Editorial

The Continuing Evolution of the American Journal of Tropical Medicine & Hygiene

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It has been nearly 15 years since I had the honor of becoming the seventh Editor of our Society’s journal in 1998. I will step down from this position as of January 2014, and congratulate Phil Rosenthal on assuming this role. It is not possible to acknowledge the many people who have made my tenure as editor so rewarding (particularly the various presidents and council members with whom I have worked), but special thanks go to the Journal’s managing editor, Cathi Siegel. Cathi’s exceptional organizational skills, unwavering commitment to the future of the American Society of Tropical Medicine & Hygiene and keen insight into publication issues large and small have been essential to the Journal’s continuing success. I would also like to acknowledge the dedication of Joe Vinetz who has served as Associate Editor since 2000. Joe’s extraordinary breadth of knowledge, creative mind, and seemingly inexhaustible energy have pushed the Journal to consider methods of communication and scientific and social topics that are essential to inspire the next generation of young people who aspire to improve global health through research and education.

So how has the Journal changed over the past 15 years? Like many other scientific periodicals in 1998, the digital revolution was just coming of age. We adapted quickly (with some bumps in the road), and by 2003 processed manuscripts, conducted peer review, and made editorial decisions electronically. These changes quickly segued into a journal that is now primarily accessed via the internet using a variety of mobile and stationary devices. The Journal contents have not only become more accessible but the amount of information that can be generated by digital format has allowed us to publish more papers. In 1998, a total of 1,867 pages were published in the Journal, whereas in 2012 the total increased to 2,256. During the same period of time, the mother Society made a deliberate effort to broaden its purview from its traditional areas of strength—biomedical sciences, clinical medicine, epidemiology, disease vectors, parasitology, and public health aspects of infectious diseases—to new relatively unchartered territory such as implementation science, social sciences, anthropology, and qualitative aspects of global health. Accordingly, the Journal now considers papers on these topics and has created several section editor roles that require expertise on these subjects. My overall impression in serving as editor for the past 15 years is that it is possible to have the best of both worlds, one being our traditional areas of strength in biomedical and clinical research and the other, newer orientation toward behavioral and social issues. Both are critical to improving global health.

There are undoubtedly challenges in the future. This editorial is being written at a time (November 2013) when United States governmental funding for biomedical research continues to diminish relative to inflation, and the stability of funding is uncertain given the mixed messages from the Congress. This clearly is not a journal-specific issue but can potentially have an adverse impact on the number of manuscripts submitted to the Journal. Like all journals published and owned by scientific societies (particularly one such as ours where the focus is on health issues that disproportionately affect poor people in the developing world), the open access movement is wholeheartedly embraced. Accordingly, we have made this option available to our authors despite the fact that many of our important constituents, i.e., authors living and working in developing countries, have limited financial resources that cannot cover the full cost of open access that is enjoyed by authors from wealthier countries with more generous research support dollars. In addition, predatory journals, for-profit journals, and journals that pay for peer review are issues of the day. Given the outstanding next generation of members and leaders of the American Society of Tropical Medicine & Hygiene, I am confident the Journal will meet these and unforeseen challenges to continue the heritage of a journal that issued its first annual volume in 1952.

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