

EDITORIAL

Mission, vision and current development of Journal of Rehabilitation Medicine

MISSION AND VISION FOR JOURNAL OF REHABILITATION MEDICINE

The mission for *Journal of Rehabilitation Medicine (JRM)* is to be a worldwide forum for research aiming to increase knowledge in evidence-based clinical rehabilitation and for strategic discussions within the field of physical and rehabilitation medicine. Clinical studies on rehabilitation in various patient groups with randomized controlled trials (RCT), when possible, as well as cross-sectional and follow-up studies, human functioning and methodological studies and biomedical and rehabilitation engineering studies are to be published. A further goal is to publish at least one scientific review, preferably systematic, or a special report on a pertinent topic in each issue. In addition, Educational Reviews, in collaboration with the European Board of Physical and Rehabilitation Medicine (EBPRM) and the International Society of Physical and Rehabilitation Medicine (ISPRM), are published yearly to support specialist training and continuous medical education. The present issue includes publication of an Educational Review in collaboration with EBPRM and the European Academy of Rehabilitation Medicine (1). Methodological aspects are considered, such as the use of the International Classification of Functioning, Disability and Health (ICF) as a framework for reports, and the use of proper psychometric methodology in treating and reporting data from ordinal scales. In addition, reports using various qualitative methods may be important in highlighting specific perceived problems and the need for rehabilitation interventions.

The *vision* of JRM is to extend its international connections further by being associated with the regional organizations for physical and rehabilitation medicine (PRM) and thereby increasing the scientific contribution and development of various parts of the world. Thus, increased exchange of knowledge and ideas will be promoted. Letters to the Editor, either related to published articles or to express opinion on a current topic, are another means to enhance scientific and professional discussion and exchange. Papers on integrative human functioning and rehabilitation research cover a key area for publication in rehabilitation, but studies translating basic biomedical and behavioural research into clinical applications should also be encouraged. One vision is to enhance contributions from areas of rehabilitation clinical practice for which publications in *JRM* are rather scarce at present, such as health service and economics in rehabilitation, vocational rehabilitation, oncological rehabilitation, physical training in chronic conditions, use of physical modalities, rehabilitation in sports medicine. A considerable proportion of publications in rehabilitation journals either has non-physicians as the first or lead author or is submitted by a multi-professional team. This is in itself encouraging, as team working should be promoted in rehabilitation research as in clinical practice; however, there is a need

to increase the scientific contribution in other ways for PRM physicians. This can be done through courses and publication in methodology specifically related to rehabilitation research and by publishing high-quality scientific papers by PRM physicians as good examples. The rehabilitation journals should, together with the professional organizations, aim to enhance the scientific education and activity of PRM physicians.

A further vision of the journal is to enhance its accessibility, and in that way to try to promote open access to the journal. Thus far we provide open access to all articles 12 months after publication and authors may place a pdf file of their article on the repository or homepage of their department or university after 6 months. To allow for further open access in the future we recently introduced a small page charge on all articles except for Reviews, invited Special Reports and Letters to the Editor, as well as special information from the organization we have connection with. It is also possible to purchase open access immediately or after 6 months.

It is important to note in this context that *JRM* is owned and published by a non-profit-making foundation – without the involvement of a commercial publisher – and rarely carries any advertisements and receives no economic support from outside. The journal is therefore economically dependent purely on its subscription fees. An extremely valuable way to increase open access to the journal is the agreement with ISPRM whereby all their individual members have immediate open access to the electronic version of all recently published articles in *JRM* (in addition to all previously published articles). Thus, all national societies, not least for that reason, should be encouraged to negotiate a flat fee to ISPRM for all their individual members.

