SARCHI Chair’s 1st Year already showing significant Gains for the School of Public Health (SOPH)

Prof Wim Van Damme holds the NRF SARChI Chair in Health Systems, Complexity and Social Change at the School of Public Health (SOPH). In his first year (2013) he launched the SIPHI Programme to build PhD research capacity which helps fast track PhD students at an advanced stage of their studies, awarded two Post Doctoral scholarships, strengthened the working relationship between the School and the Institute of Tropical Medicine in Antwerp, organised staff exchange visits between SOPH and ITM, ran the 3rd international Emerging Voices Programme in Cape Town and engaged in fund raising initiatives.

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<th>Scholarships</th>
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<tr>
<td>Masters</td>
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<tr>
<td>PhDs</td>
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<td>Post Doctoral Fellows</td>
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National and International Partnerships Established

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<th>National Partners</th>
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<td>- University of Stellenbosch</td>
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<td>- Medical Research Council</td>
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<th>International Partners</th>
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<tr>
<td>- Institute of Tropical Medicine, Antwerp, Belgium</td>
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<tr>
<td>- Faculty of Health Sciences, University of Gondar, Ethiopia</td>
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<tr>
<td>- 50 young researchers from across the African continent, as Emerging Voices for Global Health, in preparation of ICASA conference</td>
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SARChI Staff Support

Several academic staff of the SOPH who are completing their PhDs participated in the SARChI capacity development events such as the three-week PhD Workshop and the Emerging Voices programme.

The global health scene is still largely dominated by Northern stakeholders. To actively engage young researchers from the Global South in international academic conferences and to raise their voice in the scientific debate, the Emerging Voices (EV) initiative was kicked off. While originally launched as an initiative from the Institute of Tropical Medicine (ITM) Antwerp, Belgium, it has evolved recently in a joint venture with the University of Western Cape (UWC), South Africa.
The SARCHI Chair mandate to promote the capacity development and through put of SOPH PhD students required working in close cooperation with SOPH academic supervisors to identify areas of support to SOPH academics such as progress levels of students and their research needs that could be addressed through PhD Workshops. During 2013 this effort was done in collaboration with Prof Thandi Puoane and Associate Prof Brian Van Wyk.

Academic colleagues from the Institute of Tropical Medicine (ITM) who work as part of the SARCHI team at SOPH have begun developing research and capacity development collaborations on Health Systems and Complexity with their UWC/SOPH counterparts.

The SARCHI Chair has actively sought funding to promote capacity development over the longer term. As a result of these efforts the Director of SOPH was invited to ITM for discussions on a capacity development grant to promote academic exchange and development. Funding has been secured through ITM for the next three years and SOPH staff will meet and work with their ITM and other counterparts.

**Impact**

The first year of the SARCHI Chair in Health Systems, Complexity and Social Change is positively impacting the work of SOPH in significant and long term ways.

- The concerns of large demand to study at SOPH with slow through-put of graduates and fast tracking of current Masters and PhD students is being actively addressed through student capacity development programmes.
- Academic staff are developing research collaborations with ITM academics and this will increase over the coming years.
- The public health work of Prof Van Damme in countries in the global south is opening a range of potential academic, research and partnership networks for the UWC School of Public Health.
What is the Mandate of the SARChI Chair in Health Systems, Complexity and Social Change

The Chair was created to build the field of health systems research, with a particular focus on understanding and intervening in complex systems. Located within the multi-disciplinary field of Public Health, the Chair builds on and substantially expands UWC’s existing expertise in the public health areas of health policy and systems research, systems level responses to chronic and non-communicable diseases, primary health care and the social determinants of health. Complementing programmatic work that addresses specific health problems and individual elements of health systems, the proposed Chair emphasizes building theory, methods, and advanced research capacity in health systems as complex adaptive systems (Plsek & Greenhalgh, 2001; Rickles, Hawe, & Shiell, 2007; Shiell, Hawe, & Gold, 2008).

