

For the editorial team, the *Australian Journal of Primary Health* has three key stakeholder groups: readers, authors and reviewers. Of these, reviewers are the stakeholders least frequently acknowledged. They are, however, critical to the credibility of the journal as a 'purveyor of knowledge' in a world saturated with words. The dictionary provides a definition of knowledge that has a reassuring solidity: it is "assured belief" or "that which is known", "enlightenment, learning" or "practical skill".<sup>1</sup> However, knowledge in the "real world" is a little more problematic. It has been said that "Louis XVI, at the end of the day the Bastille fell, wrote in his diary *Rien*, 'Nothing happened'".<sup>2</sup> It is also said that in the US census of 1990, 10 million Americans refused to "identify themselves in the standard categories. They insisted on being listed as 'other race'", creating a big statistical problem. People's perceptions of themselves were changing.<sup>3</sup> So how do words and events become knowledge, "assured belief" or "that which is known"?

In the publishing tradition journals are considered "as good as the quality of work submitted to them".<sup>4</sup> Each year the quality of work submitted to the *Australian Journal of Primary Health* is getting more robust. The number of papers is increasing, the research quality and the presentation of papers is improving markedly. The papers in this issue illustrate the trend. However, all serious journals acknowledge that papers need to be scrutinized very carefully by people knowledgeable in the field being reported. David Goodstein argues that "peer review is a very good way of separating valid science from nonsense because the referees always know what is going on in their field, know the conventions and directions of thought in their field, and can recognize immediately if something is not following that line of thought".<sup>5</sup> In a field as diverse and multidisciplinary as primary health care, peer review can be as problematic as it is beneficial. In an experiment conducted at the *British Medical Journal*, a peer reviewed paper already accepted for publication was modified to deliberately introduce eight errors before being

sent for another round of peer review. Of the 221 reviewers who responded "none identified all eight mistakes and few caught more than two or three".<sup>6</sup> One reviewer said he was "unqualified to comment" because he lacked the relevant expertise, but nevertheless commented that the paper was "clearly rubbish"! This experiment raises two key points. First, reviewing is a very difficult task, even for people working in the same field as the author of the paper under review. It is easier to identify structural weaknesses or flaws in language than it is to find the errors of fact or even of logic. Second, even well-intentioned reviewers may consider work from a field other than their own "rubbish" if it is guided by a set of unfamiliar rules and conventions. It is beholden on the editorial staff to select appropriate reviewers and then to consider reviews carefully when making decisions about acceptance. The consequences of failure in the journal's quality control processes are too awful to contemplate. Recently, it came to light that a respectable American medical journal published a paper, based on a study in which American, Australian and Canadian women prayed for women in South Korea (who were unaware of the experiment) and doubled Korean women's in vitro fertilization rate.<sup>7</sup> The authors included two apparently inattentive medical researchers (the methodological and ethical flaws were serious) and a lawyer subsequently convicted of fraud.

Reviewing papers for a journal is a voluntary task that demands concentration and careful thought to produce fair and constructive feedback to the editors and the author(s). Traditionally, the names of reviewers are not released to the author to ensure they can speak their minds without fear of retaliation. Consequently, review work is almost never acknowledged. Increasingly, journals are acknowledging reviewers by publishing annually a list of names that constitute the journal's panel of reviewers. Some journals, such as the BMJ, are releasing the names of reviewers to authors. In the BMJ's case, after the change in policy, a significant number of reviewers declined to review, but identification of reviewers had no

effect on the quality of the review, the time taken to complete it, or the recommendation regarding publication.<sup>8</sup> The conclusions from the BMJ are that open review “increased accountability, fairness, and transparency”.<sup>9</sup> The editorial staff of the *Australian Journal of Primary Health* deeply appreciate the work of people who review papers submitted to the journal. We are considering

the options we have to express that appreciation publicly. The experiences and views of reviewers would be appreciated to help us to make an appropriate decision for the journal.

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### Footnotes

- <sup>1</sup> Macdonald, A.M. (Ed.). (1977). *Chambers twentieth century dictionary*. Melbourne: Lothian.
- <sup>2</sup> Anderson, W.T. (Ed.). (1995). *The truth about truth: De-confusing and re-constructing the postmodern world*. New York: Putnam Book, p 2.
- <sup>3</sup> Op cit p 1.
- <sup>4</sup> Fontanaroso, P.B., Glass, R.M., & DeAngelis, (2000). Thanking authors, peer reviewers, and readers – constancy in a time of change. *Journal of the American Medical Association*, 183(15), 2016-2017.
- <sup>5</sup> Goodstein, D. (1996). Every scientist I know has stories of being treated unfairly by anonymous referees. *The Chronicle of Higher Education*, 42(47), B5.
- <sup>6</sup> Anonymous (1997). Methodological progress. *The Economist*, 344(8036), 89-90.
- <sup>7</sup> Guterman, L. (2004). Peer-reviewed paper on pregnancy and prayer may soon be retracted. *The Chronicle of Higher Education*. 50(41), A16.
- <sup>8</sup> Rooyen, S., Godlee, F., Evans, S., Black, N., & Smith, R. (1999). Effect of open peer review on quality of reviews and on reviewers’ recommendations: a randomized trial. *British Medical Journal*. 318, 23-27.
- <sup>9</sup> Op cit