



***AMERICAN JOURNAL OF PUBLIC HEALTH* EDITORIAL BOARD**

REPORT TO THE GOVERNING COUNCIL •

OCTOBER 2022

This Report provides a summary of the activities and accomplishments of the *American Journal of Public Health (AJPH)* for the past year. The *AJPH* is a premier public health outlet for the United States and the world. It is well-known for its high reputation and standards.

In accomplishing its goals the *AJPH* continues to support the vision and mission that were created to guide our principles. These principles provide direction, action and evaluation.

OUR VISION AND MISSION STATEMENTS ARE OUR ROAD MAP

The Mission of the *American Journal of Public Health (AJPH)* is to advance public health research, policy, practice, and education. The *AJPH* will be recognized nationally and internationally as the premier public health journal, being the most utilized source of public health knowledge, practice, policy, and education, resulting in the improved health of individuals and communities

The editorial values of the *AJPH* are editorial independence, the state of the science, diverse, innovative, and provocative viewpoints, social justice, and, quality, timely, accessible, and useful public health information, knowledge and wisdom. Furthermore, the *AJPH* endorses the values of the American Public Health Association (APHA), which include health, equity, diversity, empowerment, integrity, dignity, and knowledge for individuals and communities to forge the future of public health nationally and globally.



THE STRATEGIC PLAN DEFINES OUR PRINCIPLES OF DIRECTION, ACTION AND EVALUATION

The purpose of the strategic plan is to guide the work of the *AJPH* Team (i.e., Editorial Team, Editorial Board, Journal Staff) in achieving the journal's mission and vision. Specifically, the strategic plan will serve to:

- Guide the *AJPH* Team in the execution of journal activities.
- Guide the assessment of the progress of the *AJPH* Team in meeting goals and objectives driven by the mission and vision.
- Assist authors, readers, and other stakeholders of the *AJPH* in understanding the role of the *AJPH* Team in achieving the mission and vision of the journal.

Five imperatives are reflected in the current strategic plan and include:

Strategic Imperative I: Publish the highest quality public health research and advancements in practice to strengthen public health science, policy and practice

Strategic Imperative II: Disseminate journal content to the broadest audience

Strategic Imperative III: Maximize utilization of journal content by public health researchers, policy makers, practitioners, and educators

Strategic Imperative IV: Advise on journal business practices to ensure sustainability of the journal

Strategic Imperative V: The Editorial Board is fully engaged to support the journal

This report is organized by imperative to show progress in each of the 5 areas.

Strategic Imperative I:

Publish the highest quality public health research and advancement in practice to strengthen public health science, policy and practice

RANKING OF THE JOURNAL IN CLARIVATE STATISTICS

Our Impact Factor has increased to 11.561 from 9.308 (Table 1). We are currently ranked 13 of 210 journals in the Public, Environmental and Occupational Health category of the Science Index, and 7 of 183 journals in the same category for the Social Sciences Index of the Clarivate¹ Journal Citation Report. We will continue to strive to increase our impact factor. *Note.* IFs are slow to reflect changes in the citations the journal gets. For example, the IF for 2021 is the ratio of the “citations in 2020 for publications in 2018 and 2019” over the total number of citable items in 2018 and 2019. Any changes that occurred in the journal in 2018 and 2019 are reflected in this year’s Impact Factor.

Table 1—Journal Impact Factor and Ranking, by Year and Index

YEAR	IMPACT FACTOR	SCIENCE INDEX RANKING	SOCIAL SCIENCES INDEX RANKING
2021	11.561	13/210	7/183
2020	9.308	9/203	6/176
2019	6.464	13/193	7/169
2018	5.381	12/185	6/162
2017	4.380	16/180	4/157
2016	3.858	24/176	8/157
2015	4.138	16/172	5/153
2014	4.552	13/162	5/145
2013	4.229	14/160	4/136
2012	3.930	16/158	4/136
2011	3.926	13/157	3/131
2010	3.850	13/140	3/114
2009	4.371	9/122	2/95
2008	4.241	10/105	3/76



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2007	3.612	10/100	2/77
2006	3.698	11/98	2/66
2005	3.566	11/99	2/63
2004	3.241	8/93	2/60
2003	3.363	6/89	2/56
2002	3.279	7/90	9/55
2001	3.034		
2000	3.269		
1999	3.015		

