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The new open access journal on health psychology and behavioral medicine: why do we need it?

Xiaoming Li

Wayne State University School of Medicine

Frank Doyle

Royal College of Surgeons in Ireland, fdoyle4@rcsi.ie

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EDITORIAL

The new open access journal on health psychology and behavioral medicine: why do we need it?

Xiaoming Li^{a*} and Frank Doyle^b

^aWayne State University School of Medicine, Detroit, MI, USA; ^bRoyal College of Surgeons in Ireland, Dublin, Ireland

On behalf of the editorial board, it is our pleasure to introduce *Health Psychology and Behavioral Medicine: an Open Access Journal (HPBM)*, which we hope will become a leading international journal in these areas. *HPBM* will be interdisciplinary and global in scope, offering studies in a wide range of forms including systematic and critical reviews, meta-analyses, ethnographic and qualitative studies, quantitative studies, program evaluation, policy studies, case studies, and research protocols. Individually and in combination, these publications will contribute to the development and integration of psychosocial, behavioral, and biomedical knowledge to promote and maintain health, to prevent, treat, and manage physical and psychological illness, and to identify etiological and diagnostic correlates of health and illness. Discrete but related topics including assessment, prevention, diagnosis, treatment, prognosis, and rehabilitation that contribute to health will be featured. The need for this new journal stems from both recent developments in the fields of health psychology and behavioral medicine, and the recent revolutionary movement of academic publishing into online dissemination.

HPBM aims to provide a forum for two major emerging concepts – integrated science and translational research. Historically, the academic community has developed or regarded health psychology and behavioral medicine as related but separate disciplines. *HPBM* intends to address this by providing a forum to express and encourage integrated material to enhance health knowledge, practice, and policy. However, many previously stated differences between these two disciplines have been challenged in the light of recent developments of translational research and implementation sciences. The primary goal of translational research, defined by Rubio et al. (2010), was to foster “the multidirectional integration of basic research, patient-oriented research, and population-based research, with the long-term aim of improving the health of the public”

(p. 471). While other definitions of translational research exist in the literature (Woolf, 2008), the circular translation of scientific knowledge and discoveries from different perspectives of research (e.g. researchers’ bench, patient’s bedside, and community lenses), the dynamic interplay of various research approaches (laboratory, clinic, or population based), and close collaboration among scholars from multiple disciplines have been the key features of translational research. If we consider translational research the primary force in which to fill our knowledge gaps between research and practice, research and programs, or research and policy, implementation science is another recent force to fill similar gaps. As suggested by Madon, Hofman, Kupfer, and Glass (2007), implementation science is the use of strategies to adopt and integrate evidence-based health interventions and change practice patterns within specific settings. In other words, implementation science is the study of methods to promote the integration of research findings and evidence into healthcare practice and policy. Both translational research and implementation science, with their primary focus on health and illness, have called for knowledge transfer from one setting to the other and called for interdisciplinary approaches to the sciences of health and illness, including health psychology and behavioral medicine. Situated in such a broad and evolving research environment, we believe that a new journal that embraces both health psychology and behavioral medicine will be complementary to many existing, excellent journals in the fields.

We, the Editors, have been contributors, readers, and reviewers to academic journals for over a quarter of a century. So what draws us to the new open access publishing model rather than the conventional subscription system? The global expansion of the internet has provided new opportunities for bringing information to a wider audience than ever before and more rapidly than any print

*Corresponding author. E-mail: xiaoli@med.wayne.edu

technology ever could. We see open access as a means of enabling dissemination of research to the broadest community of potential users, including practitioners and students who may lack access to institutionally sponsored libraries and repositories. One of the key goals of this new journal is to expand shared knowledge across scientific fields, to accelerate multi-disciplinary breakthroughs in research, and to maximize the impact of research by either advancing our knowledge base or benefiting the public. Enabling any reader, anywhere at any time, to find and read all published articles is an essential step toward this aim.

HPBM will be published using the open access publication model, meaning that articles in *HPBM* will be made freely available online to all interested readers leading to the maximum possible dissemination and recognition within the scientific community. All manuscripts submitted to *HPBM* will be subjected to rigorous, double-blind review from at least two expert peer reviewers in the fields (with the exception of research protocols which may be published without peer review with the provision of proof of the external funding and relevant ethical committee or institutional review board approval). Without compromising the high standards of publication ethics and rigorous peer review, one of the goals of the *HPBM* editorial team is to quickly disseminate scientific findings by expediting the review process. Rather than the traditional lengthy review process common in scholarly psychology journals, which often encompasses several rounds of rewriting and revision, *HPBM* reviewers will be asked to identify meritorious and suitable manuscripts quickly and to return brief reviews with recommendations on acceptance/rejections and only short, but constructive comments recommending any improvements the author should make before publication. Accepted articles will enter production immediately on receipt of the final complete version and be published shortly afterwards.

