

Editorial

AALAS Journals Reader Survey

Survey Conducted from April 16 to May 1, 2009

Survey Results Reported to AALAS on May 1, 2009

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The purpose of this editorial is to disseminate and discuss the results of a readership survey conducted for *JAALAS* and *Comparative Medicine* in 2009. The survey was distributed by email to all silver and gold members, a little over 4,500 people, and generated 306 responses. Review of the results revealed an important design constraint of the survey: it required evaluation of both journals and provided no alternative questions or option to exit the survey if the reader wished to evaluate only 1 journal. This constraint may have affected the assessment of *Comparative Medicine* in particular, because several respondents indicated that they never read and had little or no interest in the content of *Comparative Medicine*. In addition, both silver and gold memberships include a subscription to *JAALAS*, whereas only gold members receive *Comparative Medicine*. Future versions of this survey will direct respondents to different questions if they are or are not readers of 1 of the journals. If they are readers of both journals, the questionnaire will contain questions similar to those below. If they are not readers of 1 of the journals, questions will be designed to probe the reasons. However, knowledge of our membership, together with the content and goals of *JAALAS* as compared with *Comparative Medicine*, makes it predictable that *JAALAS*, which is intended to have a more applied content, will be more widely read and generally useful to our membership. In contrast, *Comparative Medicine* is directed largely at reporting the research that members conduct and support, making it a step removed from day-to-day responsibilities of many of AALAS members. This difference in perception of the 2 journals points to our success in achieving substantial content distinction between the journals. My expectation is that the journals will continue to develop in distinct but complementary directions that will avoid competition for content.

Table 1 summarizes responses to questions related to use of the journals as resources and the general quality of the information published in the journals. A total of 92% of respondents read, to some extent, most or all issues of *JAALAS*, compared with 71% of respondents for *Comparative Medicine*. In terms of quality of content, 77% found *JAALAS* to be above average, compared with 71% for *Comparative Medicine*, and most respondents thought that quality had improved (31% and 22%, respectively) or stayed the same (52% and 51%, respectively) during the past year. A particular reinforcing finding was that 97% reported using information from *JAALAS* in their work at least occasionally, as did 82% for *Comparative Medicine*. Readers scored the 2 journals as equivalent in terms of overall quality of content, but *JAALAS* was viewed as having more workplace relevance and a greater effect on the field (Table 2). Among those readers who are also authors, about 90% cited work from the journals in their publications. In addition, 1 respondent who did not publish used the material in the journals in teaching, and

another distributed information from the journals to the IACUC. Accordingly, we will include questions regarding teaching and IACUCs in the next version of the survey.

Tables 3 through 5 summarize questions designed to identify the types of articles and information that readers find interesting and useful. Original research and review articles were reported to be of most interest in both journals (Table 3). When asked to select topics of interest from a list (Table 4), readers of *JAALAS* expressed high interest in experimental techniques. Essentially equal numbers of respondents expressed low or high interest in management issues. In *Comparative Medicine*, animal disease and animal models of human disease were primary topics of interest. Table 5 lists write-in responses to the above questions. I specifically direct prospective authors to Table 5, with the request that they consider writing and submitting articles on these topics during the coming year. In general, the topics of interest were also those that readers wanted to see more of. However, many of the topics listed as of interest for publication in *Comparative Medicine* are actually content that instead is published in *JAALAS*. This apparent interest in similar content for the 2 journals perhaps arose from the inability of respondents to exit the survey or answer alternative questions if they were not readers of *Comparative Medicine*, but it also could reflect a lack of understanding about the different goals of the 2 publications.

As in most questionnaires, the narrative comments provided by respondents are particularly informative, and I thank those respondents for taking the time to provide this feedback. I will review some of these comments, paraphrasing and combining responses in some cases. Several comments were relevant to both journals. For example, 1 respondent commented on a preference for publication of new information, rather than repetition of old information. I certainly agree with this preference. However, what is submitted limits what we can publish.

Several respondents expressed concerns about the quality of published articles. Quality was viewed as improved over historic levels but not yet where it should be. One perception was that some of the articles perhaps could not get published elsewhere and may be relatively arcane or esoteric in their subject matter, thereby lowering the value and impact of the journal. Related comments were that much of the work reported as original research would more accurately be classified as case reports, experimental groups are not appropriately matched in some studies, essential information is missing from the methods of some articles, and the use and interpretation of statistics is often flawed, leading to unsubstantiated conclusions. I advise authors to consider these concerns carefully from the perspective that true peer review really begins with publication. To at least some extent, our colleagues judge our quality as scientific

Table 1. Summary of responses to questionnaire

Question (306 respondents)	<i>JAALAS</i>		<i>Comparative Medicine</i>	
	Number of responses	Percentage of responses	Number of responses	Percentage of responses
How often do you read or look over articles in each issue?				
Every issue	198	65	145	47
Most issues	82	27	74	24
Some issues	26	8	57	19
Never	0	0	90	10
Overall the quality of printed manuscripts is				
Excellent	66	22	68	22
Above average	168	55	151	49
Average	63	21	79	26
Below average	8	3	5	2
Poor	1	0	3	1
Over the past year, the quality of journal has				
Improved	96	31	67	22
Stayed the same	159	52	156	51
Declined	7	2	10	3
No opinion	44	14	73	24
How often do you refer to or use information from this journal in your work?				
Often	109	36	63	21
Occasionally	188	61	187	61
Never	9	3	56	18
How often do you cite articles published in this journal in your publications?				
Often	30	18	20	12
Occasionally	123	73	130	77
Never (I never publish in this journal)	16	9	19	11
Never (I never publish)	137 (45%)		137 (45%)	

professionals based on our published work.