H-Index

The H-Index is an author-level metric that attempts to measure both the productivity and citation impact of the publications of a scientist or scholar. The index is based on the set of the scientist's most cited papers and the number of citations that they have received in other publications. Our 2020 H-Index is 278, up from 264 in 2021, 253 in 2020, and 236 in 2019, which ranks us 3 out of 585 journals for the fourth year in a row. Our overall Scimago Journal Ranking Indicator is 2.409, which ranks us 13 of 585 journals and is a slight increase from 2020, when *AJPH* was 2.284 and ranked 19 of 560 journals. *AJPH* remains ranked within the first quartile (highest ranking) of all journals. Among all journals in this database, the journal ranks #184 of 27,339 journals overall (or the top 0.6%) for H-index and #900 of 27,339 journals overall (or the top 3.3%) for the Scimago Journal Ranking Indicator.

Eigenfactor Score

The eigenfactor score is a metric that indicates the influence of a journal within the field and measures where content is being cited and how often. The greater the score the more influential the journal's content is considered to be. At its core, the score indicates that high impact journals are citing journal material in their articles. For 2021, the journal eigenfactor scores is 0.05040. This score indicates that journal content is being cited often by high-impact journals and therefore remains the top influential journal in the field. Normalized to a score of 1, our eigenfactor jumps to 10.77080, which indicates that studies published in *AJPH* are almost 11 times more influential than articles published in other journals.



Historically, the journal has consistently ranked top four in eigenfactor score since 2014 in the Social Science Citation Index and Science Citation Index, respectively.

AJPH research published in the last 100 years was cited in 9,066 journals. Top citing journals include *New England Journal of Medicine*, *JAMA – Journal of the American Medical Association*, *Lancet*, and *MMWR*.

Strategic Imperative II:

Disseminate journal content to the broadest audience

RSS Alerts

From July 2021 to June 2022, the journal emailed monthly issue alerts to 1.33 million individuals, or 110,801 people per month. Of the 1.33 million individuals receiving email alerts, 257,124 were members and 1,072,488 were non-members. Approximately 34.4% (457,386) of the emails were opened, and 5.0% of people who opened an email clicked on one of the embedded links.

Website Statistics

In FY2022, we had 8 million visitors, a 34% decrease* over last year, who read 2.32 million abstracts and 6.13 million articles (7% increase). Mobile use of the website decreased by 21.8%* to 724,994 mobile accesses during the fiscal year. We averaged 667,710 site visitors per month (34% decrease*).

*The numbers reported here are compared to the Governing Council report provided at the end of FY201. In late 2021, the site reporting algorithm detected a new webcrawler over-accessing external pages of the website, which led to over-reporting of site accesses. After recalculating the FY2021 site visitors, the total number dropped to 7.5 million visitors, which means we had an increase in FY2022. For continuity, we report comparisons to the FY2021 report rather than to the recalculate statistic. The webcrawler was not able to access full-text and PDF files, so that statistics is unaffected.

Globally, the majority of users are from the United States, followed in order by the United Kingdom, Canada, Australia, and India. After North America, most users are from Europe, Asia, and Australia, and Africa.

Marketing Efforts

AJPH is typically promoted at conferences for the North American Serials Group, Special Libraries Association, Pacific Northwest Medical Library Association, South Central Chapter Medical Library Association, North Atlantic Health Sciences Libraries Association, Charleston Conference on Collection Development, Michigan Health Science Library Association, North Atlantic Health Science Libraries, The Mid-Atlantic Medical Library Association Conference, American Library Association-midwinter and annual meetings, Special Libraries Association and Health Tech, Massachusetts Health Sciences Library Network,



Medical Library Association, and the PubMart booth at the APHA annual meeting. *AJPH* is considered an Essential Core Journal for Public Health by the Medical Library Association section on Public Health and Health Administration.

Marketing efforts this year were heavily focused on customer retention, especially as libraries continue to struggle with smaller budgets in comparison with previous years. In addition, we targeted small health institutes and community health clinics, public health organizations and state departments, and hospitals. Globally, we targeted health agencies and hospitals, with special efforts to retain customers in Japan and Asia.