DEVELOPMENT OF JOURNAL OF REHABILITATION MEDICINE

In 2001 the name of the journal was changed from *Scandinavian Journal of Rehabilitation Medicine*, due to its increased

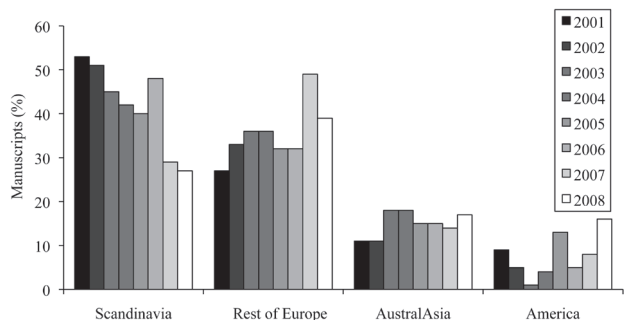


Fig. 1. Distribution of papers published in Journal of Rehabilitation Medicine by region during 2001–2008.

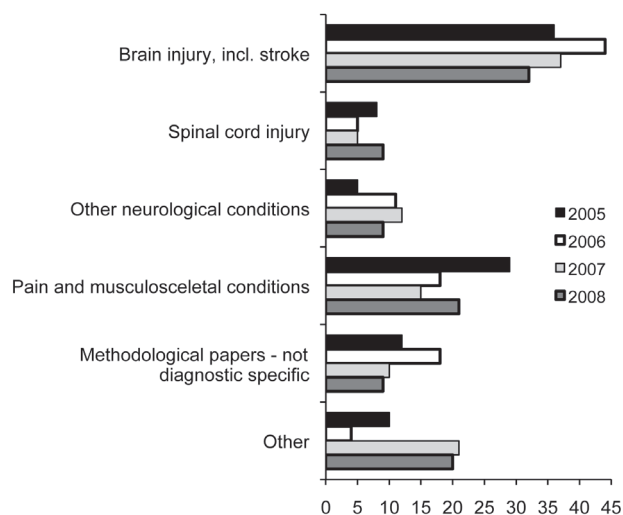


Fig. 2. Distribution in percentage of topics published in Journal of Rehabilitation Medicine during 2005–2008.

worldwide engagement. Already before this date the journal had a large proportion of international subscribers and a considerable part of its content was from authors outside Scandinavia. The *size* of the journal has increased considerably, from 288 pages in 2001 to 894 pages in 2008; in addition supplements have been published regularly. Thus, the number of articles published has increased, from 45 in 6 issues in 2001 to 143 in 10 issues in 2008. The rejection rate has for the period been rather constant and around 65%. The distribution of published papers by region has also shown an international development, although more manuscripts are wanted from outside Europe (Fig. 1).

The dominating *topics* have been brain injury, including stroke, and pain and musculoskeletal conditions, as can be expected in view of the dominating diagnostic groups in clinical practice. There has been a rather similar distribution of topics during recent years (Fig. 2).

The *impact factor* (IF), traditionally calculated as the number of citations during a specific year of articles published during the preceding 2 years divided by the total number of published articles during that period, increased markedly in the middle of the decade and has been rather stable since then, at around 2 (Fig. 3). *JRM* has usually had the highest, or at least second highest, IF for “true general rehabilitation” journals. In recent

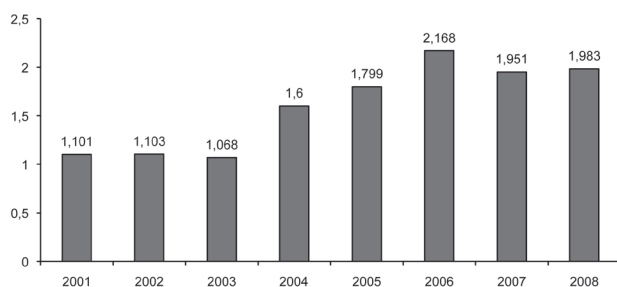


Fig. 3. Impact factor for Journal of Rehabilitation Medicine during 2001–2008.