The Chair enables the School to make a strong and innovative contribution to two fundamental challenges facing universities and the field of public health alike: firstly, how to build and sustain capacity for analysis that addresses the real world dynamics of complex systems - such as understanding and addressing the “mechanisms of persistent implementation failure” (Freedman, 2011; Pritchett, Woolcock, & Andrews, 2010) and implementing “complex adaptive systems” (Atun, De Jongh, Secci, Ohiri, & Adeyi, 2010). And secondly, how to link technical analysis and expertise effectively with political processes and opportunities to support decision-making around system changes which will sustain performance improvements and particularly, health equity gain.

The Chair will provide an opportunity to further contribute to and build a world-class hub in the Global South for the emerging field of Health Policy and Systems Research (HPSR), which could be described as follows:

“a field that seeks to understand and improve how societies organize themselves in achieving collective health goals, and how different actors interact in the policy and implementation processes to contribute to policy outcomes. By nature, it is inter-disciplinary, a blend of economics, sociology, anthropology, political science, public health and epidemiology that together draw a comprehensive picture of how health systems respond and adapt to health policies, and how health policies can shape – and be shaped by – health systems and the broader determinants of health”


Round Table on Core Competencies for Health Promotion in South Africa

Peter Delobelle

On the 20th of March a Round Table was held at the UWC School of Public Health, with the aim to gather stakeholders from academia, government and civil society working in the domain of health promotion to critically reflect on, and initiate discussion on, the development of core health promotion competencies for South Africa guided by the following questions: ‘Do the current health promotion training programs address existing needs’; ‘which lessons can be learnt from other projects aimed at developing core health promotion competencies and competency frameworks’; and, ‘which health promotion competencies are needed in South Africa’.

The round table was structured around a combination of presentations and interactive group discussion, and introduced by Helen Schneider (Director School of Public Health), who in her keynote presentation reflected on the causes for the changing mortality in our society. The impact of HIV/AIDS, the continued maternal, perinatal, infectious diseases, and the rising burden of non-communicable diseases, together with the high rates of violence and injuries constitute a quadruple burden of disease, which is associated with
several structural and risk factors, including alcohol use, unhealthy diets, unsafe sex, lack of breast feeding, and broader social determinants, such as trade policies and geographic dispensation. Concerted action is hence needed in the fields of health promotion and prevention, guided by intersectoral action and strong local embeddedness (‘think global, act local’).

Suraya Mohamed, Lecturer in Health Promotion at the SOPH, then presented the results of the survey questionnaire sent around prior to the round table aimed at mapping existing health promotion training curricula in the country. The survey assessed the type and level of training (certificate, diploma, degree); the intended audience (practitioners, policymakers, or academia); the format (residential, distance, in-service training); and its content (key domains). All higher education institutions (HEI) reported to offer academic training but some HEI, government and civil society organisations also offer short courses for practitioners. Most institutions offer both under- and postgraduate training in health promotion.

In the ensuing group discussion several issues were raised, including the need to match training with the skills needed in practice; the need for standardization of the profession, for intersectoral collaboration and integration of health promotion in the training of different occupational groups, such as community health workers and medical professionals, in particular given the current roll-out of NHI. Also highlighted was the need to focus on the values of health promotion and skills development required for advocacy. A plea was made to develop training programs in partnership with civil society and strengthen service-learning to upgrade existing cadres of practitioners, and overall, there was agreement that the health promotion profession should be guided by job descriptions and based on acquisition of competencies according to the envisaged level of practice. Curricula should be developed for practitioners in different categories and linked to NQF levels of entry into the profession. Lastly training should also be developed outside academic settings, whilst academic training should be based on real community needs.