Subscriptions Performance

At the end of CY2021, we had 520 subscriptions vs 561 in CY2020, a loss of 41 subscriptions. We had 561 subscribers in July 2021, with 41 slated to renew subscriptions for the September – August period, most of which were from Canada and Japan. By the end of CY2021, they had not renewed. In March 2022, we learned that it was due to our fulfillment center, and after negotiating all summer, we expect them to return in CY2023.

In August 2022, the journal had 580 institutional subscribers which is 60 more than our final total in 2021. For CY2022, we made the decision to hold our rates and heavily market the decision to current and past customers. Although this campaign was successful, we are planning an increase for CY2023, which is in line with scholarly industry. As in previous years, we will continue to market the journal to subscription agencies and consortia, as well as academic and medical institutes in the United States and globally.

The majority of our subscribers are domestic (60% vs 40% international), and most have online subscriptions or print + online subscriptions vs print-only subscriptions. The print subscription business continues to decline year over year as customers migrate to a digital-only subscription.

Strategic Imperative III:

Maximize utilization of journal content by public health researchers, policymakers, practitioners, and educators

The *Journal* continues to promote articles through various social media channels, which includes the blogs--*AJPH* Talks and Public Health Newswire--Facebook page, YouTube channel, and Twitter feed. These outlets are used to promote individual issues and articles within the *Journal*, highlight articles being



covered by other news outlets, relate content in the *Journal* to current affairs and APHA efforts, and announce new policies, products, and *Journal* features.

The most read articles this past year were:

- “Balancing Consideration of the Risks and Benefits of E-Cigarettes”: Read **35,370** times, published in the September 2021 issue.
- “Racial and Ethnic Disparities in Maternal Mortality in the United States Using Enhanced Vital Records, 2016–2017”: Read **16,295** times, published in the September 2021 issue.
- “Employer-Mandated Vaccination for COVID-19”: Read **12,509** times, published in the June 2021 issue.

The most shared articles this past year were:

- “Balancing Consideration of the Risks and Benefits of E-Cigarettes” published in the September 2021 issue; Altmetric Score: **1081** (ranks 495 of 343,001 articles published around this time).
- “State Abortion Policies and Maternal Death in the United States, 2015–2018” published in the September 2021 issue; Altmetric Score: **741** (ranks 808 of 342,331 articles published around this time).
- “Disparities in Opioid Overdose Death Trends by Race/Ethnicity, 2018–2019, From the Healing Communities Study,” published in the October 2021 issue; Altmetric Score **572** (ranks 1068 of 343,335 articles published around this time).

The most cited articles this past year were:

- “Balancing Consideration of the Risks and Benefits of E-Cigarettes,” published in the September 2021 issue; **66 citations across 11 disciplines**.
- “Covid-19 and the Drug Overdose Crisis: Uncovering the Deadliest Months in the United States, January–July 2021,” published in the July 2021 issue; **58 citations across 7 disciplines**.
- “Disparities in Opioid Overdose Death Trends by Race/Ethnicity, 2018–2019, From the Healing Communities Study,” published in the November 2020 issue; **35 citations across 7 disciplines**.

The most read issues this past year were:



- “Intersectional Invisibility of LGBTQ and COVID-19”: Accessed **83,002** times (September 2021)
- “When Dying Really Counts”: Accessed **49,902** times (Supplement 2, 2021; July 2021)
- “New Frontiers of Environmental Justice”: Accessed **45,242** times (January 2022)

Twitter

We currently have 12,981 (8.9% increase from 2021) followers on Twitter. Our 221 tweets (17.2% increase) this past year were viewed 482,922 times (70% decrease), and 10,180 people (56.2% decrease) have engaged with posted content.

Facebook

On Facebook, we have 17,387 followers (3% decrease from 2021). We posted 191 times (46.3% decrease) on Facebook, and those posts were viewed 123,217 times (44.8% decrease) and engaged by 1,415 people (75.6% decrease).

Podcasts

Dr. Morabia continues to produce the *AJPH* Podcast in both English and Chinese. Since 2015 the *AJPH* podcast has been listened to 133,371 times. Over the last 12 months, it had 24,801 listeners. The podcast continues to be ranked 3 out of 30 for the best public health podcasts (<https://www.mphonline.org/best-public-health-podcasts>).