Table I. *Impact factors (IF) for journals in rehabilitation medicine*

| Journal | 2007 | | 2008 | |
|--|-----------|-----------|-----------|-----------|
| | 2-year IF | 5-year IF | 2-year IF | 5-year IF |
| Neurorehabilitation and Neural Repair | 3.823 | 3.534 | 3.618 | 3.592 |
| Journal of Rehabilitation Medicine | 1.951 | 2.730 | 1.983 | 3.057 |
| Archives of Physical Medicine and Rehabilitation | 1.814 | 2.391 | 2.159 | 2.774 |
| Clinical Rehabilitation | 1.602 | 2.147 | 1.840 | 2.520 |
| American Journal of Physical Medicine and Rehabilitation | 1.557 | 1.761 | 1.695 | 1.868 |
| Disability and Rehabilitation | 1.414 | 1.640 | 1.395 | 1.890 |

years an IF based on 5 years has started to be published. This will provide a more accurate picture of the citation frequency, especially of clinical journals, as it is demonstrated that the citation of such journals reaches its peak after 3–4 years. Table I shows the 2- and 5-year IFs for rehabilitation journals for 2007 and 2008, where *JRM* has the highest 5-year IF of the “general PRM” journals. *Neurorehabilitation and Neural Repair* is a specialized journal and with that background is likely to have higher citation rates and IF. There is some criticism of IF, such as the fluctuation from year to year for rather small journals, the influence of some very highly cited papers, whereas a large number of papers are not cited as much, and the effect of “non-scientific” papers, such as discussion or policy papers. However, the IF is now a well-known and recognized system, and is officially used in ranking journals and evaluating the scientific production for grant applications and appointments. The principal differences between different types and areas of journals must, however, be remembered and taken into consideration so that comparison is made primarily within a specific group of journals. The vision of *JRM* is to maintain and increase its leading role in publication in the speciality, with many high-quality manuscripts being submitted, and with the invaluable and devoted work of the reviewers and the members of the Editorial Board. Many thanks to all of these people for their efforts with manuscripts and for their support of the journal in other ways.

ISPRM AND JRM

JRM became an official journal of ISPRM in 2006, and from 2010 will be the only official journal of this organization. The collaboration has deepened, and an expression of this is the Special Issue (No. 10, 2009) on “Developing the ISPRM”, that has been published recently. Different views on ISPRM and its future are presented. Concerning publication ISPRM aims to foster a common identity through its official journal and a web of related PRM journals and as cited: “If ISPRM decides to follow the model of ESPRM it would need to formalize relationships with individual journals, taking into account the varying scope of each journal and the current level of international competitiveness. ISPRM would accordingly opt for the re-designation of its official journal, the *JRM* for administrative and organizational issues, and the fostering of a truly

international highly competitive journal. It would then formalize its relationship with journals that publish articles both in English and national languages under consideration of their international scientific competitiveness.” (2). Furthermore, it is stated: “Based on its positive experience with the publication of the abstracts from the first Asia-Oceanian Society of Physical and Rehabilitation Medicine (AOSPRM) congress in 2009 and the European Society of Physical and Rehabilitation Medicine (ESPRM) congress in 2009, *JRM* is committed to publishing the abstracts from ISPRM or joint ISPRM/regional societies hosted by an ISPRM member country in the future. *JRM* is also committed to publishing a reasonable number of discussion and policy papers concerning ISPRM’s internal and external policy process, as described in accompanying chapters of this special issue. These papers would be reviewed in order to meet the scientific standards of the journal.”

JRM is looking forward to the possibility of deeper collaboration with regional organizations too, as exemplified by the agreement to publish the abstracts from the 2nd AOSPRM congress in Taipei in 2010 as a supplement. Discussions about how *JRM* could be associated with AOSPRM and the Latin American Medical Association of Rehabilitation (AMLAR)

have already begun, and we also hope to engage organizations in North America in further collaboration. *JRM* will also publish the abstracts from the ISPRM congress in 2011.

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*Gunnar Grimby, Editor-in-Chief
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