In the next session, Peter Delobelle (Lecturer School of Public Health) reflected on the experience of the European CompHP project, a project funded by the EU in the period 2009-2012 aimed at developing a shared vision for health promotion workforce capacity building by developing core health promotion competencies, professional standards and accreditation mechanisms for quality assurance in education, training and practice of health promotion in Europe. The project built on earlier efforts to develop core health promotion competencies and frameworks in different regions, including Australia, New Zealand, Canada, Europe, and the US, and involved a multiple-method phased approach to facilitate consensus-building related to the development of core health promotion competencies. The project was informed by the eight domains of the Galway Consensus Conference Statement (1), which were assessed through extensive consultation in all parts of the world, albeit dominated by Western health promotion experts.

The CompHP project resulted in the development of a core competencies framework (Figure 1 below), which highlighted eleven domains of core competency, including the three health promotion strategies (i.e. enable, mediate and advocate), project cycle management skills (i.e. needs assessment, planning, implementation, research and evaluation), leadership and communication skills, and underpinned by a strong knowledge and values base (2). Although the project was fuelled by the need to create a flexible framework to harmonize the higher education sector and to promote quality assurance in view of the fragmentation of the workforce and varying levels of professional training and career.
development in Europe, several lessons can be learnt from this European exercise for the country and the wider region.

Figure 1. The CompHP Core Competencies Framework for Health Promotion

Hope Corbin, Associate Professor, Woodring College of Education, Western Washington University, then illustrated the use of the CompHP framework in developing the international Masters of Philosophy in Health Promotion at the University of Bergen, Norway. The program specifically aims at training health promotion specialists who are prepared to participate in health promotion practice and research, and to use the results of this research to improve the quality and effectiveness of health promotion action. The program comprises a training of two years’ time and is based on a whole-curriculum approach, including modules which tackle different competencies, such as foundations of health promotion, communication and action, and research & evaluation. The competencies are shown to be universally relevant, but the teaching needs to be adapted to other contexts and the integration of competencies be taken seriously.

Oliver Mweemba, of the Department of Public Health, University of Zambia, then shared his experience with the development of a health promotion training as a specialization track in the Masters of Public Health program. The program is structured around key knowledge areas in the domains of public health, research and evaluation, and policy and practice, including an introduction to the foundations of health promotion, and focuses on determinants of health, needs assessments, planning and evaluation, health promoting settings, policy analysis and public advocacy, communication and social mobilization, and critical perspectives in health promotion in the specialization modules. The latter also include teaching on socio-cultural dimensions in public health, as well as critical and indigenous perspectives in health promotion, which were clearly appreciated by the participants of the round table.

Mbuyiselo Douglas, of the Department of Health Promotion at Walter Sisulu
University, then presented the background to the HPCSA approved scope of practice for health promotion practitioners, stipulated by the Health Professions Act No. 56 of 1974 and endorsed by the Department of Health on 1 November 2013. The scope of practice includes performance on the core health promotion strategies of advocacy, enablement and mediating; on the development of supportive environments; strengthening community actions; health promotion/communication; partnerships for health, and research activities. The ensuing discussion highlighted the need for more discussion and consultation with all stakeholders regarding the definition and approval of different scopes of practice for health promotion practitioners, in order to standardize professional curricula and regulate health promotion entry level criteria.

The last session focused on the identification of core health promotion competencies for South Africa through interactive group discussions. In general, participants agreed with the core health competency domains outlined in the CompHP framework and the Galway Consensus Conference Statement, with specific focus on skills development for negotiating partnerships, community based needs assessments and advocacy & social mobilisation. Attention was also paid to acquiring the necessary communication skills and knowledge regarding the core principles of health promotion. In addition, addressing cultural competency and health literacy of the target community was found to be of equal importance, over and above the core health promotion competency domains identified in the existing frameworks.

In general, participants felt this was a useful workshop, given the need to identify core health promotion competency domains for use in the regional context. Issues were raised regarding the need to identify competency domains for the different cadres of health promotion practitioners, together with the NQF criteria for different entry levels into the profession. Existing core competency frameworks were found to be informative, and local as well as international experience with development of health promotion curricula useful for supporting health promotion training curricula development in South Africa. There was a concern, however, that training programs should meet the need for specific skills in practice, and service-learning should be developed next to academic curricula. Attention for cultural competency and health literacy should also be considered as other, equally important, core competency domains.