The most listened English tracks were:

- *AJPH* 8/2021: “Surveillance and Social Justice,” 2,447 accesses
- *AJPH* 9/2021: “Contact Tracing, School Reopening, and Public Health Challenges” 2,041 accesses
- *AJPH* 10-B/2021: “Will Workers Redesign Their Workplaces After COVID-19?” 1,700 accesses

The most listened Chinese track was:

- *AJPH* Chinese Podcast, “Review of the September to November 2021 Issues of *AJPH*,” 1,520 accesses

Media Coverage

The *American Journal of Public Health* continues to be featured, cited or referenced in local and national news coverage from online, print, radio and television media outlets. The media has covered *AJPH* studies with each monthly release of new research and special supplements.

Strategic Imperative IV:

Advise on journal business practices to ensure sustainability of the journal

In FY2022, we published 19 issues (12 regular issues plus 7 Supplement issues), or 599 articles, 301 of which were published as open access pieces. We produced a total of 2,839 pages (2,032 print pages plus an additional 807 online-only pages).

Times from Submission and Acceptance to Publication

Submissions decreased by 12% compared to 2021 numbers. Submissions were 4,402 in FY2021 vs 5,003 in FY2020. Figure 1 presents data from the last 5 years. The pandemic artificially inflated the number of incoming submissions, and as people return to normal work, those numbers are declining.

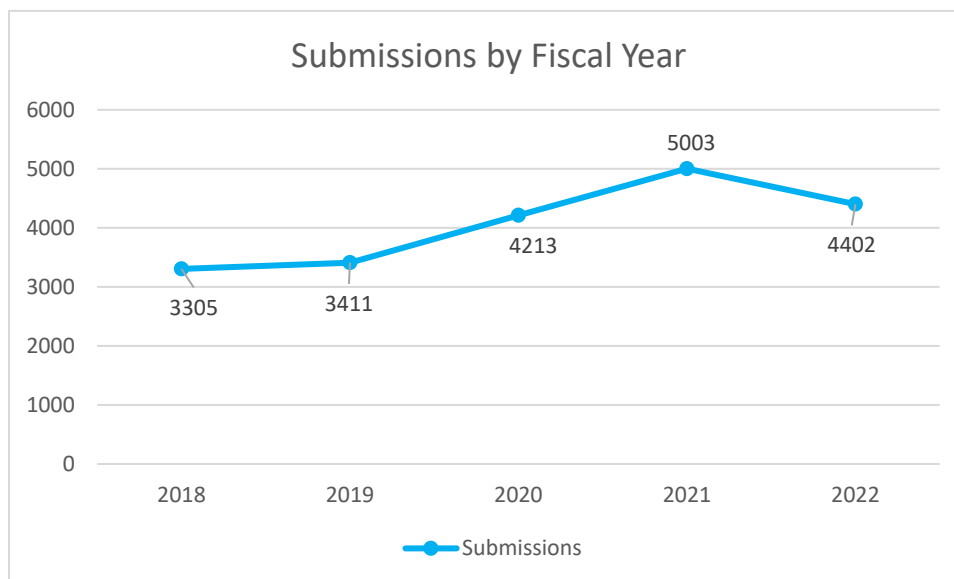


Figure 1—Submissions to the journal, by fiscal year: 2018–2022.

In FY2022 “Accept” decisions numbered 500 of 4,461 decisions vs 587 of 4,912 in 2021. The number of decisions is starting to come down overall, which reflects the decrease in overall number of submissions. The number of accepted papers also declined compared to previous years. Figure 2 provides data from the last 5 years.

The acceptance rate decreased slightly to 11.76% from 11.95% the previous year. The journal Editors continue to be selective about the papers that make it into peer review, and this has kept the acceptance rate stable while keeping other rankings high. Generally, a lower acceptance rate indicates greater selectivity in which papers are published. Figure 3 shows change in acceptance rate over 5 years.

