for open access, but smaller universities have stricter controls, and Impact Factors seem to be one constraint.

There have been a few adverse comments on social media on the lack of open access for some articles and the cost for authors or their institutions of paying for open access (although the cost is currently less than for some internet-only journals [10]). Elsevier’s response is that no other organisation has been prepared to invest money and take the risk of launching a similar journal and they need to cover their costs and make a profit. The entire first issue was made available as open access for 12 months, and the second issue for 6 months after publication. The editorials for subsequent issues have been made open access.

Elsevier pays me a small honorarium each year. This enables me to attend the main international transport conference, the TRB conference in Washington, in order to publicise the journal and recruit reviewers and authors, and to fund a small amount of administrative support, supplied by a PhD student in our department. He works ad hoc hours, doing tasks that the publisher expects to be done by the editor not the publisher but are not cost-effective to be undertaken by a senior academic and that do not require editorial judgement.

There is no funding for the associate editors nor for the guest editors. The latter each received one copy of the first printed special issue; even I do not receive a free copy of the printed journal; as Elsevier wants me to have the same experience as our readers; most of whom access it online. However; while I use online access (for any journal) for specific articles I need or want to read I personally much prefer printed copies if I want to look at an entire issue. This may be a sign of my age; as; like Helene Hanff [12]; I still buy and cherish printed books and have no e-books.

4.7. Submissions from Low and Middle Income Countries

The journal aims to cover transport and health issues in all countries. In 2014, articles were downloaded in 77 countries, and we received submissions from 27 countries. We are very keen to publish papers from low and middle income countries but have encountered a number of difficulties, primarily from low income countries. Of the relatively few such manuscripts we have received, the standard of the studies being reported is often not high; the content of the paper is often inadequate; and the standard of the English is often very poor. There is an inverse law whereby those who would most benefit from paying for professional help with the English can least afford it. Elsevier has agreed to provide English language services free for up to 10 papers a year where we feel the underlying manuscript is good but the English needs considerable work. Since this offer was made towards the end of 2014, we have not yet received any manuscript in this category: The only submission that really needed drastic improvement to the language was so poor it was impossible to assess.

For those where the standard is adequate but the topic is not new in an international sense (such as a survey of active travel to school in a specific place) or is a basic descriptive piece with little analysis but we want to be encouraging, I have rejected the manuscript but have proposed to the authors that they resubmit it as a short report.

5. Overall Assessment

Despite the plethora of scientific journals, *Journal of Transport and Health* has obviously filled a needed gap in interdisciplinary research in a timely and attractive manner. As well as the impacts of transport on health, we are also receiving submissions on the impacts of health on transport options, which is welcome. Changes being introduced on the editorial side in 2015 include:

- revising the Guide for Authors, for example stating explicitly that authors should search both health and transport databases, regardless of their own specialty;
- revising the standard decision letters to authors and reminder letters to reviewers, as the pro forma letters originally created by the publisher from another journal are too brusque and not appreciative enough;
- trying to recruit more reviewers, so that we can ask individuals less often and reviewers are thus more likely to respond more promptly—but also dropping from the panel those who repeatedly do not respond; and.
- developing a system to identify potential special issue topics but initiating these only one at a time.

In addition to the hard data mentioned in Section 2, “soft” evidence of the timely filling of a niche by this new journal includes the large number of people who have contacted us asking to be involved, whether as editorial board members or reviewers or proposing special issues for the journal; or who have mentioned in routine conversation at conferences or the publisher’s exhibit stands what a great idea the journal is. Widespread “buy-in” is very important for a new journal. As the publisher’s managing editor for *Journal of Transport and Health* has said:

“I must have been involved in 20 or 30 new journal launches in my career and I can’t remember any other new title generating so much ‘buzz’.”

Acknowledgments

I thank Chris Pringle and Selena Gray for helpful comments on an earlier draft; Chris Pringle, the Associate Editors and members of the Editorial board of the *Journal of Transport and Health* for their support and helpful advice; and Craig Knott and Rohit Balan and his production team for administrative assistance with the journal.

Funding

No funding was received for preparation or publication of this paper.

Conflicts of Interest

Jennifer S. Mindell is the Editor-in-chief of *Journal of Transport and Health*. The honorarium she receives is paid into an institutional account and used as described in this article.

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