References
Glenda Gray, new President of the South African Medical Research Council

A fresh start
The institution that Gray is inheriting, therefore, is a lot slicker, wealthier, and optimistic about its own future than it has been for a long time. Gray believes that she still needs to boost the budget from its projected 2016 level of R648 million ($61 million) to at least R1 billion ($95 million) during her 5-year tenure. She has many grand ambitions, but three feature more prominently in her mind than the rest: she wants to bring more young South Africans into careers in science and medicine; to transform the culture of medical research in the country to make it truer to the communities that it serves; and she is intent on addressing what she calls the “pent-up causes of death”, such as maternal and child health.

South Africa has an ageing cohort of medical research scientists. This is in part because swathes of newly qualified clinicians find better opportunities abroad. The brain drain aside, few of those who receive an MD go on to undertake a PhD. “I don't think we've showcased clinician scientists in South Africa. It's essentially a new profession”, Gray tells The Lancet. Karim, too, talks about the need to inspire doctors to want to do research on their own wards. While he ran the MRC, he visited almost every medical school in South Africa to get to know firsthand the impediments facing researchers. Gray has told him, he says, that she is going to do the same.

Gray's approach to training the next generation of South African medical researchers is flexible. She wants to lend a hand to previously disadvantaged universities, and is willing to provide money or expertise, for example, to help with the writing of grant applications. When Gray worked as a postdoc at Columbia and Cornell Universities in the USA, she says, she learned the importance of having a mentor. And she noted that this part of the teaching process had not, somehow, disseminated to South Africa. Today, Gray personally mentors young researchers in Canada and the USA, as well as in South Africa. “I wish we had a bit more of that, in a more structured way”, she says.

Closely linked to the problem of the ageing cohort of existing scientists, is the question of diversity. Gray argues that unless South African medical research reflects the country's diverse ethnicities, its impact on health will be limited. For example, to best support a nurse managing a labour ward, an understanding of the cultural practices with which the nurse has to interact is necessary. Therefore, to be true to its mission, the MRC needs to transform attitudes among researchers, as well as the way that health care is delivered in South Africa.

Moreover, “I think there are some structural issues that inhibit women from pursuing a career in science, particularly in their thirties”, Gray adds, referring to the commonplace difficulty in South Africa of finding a permanent position after, very often, a string of postdoctoral posts. Although the public sector has made a conscious effort to address gender imbalances, Keren Cooper, a cell biologist at the University of Cape Town and executive committee member of the Association of South African Women in Science and Engineering, points out that there are essentially no statistics on how South African women fair in science, technology, engineering, and mathematics (STEM). “In rural areas, STEM fields are seemingly still seen as a male preserve”, she laments.

On her third priority, Gray is clear about where new research can give health statistics a nudge. Even though child mortality rates in South Africa have decreased thanks to efforts to reduce prenatal HIV infection, and are now knocked back to pre-1993 levels, mortality rates among a segment of infants—those in the first 28 days of life—have remained static for 15 years. This is where health systems research could help. Public health workers need more robust guidelines and procedures, says Gray. The same can be said for the treatment of
tuberculosis. “Yes, we need new diagnostics and drugs, but we really need to understand why our cascade in tuberculosis has attrition at each level: at the level of diagnosis, getting treatment, and completing treatment”, says Gray.

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Faculty of Community and Health Sciences

20 years of Democracy 2014 Seminar Series

During 2014 the Faculty of Community and Health Sciences (CHS) at UWC will be hosting a series of seminars reflecting on the ongoing process of transformation in South Africa through our lenses as health and social sector professionals, educators and researchers.