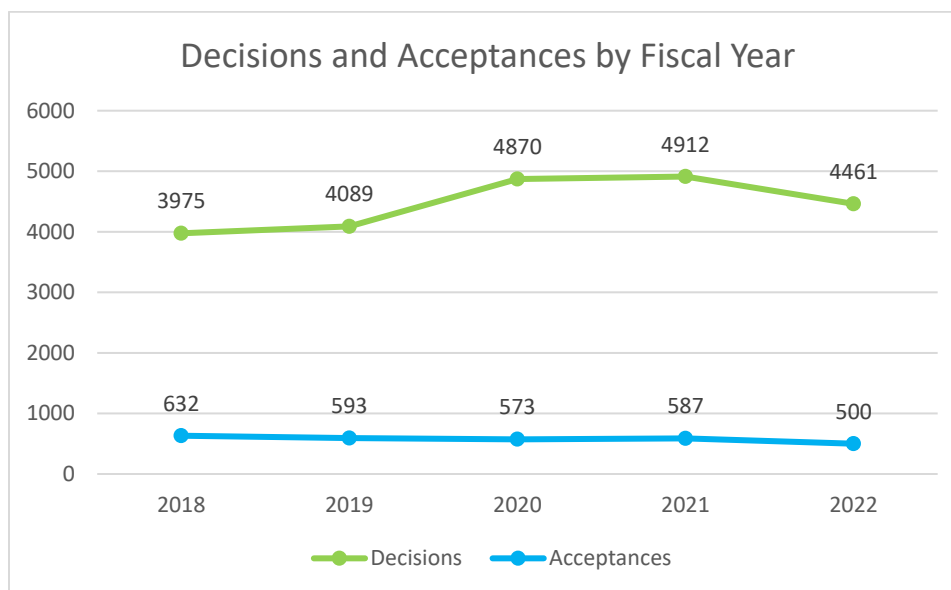


Figure 2—Journal Acceptances and Decisions, by fiscal year: 2018–2022.

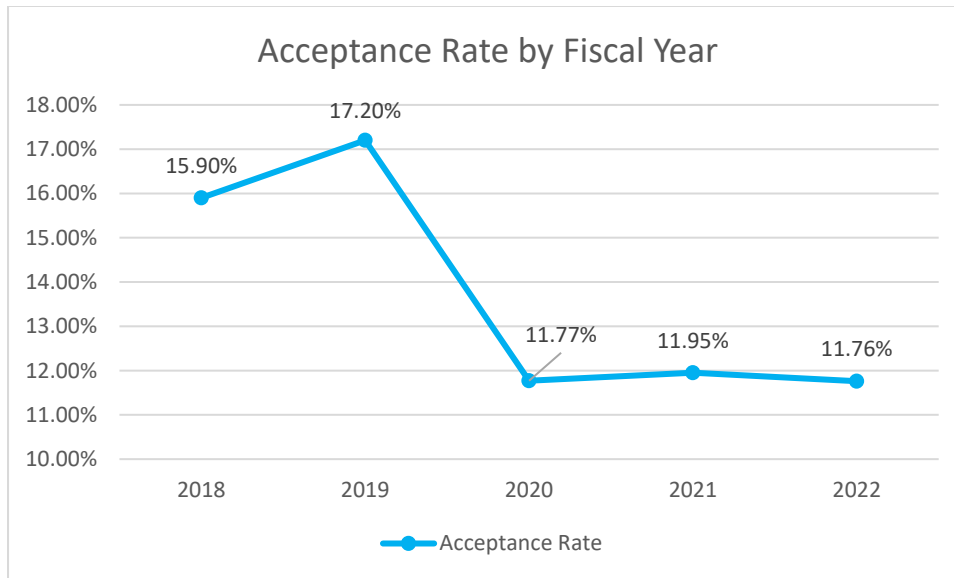


Figure 3—Acceptance rate, by fiscal year: 2018–2022.

The time it takes a paper to move from submission to review decreased to 16.1 days in FY2022, closer to previous years, as compared to 20.0 days in 2021. Figure 4 shows our 5-year performance.