We believe that open debate and scrutiny of practice need to be carried out and *HPBM* will aim to provide a forum for this. We would encourage submissions that challenge and consider controversial issues and promote critical new thinking in the fields. Such recent controversies in health psychology and behavioral medicine serve as good examples and demonstrate both the need for such critical debate and a forum to air such ideas within an open access publication system. A recent debate surrounding the relevance of the popular Hospital Anxiety and Depression Scale (HADS; Zigmond & Snaith, 1983) is a case in point (Cosco, Doyle, Ward, & McGee, 2012; Coyne & van Sonderen, 2012a, 2012b). On 16 January 2013, a check of Google Scholar showed that the original HADS paper had been cited a massive 13,227 times. However, a recent systematic review of 50 studies showed that the HADS has extremely variable factor structure (Cosco et al., 2012). Of particular note in this review was that while studies using both exploratory and confirmatory factor analyses found between one

and four factors, all four studies which used item response theory (IRT) techniques demonstrated that the HADS was a unidimensional scale. Subsequently, a meta-confirmatory factor analysis has since shown that the HADS is best considered a measure of general distress (Norton, Cosco, Doyle, Done, & Sacker, 2012), largely supporting the IRT findings. Such findings surely undermine a huge proportion of psychological research when using the HADS as separate anxiety and depression measures.

Problems replicating psychology studies have long existed. While this perhaps should not be surprising given the nature of psychological or behavioral research, publishing replications, particularly those with non-significant findings, has been a problem. In 2011, Bem (2011) reported in a sequence of experiments the astounding finding that seemed to suggest that participants could unconsciously predict the future. However, while this was subject to much criticism and a failure to replicate the findings (Ritchie, Wiseman, & French, 2012a), what was disturbing was the inability to get the non-significant replicated studies published in top psychology journals (Ritchie, Wiseman, & French, 2012b). Other potential publication biases in the broad area of health research include the heavy emphasis on the western-based studies and the lack of studies from other regions of the world. The health psychological and behavioral medicine literature is not immune to such publication biases. In addition, an enormous amount of academic thinking and planning goes into the creation of a successful research protocol but this is rarely published and thus new researchers have limited access to this important area of academic endeavor.

Can *HPBM* help in these or similar issues? We believe it can and we aim to provide a forum for such controversial re-examinations and for studies from non-western settings to proliferate. The new journal will have an interdisciplinary focus and a global scale, with particular emphasis on research conducted in or across multiple cultural settings, critical thinking, and new research methods from relevant fields. We initially have a set of specific interests which we hope will evolve and expand over time. Our current interests mainly include the following:

- *Interdisciplinary studies* related to health and illness, including those that may not be considered as traditional psychological studies (examples of such research will include those based on public health, anthropology, sociology, social work, policy studies, education, or nursing). We are especially interested in publishing cutting-edge studies from various steps of research (e.g. initial scientific discovery, application of scientific discoveries in patient care or disease prevention, and dissemination of evidence-based practice or programs to real-world settings) in which the existing paradigm is shifted, traditional ideas or notions are challenged, and new tools, methodology, or

technology from other fields are successfully adapted and validated. We are also interested in publishing special issues with topics of high current interest and strong theoretical or empirical implications to the fields.