Seminar for May 2014

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<tr>
<th>Department/School</th>
<th>School of Public Health and Department of Dietetics</th>
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<tr>
<td>Topic</td>
<td>The New Epidemics of the Democracy: Confronting the Social Determinants of Health</td>
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<tr>
<td>Presenters:</td>
<td>Dr D Bradshaw and Dr Victoria Pillay van Wyk: The changing burden of disease: The new epidemics, Prof David Sanders: The politics of under- and over-nutrition, Dr Tracey Naledi: The epidemic of violence and injury.</td>
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<tr>
<td>Each presenter will have 20 minutes for presentation and after the three presentations we will have questions on all 3 presentations together and a panel discussion for about 30 minutes.</td>
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<tr>
<td>Date</td>
<td>Tuesday 27 May 2014</td>
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<tr>
<td>Time</td>
<td>17h00 – 18h30</td>
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<tr>
<td>Venue</td>
<td>School of Public health</td>
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<tr>
<td>Refreshments</td>
<td>Finger Snacks will be served</td>
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<tr>
<td>RSVP</td>
<td>Lynette Martin at <a href="mailto:lmartin@uwc.az.za">lmartin@uwc.az.za</a> Tel: 021-959 2132</td>
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The 20th anniversary of democracy in South Africa is an important moment of celebration and reflection. We live in a complex and contradictory society, where the gains of democracy have been real but the challenges – social, economic and political - appear to grow every day. Even if access to social grants, electricity and housing has expanded greatly, for too many in South Africa, quality of life is a distant dream. How then do we rightly appraise what has been achieved while making sense of the ongoing challenges facing us as a nation? And importantly, how do we prepare our learners and position ourselves as scholars to best engage the constitutional project of social justice and equity in such a complex and confusing world?
The Award, made possible through a grant by The Mauerberger Foundation Fund, honours the former Rector and Vice Chancellor of UWC Professor Jakes Gerwel as a visionary leader who went on to join President Nelson Mandela as the Director General in his cabinet office.

As UWC Vice-Chancellor Professor Gerwel advocated passionately for and supported development of South Africa’s first School of Public Health. He clearly saw the need for UWC to focus on public health practice that led to measurable improvements in peoples’ health and policy that was based on solid science. Over the last few years the UWC School of Public Health has achieved these aspirations.

Criteria for the Award

The Award honours and recognizes Jakes Gerwel’s central role in promoting public health practice and is open to all graduates of the UWC School of Public Health who have demonstrated outstanding work on some aspect of public health. Evidence of influence or impact could be derived from epidemiological or other studies and needs to specify the population that benefited from a specific set of interventions, policies or measures.

Nomination Process

UWC Faculty, students and graduates are invited to nominate people for a prestigious award that will both bring attention to the work of Prof Gerwel and highlight the importance and leadership role of the School. The award is open to all former graduates of the School of Public Health in South Africa and Africa.

Please send your nomination with a letter of motivation. This should include a brief summary (of not more than two pages) of the nominee’s academic performance and a description of their activities and contribution (see criteria above) since graduating, with your name, designation and signature as well the signature of the nominee agreeing to his/her nomination to:

Professor Helen Schneider, Director, School of Public Health at hschneider@uwc.ac.za not later than Friday 30 May 2014.

Selection process

The Selection Committee is comprised of representatives from the Office of Institutional Advancement, the Division of Postgraduate Studies and the School of Public Health. The announcement will be made at a function where the successful awardee will present her/his work.

The Award

The award will be in the form of a financial benefit to the awardee in the amount to be determined annually by the Mauerberger Foundation. The award for 2014 is R50,000 (fifty thousand Rand).
Spam e-mails changed the life of Jeffrey Beall. It was 2008, and Beall, an academic librarian and a researcher at the University of Colorado in Denver, started to notice an increasing flow of messages from new journals soliciting him to submit articles or join their editorial boards. “I immediately became fascinated because most of the e-mails contained numerous grammatical errors,” Beall says. He started browsing the journals’ websites, and was soon convinced that many of the journals and their publishers were not quite what they claimed. The names often sounded grand — adjectives such as ‘world’, ‘global’ and ‘international’ were common — but some sites looked amateurish or gave little information about the organization behind them.