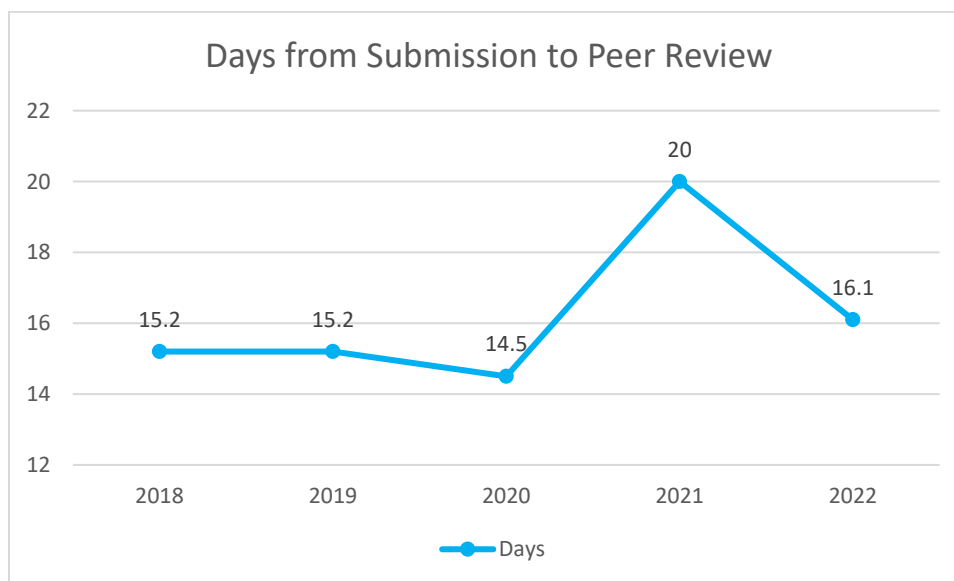


Figure 4—Number of days from submission to assignment for peer review, by fiscal year: 2018–2022.

Peer reviewers have experienced an influx of peer review requests, which has reduced overall availability to conduct peer review. They are declining requests more often, and as a result, it is taking longer for papers to undergo peer review. As a result, time to publication increased this year. Most papers were accepted within 2.27 months in FY2022 vs 1.13 months in 2021, and research papers that undergo peer review took a median time of 4.3 months and 3 rounds of peer review before being accepted. Rejected papers were typically rejected within 5.4 days of submission. Our 5-year performance appears in Figure 5. Finally, time from submission to online publication increased slightly to 5.3 months in FY2022 as compared to 4.45 months in 2021. Figure 6 shows our 5-year performance.

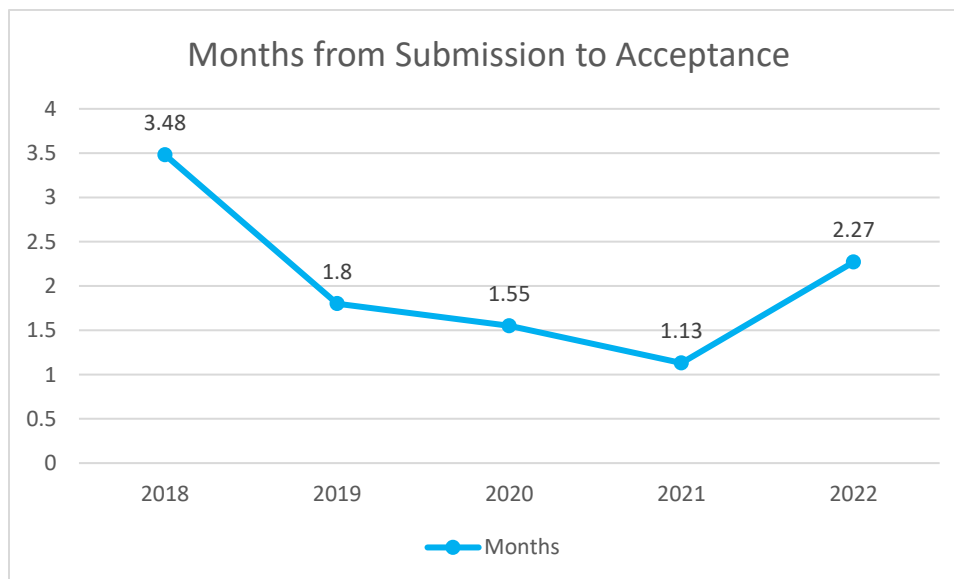


Figure 5—Number of months from submission to acceptance, by fiscal year: 2018–2022.