- *Methodologically sound studies, including those with null findings or failures to replicate previously published studies.* Good quality research is regularly presented at international conferences, yet does not find its way into the established journals. Furthermore, certain scientific findings are often known to a large number of members of the community, not because they are published, but rather because they are presented, or perhaps only discussed, at conferences. This puts early career researchers and non-psychologists at a disadvantage, even though they may be at the cutting edge of their fields. *HPBM* has a role to play in ensuring that such important findings are available to all, including non-psychologists. Such papers are also extremely important for future meta-analytic work, allowing for the proper estimation of effect sizes while eliminating potential publication bias.
- *New technology or analytic models of assessment and measurement related to health and illness.* We are particularly interested in publishing studies with the combination of behavioral and biomedical, self-report, and objective indicators of health and illness. We are encouraging the adoption of established psychometric methods from other areas (such as IRT) to measurement issues in health.
- *Cross-cultural research and research in diverse cultural settings.* With its international editorial board of 20 leading scholars from 13 countries/regions, *HPBM* from its inception adopts a global scale in both its scope and content of the publications. Cross-cultural research or research from different cultural settings is fundamental for us to establish a deeper insight and understanding of the diversity of health and illness. We firmly believe that research from different cultural settings (including those in multiple settings) will not only enable us to understand or verify important universal factors or underlying mechanisms in health and illness, but also is a way to assess how cultural, societal, and environmental variations across the globe can affect health and illness (in terms of both health behaviors and health outcomes).
- *Protocols of funded studies.* Such publications will not only enable the timely dissemination of some cutting-edge and innovative ideas of research, but may also prevent bias in future publications. Such a system is already in place for randomized trials. Often as the studies are large, it is impossible to include all elements of design and measures in more focused papers. This will also battle against the tendency to publish only

those manuscripts with significant findings. Again, publishing protocols of excellence will make the whole science of research design available to both researchers and practitioners and will assist the systematic reviews and meta-analyses to provide a fuller picture of research in the health arena.

HPBM, in alliance with our peer journals, has a clear editorial policy and a firm editorial practice to strongly oppose the practice of duplicate publication or any type of plagiarism. Submission of a manuscript to *HPBM* indicates that the study has not been published anywhere or not been submitted elsewhere for publication. If author(s) are using any part of published paper (in English or any other language), they should give a proper reference or if required they should obtain permission from the previous publisher or copyright holder (whichever is suitable).

HPBM will provide a unique opportunity to enhance the fields of health psychology and behavioral medicine by publishing original high quality research. We are excited with this opportunity to serve all potential authors and readers in this new venture. We hope that you will join us on this exciting and rewarding journey by submitting any methodologically sound studies to *HPBM* for publication consideration.

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References

- Bem, D. J. (2011). Feeling the future: Experimental evidence for anomalous retroactive influences on cognition and affect. *Journal of Personality and Social Psychology, 100*(3), 407–425. doi: 10.1037/a0021524
- Cosco, T. D., Doyle, F., Ward, M., & McGee, H. (2012). Latent structure of the Hospital Anxiety and Depression Scale: A 10-year systematic review. *Journal of Psychosomatic Research, 72*(3), 180–184. doi: 10.1016/j.jpsychores.2011.06.008
- Coyne, J. C., & van Sonderen, E. (2012a). The Hospital Anxiety and Depression Scale (HADS) is dead, but like Elvis, there will still be citations. *Journal of Psychosomatic Research, 73*(1), 77–78. doi: 10.1016/j.jpsychores.2011.12.003
- Coyne, J. C., & van Sonderen, E. (2012b). No further research needed: Abandoning the Hospital and Anxiety Depression Scale (HADS). *Journal of Psychosomatic Research, 72*(3), 173–174. doi: 10.1016/j.jpsychores.2011.12.003
- Madon, T., Hofman, K. J., Kupfer, L., & Glass, R. I. (2007). Public health. Implementation science. *Science, 318*(5857), 1728–1729.
- Norton, S., Cosco, T. D., Doyle, F., Done, J., & Sacker, A. (2012). The Hospital Anxiety and Depression Scale: A metaconfirmatory factor analysis. *Journal of Psychosomatic Research, 74*(1), 74–81. doi: 10.1016/j.jpsychores.2012.10.010
- Ritchie, S. J., Wiseman, R., & French, C. C. (2012a). Failing the future: Three unsuccessful attempts to replicate Bem's "retroactive facilitation of recall" effect. *PLoS One, 7*(3), e33423. doi: 10.1371/journal.pone.0033423

- Ritchie, S. J., Wiseman, R., & French, C. C. (2012b). Replication, replication, replication. *The Psychologist*, 25(5), 346–348.
- Rubio, D. M., Schoenbaum, E. E., Lee, L. S., Schteingart, D. E., Marantz, P. R., Anderson, K. E., ... Esposito, K. (2010). Defining translational research: Implications for training. *Academic Medicine*, 85(3), 470–475.
- Woolf, S. H. (2008). The meaning of translational research and why it matters. *JAMA*, 299(2), 211–213.
- Zigmond, A. S., & Snaith, R. P. (1983). The Hospital Anxiety and Depression Scale. *Acta Psychiatrica Scandinavica*, 67(6), 361–370.