Since then, Beall has become a relentless watchdog for what he describes as “potential, possible or probable predatory scholarly open-access publishers”, listing and scrutinizing them on his blog, Scholarly Open Access. Open-access publishers often collect fees from authors to pay for peer review, editing and website maintenance. Beall asserts that the goal of predatory open-access publishers is to exploit this model by charging the fee without providing all the expected publishing services. These publishers, Beall says, typically display “an intention to deceive authors and readers, and a lack of transparency in their operations and processes”.

Beall says that he regularly receives e-mails from researchers unhappy about their experiences with some open-access journals. Some say that they thought their papers had been poorly peer reviewed or not peer reviewed at all, or that they found themselves listed as members of editorial boards they had not agreed to serve on. Others feel they were not informed clearly, when submitting papers to publishers, that publication would entail a fee — only to face an invoice after the paper had been accepted. According to Beall, whose list now includes more than 300 publishers, collectively issuing thousands of journals, the problem is getting worse. “2012 was basically the year of the predatory publisher; that was when they really exploded,” says Beall. He estimates that such outfits publish 5–10% of all open-access articles.

Beall’s list and blog are widely read by librarians, researchers and open-access advocates, many of whom applaud his efforts to reveal shady publishing practices — ones that, they worry, could taint the entire open-access movement. “I think Beall has taken a brave and principled stand in publishing this, at no small risk to himself,” says Douglas Sipp, an expert in science policy and ethics at the RIKEN Center for Developmental Biology in Kobe, Japan, who studies the open-access movement in Asia.

Beall says that he has been the target of vicious online comments, and last December he was the subject of an online campaign to create the false impression that he was extorting fees from publishers to re-evaluate their status on his list. The Canadian Center of Science and Education, a company based in Toronto that publishes many open-access journals and is on Beall’s list, is now threatening to sue him for alleged defamation and libel. But even some experts in scholarly publishing are uncomfortable with Beall’s blacklist, arguing that it runs the risk of lumping publishers that are questionable together with those that could be bona fide start-ups simply lacking experience in the publishing industry. Matthew Cockerill, managing director of BioMed Central, an open-access publisher based in London, says that Beall’s list “identifies publishers which Beall has concerns about. These concerns may or may not be justified.”
Rising tide

As a research librarian, Beall has been in prime position to watch the dramatic changes that have taken place in scientific publishing since the rise of the open-access movement about a decade ago. In the conventional subscription-based model, journals bring in revenue largely through selling print or web subscriptions and keeping most online content locked behind a paywall. But in the most popular model of open access, publishers charge an upfront ‘author fee’ to cover costs — and to turn a profit, in the case of commercial publishers — then make the papers freely available online, immediately on publication.

The open-access movement has spawned many successful, well-respected operations. *PLOS ONE*, for example, which charges a fee of US$1,350 for authors in middle- and high-income countries, has seen the number of articles it publishes leap from 138 in 2006 to 23,464 last year, making it the world’s largest scientific journal. The movement has also garnered growing political support. In the past year, the UK and US governments, as well as the European Commission, have thrown their weight behind some form of open-access publishing. And scarcely a week goes by without the appearance of new author-pays, open-access publishers, launching single journals or large fleets of them.

Jeffrey Beall

Many new open-access publishers are trustworthy. But not all. Anyone with a spare afternoon and a little computing savvy can launch an impressive-looking journal website and e-mail invitations to scientists to join editorial boards or submit papers for a fee. The challenge for researchers, and for Beall, is to work out when those websites or e-mail blasts signal a credible publisher and when they come from operations that can range from the outright criminal to the merely amateurish.