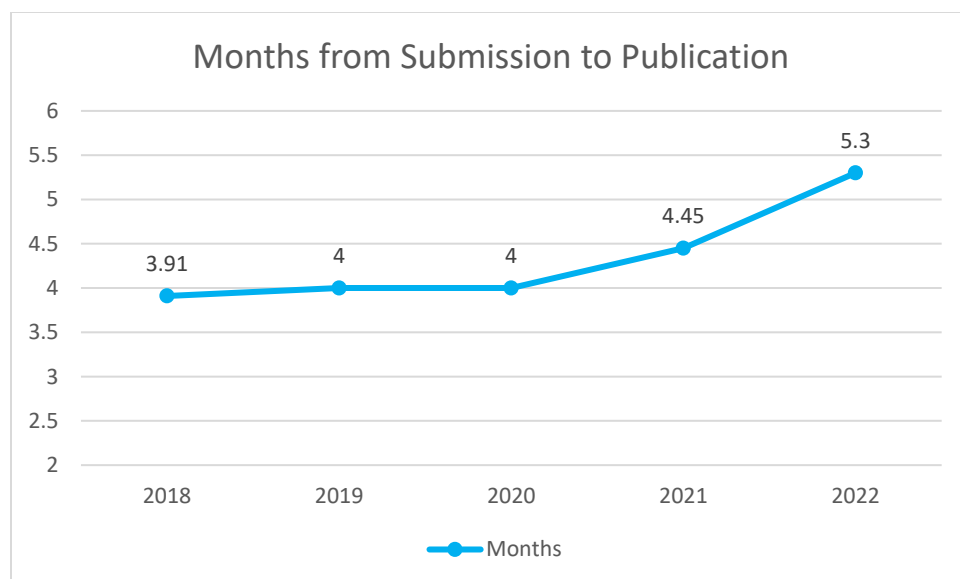


Figure 6—Number of months from submission to online publication, by fiscal year: 2018–2022.

These rates reflect the continued commitment of the APHA staff and the *AJPH* editors and reviewers, who continually strive to position the *AJPH* as the premier public health journal in the world.

Topics Secured For External Funding

AJPH continues its commitment to ensure that science and research are intertwined throughout the publication of state-of-the-art manuscripts.

Topics that have been secured through external funding and published in FY2022 include:

- When Dying Really Counts (July 2021; \$75,000)
- Public Health 3.0 and Beyond (October 2021; \$75,000)
- US Opioid and Pain Crises (February 2022; \$76,000)
- Global Opioid Crisis (April 2022; \$75,000)
- Public Health Nursing After COVID-19 (June 2022; \$120,000)
- Addressing Intersectional Stigma and Discrimination to Improve HIV-Related Outcomes (June 2022; \$107,500)



- Reshaping Contraceptive Access Efforts by Centering Equity, Justice, and Autonomy (June 2022; \$75,000)

Total revenue from these projects is \$603,500.

In FY2023 we plan to produce funded issues on:

- COVID-19: Health Emergency Preparedness in Latin America and the Caribbean (August 2022)
- Ubiquitous Lead (September 2022; \$95,000)
- First 1,000 Days (October 2022; \$75,000)
- RADx-UP and COVID-19 (November 2022; \$75,000)
- Structural Racism and Health (January 2023; \$75,000)
- HIV Equity (March 2022; \$70,000)

Total expected revenue from these projects is \$390,000.

In FY2020, we re-launched the e-Reader program, which will provide mobile-friendly access to full issues of the journal to APHA members for free. Non-members and institutional subscribers will have to pay for access to the e-Reader product. We also implemented an article-level online e-Reader function, which provides an enhanced reading experience for any device and allows the reader to download the article to their device for offline reading in a non-PDF format. Finally, we integrated Dimensions badging for every article to better track citations in other articles and across specialties. We believe these enhancements will continue to make the journal a desirable publishing destination.