In one e-mail that Beall received and shared with *Nature*, a dental researcher wrote that she had submitted a paper to an open-access journal after she “was won over by the logos of affiliated databases on the home page and seemingly prestigious editorial board”. But the researcher, who prefers to remain anonymous, says that she became concerned about the peer-review process when the article was accepted within days and she was not sent any reviewers’ comments. She says that last week — several months after her original submission — she was sent page proofs that match the submitted manuscript, and that she still has not seen reviewers’ comments.

Complaints like this prompted Beall to coin the term predatory publisher and to compile his first list of them, which he published in 2010. He now estimates that his zeal for investigating publishers takes up 20–25 hours a week, squeezed in around his day job. Beall says that he is motivated partly by his sense of duty, as an academic librarian, to evaluate online resources and to help patrons to “recognize scholarly publishing scams and avoid them”, and partly by the “private and very positive feedback” he receives from researchers and librarians.

But Beall’s critics assert that he often relies heavily on analysis of publishers’ websites rather than detailed discussions with publishers, and that this might lead to incorrect or premature conclusions. “One of the major weaknesses of Jeffrey Beall’s methodology is that he does not typically engage in direct communication with the journals that he has classified as predatory,” says Paul Peters, chief strategy officer at Hindawi Publishing Corporation, based in Cairo, and president of the Open Access Scholarly Publishers Association (OASPA), based in The Hague, the Netherlands. A set of Hindawi’s journals appeared on a version of Beall’s list because he had concerns about their editorial process, but has since been removed. “I reanalysed it and determined that it did not belong on the list,” he says. “It was always a borderline case.”

Another concern, say Beall’s critics, is that he risks throwing undue suspicion on start-up publishers. “Although rapid launches of many journals may well correlate negatively with journal quality, it is certainly not enough in and of itself to warrant describing a publisher as predatory,” says Cockerill, who is also a board member of the OASPA. “Similarly, some publishers identified on Beall’s list are guilty of poor copy-editing and user-
interface design on their websites,” he says. “Again, this is, at best, circumstantial evidence for problems with the scholarly standard of the material they publish.”

**Buyer beware: A checklist to identify reputable publishers**

How to perform due diligence before submitting to a journal or publisher.

- Check that the publisher provides full, verifiable contact information, including address, on the journal site. Be cautious of those that provide only web contact forms.
- Check that a journal’s editorial board lists recognized experts with full affiliations. Contact some of them and ask about their experience with the journal or publisher.
- Check that the journal prominently displays its policy for author fees.
- Be wary of e-mail invitations to submit to journals or to become editorial board members.
- Read some of the journal’s published articles and assess their quality. Contact past authors to ask about their experience.
- Check that a journal’s peer-review process is clearly described and try to confirm that a claimed impact factor is correct.
- Find out whether the journal is a member of an industry association that vets its members, such as the Directory of Open Access Journals (www.doaj.org) or the Open Access Scholarly Publishers Association (www.oaspa.org).
- Use common sense, as you would when shopping online: if something looks fishy, proceed with caution.

http://www.nature.com/news/investigating-journals-the-dark-side-of-publishing-1.12666

**LIST OF PUBLISHERS**

**Beall’s List: Potential, possible, or probable predatory scholarly open-access publishers**

This is a list of questionable, scholarly open-access publishers. We recommend that scholars read the available reviews, assessments and descriptions provided here, and then decide for themselves whether they want to submit articles, serve as editors or on editorial boards.

We hope that tenure and promotion committees can also decide for themselves how importantly or not to rate articles published in these journals in the context of their own institutional standards and/or geocultural locus. We emphasize that journal publishers and journals change in their business and editorial practices over time. This list is kept up-to-date to the best extent possible but may not reflect sudden, unreported, or unknown enhancements.

http://scholarlyoa.com/

Kashiefa Apollis joins SOPH as the Administrative Assistant for the 2014 Emerging Voices Programme

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