Strategic Imperative V:

The Editorial Board is fully engaged to support the journal

In the last year, the *AJPH* Editorial Board has explored ways to facilitate promotion of the journal and ensure member engagement. The Board has focused on four areas: (1) number of board members serving as peer reviewers, (2) monthly promotion of journal material via social media, (3) engagement with APHA sections and members, and (4) advisement on ethical issues (e.g., plagiarism, scientific misconduct). Data are forthcoming, but initial evidence suggests that the number of editorial board



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members serving as peer reviewers has increased substantially. Furthermore, engagement with *AJPH* material via social media has increased. To engage APHA sections to a greater extent, an editorial board subcommittee has been formed to develop a series of webinars based upon section and member feedback. The first webinar was conducted in the Fall of 2020 and addressed the peer review process. The second webinar was conducted in the Fall of 2021 and focused on how authors could promote content through social media. The 2022 webinar focused on practice-based publishing and was well attended. The Editorial Board ideally will continue to provide webinars twice a year moving forward. As these are new areas for the annual report, the Editorial Board has been setting benchmarks and goals this year. Benchmarks and associated goals will be presented in a future report.

The editorial board has been fully engaged with the editorial team in matters of potential ethics violations. For example, an ad hoc sub-committee was formed to consider the possibility of the journal joining the Committee on Publication Ethics (COPE). COPE provides guidance and best practices for management of ethical breaches often encountered by scientific journals. The sub-committee recommended joining COPE, which occurred in 2018, making all COPE resources available to the editorial board and journal editors. Concurrently, a standing subcommittee was formed to advise on potential ethical breaches at the request of the Editor-in-Chief. The committee meets on an “as needed” basis and has advised on more than 10 cases since its inception. A separate subcommittee has also been formed to research how the changing landscape of open access might impact the journal and its operation. This subcommittee surveyed other journals for their rules around open access. The top medical and public health journals were surveyed, all of which have a type of open access option. The subcommittee has recommended that *AJPH* include a few questions on the APHA annual survey of members about their interest and support for open access in addition to supporting the journal Open Access Supplement Initiative and is planning a report to advise the publisher on current *AJPH* policies. Finally, the Editorial Board is investigating the development of course packets for college-level instructors based on content published in the journal. The intent is to pilot test the program in the upcoming year and report on its success and uptake.

The Editorial Board, through its standing subcommittee on strategic planning, continually monitors the progress on the strategic plan and modifying it appropriately to meet the mission and vision of the journal in light of the ever-changing external environment.



From Alfredo Morabia:

From January 1, 2022, through October 3, 2023, we made final decisions on: **2,595** papers; extrapolated to 12 months, this would be approximately **3,460** expected final decisions in 2022, vs 4,303 in 2021; 16.6% of submitted papers were accepted during this period in 2022. Since 2019, we've received **4,171** COVID-related submissions.

From January 2022–September 2022, time to peer review invitation took 16.2 days vs 17.5 days for the same period in 2021. We continue to process manuscripts at a fast rate. Overall, time from submission to acceptance remains low and now takes approximately 1.43 months vs 1.62 months in 2021, and submission to publication is taking 3.6 months vs 4.2 months in 2021.

We have published 7 supplements in 2022:

Supplement 2 2021 – When Dying Really Counts

Supplement 3 2021 – Public Health 3.0 and Beyond

Supplement 1 2022 – US Opioid and Pain Crises

Supplement 2 2022 – Global Opioid Crisis

Supplement 3 2022 – Public Health Nursing After COVID-19

Supplement 4 2022 – Addressing Intersectional Stigma and Discrimination to Improve HIV-Related Outcomes

Supplement 5 2022 – Reshaping Contraceptive Access Efforts by Centering Equity, Justice, and Autonomy

We have signed contracts for 5 upcoming supplements on “Ubiquitous Lead,” “First 1,000 Days,” “RADx-UP,” “Structural Racism and Health,” and “HIV Equity.”

Overall, feedback indicates that the journal has become more attractive for a large readership of practitioners, academics, and policymakers.



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SUMMARY

The Journal continues to increase its reach and impact toward advancing public health while reaffirming our commitment to editorial independence, and other core policies and ethical principles that are part of our core values and ways of moving forward to create a more just society and humanity.

The *AJPH* Editorial Board, the Editors and the Publisher are delighted to be part of the accomplishments of the Journal. We are a collaborative team that continues to advance the *AJPH*'s vision and mission using values of excellence in leadership, science and translation, policy and publication.