Like many readers, I too would like to see an increase in the overall quality of the articles we publish. However, achieving that goal is necessarily linked to what is submitted to us for publication. Currently we publish approximately 60 articles annually in each journal, and our rejection rate for both journals is about 40%. This rejection rate is low in comparison with many journals. Quality likely would increase in parallel with numbers of articles submitted, because we then would have a larger pool from which to select and could be more discriminating in our choices. However, increasing both the number and the quality of submitted manuscripts is difficult. Many authors select journals in which to publish their work based on journal focus and impact factor. The impact factors for our journals have remained constant near or below 1. Although our long-term goal is to raise the impact factors, which is largely linked to the number of times articles from a journal are cited, this is a slow process. To some extent a journal must have a high impact factor to attract high-quality submissions, yet it takes high-quality submissions to achieve a high impact factor.

Several respondents commented on the quality of review of published manuscripts, with the opinion that reviewers should scrutinize the articles more heavily. One respondent stated "I often wonder what the reviewers were thinking when they approved a manuscript for publication." Reviews and reviewers definitely vary in quality. The Associate Editors maintain rating scales for reviewers based on the quality and timeliness of their

reviews. Those who rate poorly are less likely to be asked to review again. However, reviewing manuscripts for publication is performed as a professional service; finding 3 reviewers for each manuscript submitted is not easy and in some cases has been impossible. Those who are interested in serving as reviewers are welcome to submit their names, areas of expertise, and citations for a few of their relevant publications to the Associate Editors for consideration as reviewers. The Associate Editors and I value the contribution of the reviewers and appreciate the time and effort our reviewers devote to performing this service, and we will continue to try to improve the quality of reviews and related assessment of both manuscripts and reviewers. However, in addition, I invite those who see problems with published work to alert other readers, as well as reviewers and authors, to perceived flaws by writing letters to the Editor. Such communications are an excellent learning tool for all of us.

With regard to *Comparative Medicine*, the leading concern was the nature of the published articles, as illustrated by the following comments: "The content has become too heavily weighted on molecular biology," "I would like to see fewer articles on genetically modified rodents," and "I look at the titles and abstracts and find myself asking how knowing the information in this article make me a better lab animal vet." *Comparative Medicine* is focused on publication of information related to animal disease and animal models of human disease and thus can incorporate a wide range of topics that are likely to be more related to basic science than to applied veterinary

Table 2. Respondents' perceptions of AALAS journals

How do you rank the journal in terms of	JAALAS						Comparative Medicine					
	Very high (5)	High (4)	Average (3)	Low (2)	Very low (1)	Overall score ^a	Very high (5)	High (4)	Average (3)	Low (2)	Very low (1)	Overall score ^a
Quality of content	40 (13%)	170 (56%)	84 (27%)	9 (3%)	3 (1%)	3.8	47 (15%)	163 (53%)	85 (28%)	6 (3%)	5 (2%)	3.8
Relevance to your work	98 (32%)	140 (46%)	61 (20%)	6 (2%)	1 (0%)	4.1	65 (21%)	108 (35%)	103 (34%)	26 (8%)	4 (1%)	3.7
Impact on the field	88 (29%)	153 (50%)	58 (19%)	7 (2%)	0 (0%)	4.1	75 (25%)	122 (40%)	96 (31%)	9 (3%)	4 (1%)	3.8

^aResponses of "no opinion" were not included in calculating this average.

Table 3. Levels of interest in types of articles

What is your level of interest in the following types of articles?	JAALAS						Comparative Medicine					
	Very high (5)	High (4)	Average (3)	Low (2)	Very low (1)	Overall score ^a	Very high (5)	High (4)	Average (3)	Low (2)	Very low (1)	Overall score ^a
Case reports/studies	51 (17%)	132 (43%)	84 (27%)	23 (8%)	10 (3%)	3.6	44 (14%)	122 (40%)	85 (28%)	11 (1%)	10 (3%)	3.7
Editorials	17 (6%)	79 (26%)	148 (48%)	34 (11%)	19 (6%)	3.1	19 (6%)	87 (22%)	132 (43%)	31 (10%)	21 (7%)	3.1
Letters to the Editor	18 (6%)	53 (17%)	139 (45%)	64 (21%)	23 (8%)	2.9	14 (5%)	56 (18%)	135 (44%)	42 (14%)	23 (8%)	3.0
Overviews	73 (24%)	132 (43%)	74 (24%)	8 (3%)	2 (1%)	3.9	64 (21%)	110 (36%)	81 (26%)	16 (5%)	3 (1%)	3.8
Original research	85 (28%)	134 (44%)	74 (24%)	8 (3%)	3 (1%)	4.0	69 (23%)	108 (35%)	77 (25%)	13 (4%)	6 (2%)	3.8

^aResponses of "no opinion" were not included in calculating this average.

Table 4. Level of interest in subject matter of articles

Subject matter of highest interest to readers	Subject matter of lowest interest to readers	Would like to see more on
<i>JAALAS</i>		
Biology and care of commonly used species (63%)	Biology and care of unusual species (27%)	New experimental techniques (51%)
Anesthesia/analgesia (54%)	Facility management (33%)	Quality assurance (for example, genetic, health status) (37%)
Experimental techniques (51%)	Enrichment (33%)	Facility management issues (34%)
<i>Comparative Medicine</i>		
Animal disease (63%)	New models (47%)	Overview of new research methods (55%)
Animal models of human disease (58%)	Infectious disease (46%)	Animal models of human disease (50%)
	Overviews of established models (41%)	Animal diseases (44%)

Respondents were permitted to check up to 3 topics on a provided list in response to the question "What subject matter interests you most in the journal?" The percentage values indicate the percentage of responses for each topic from the total number of responses for all topics. Subject matter of lowest interest refers to topics with the fewest numbers of checks; however, the question was not asked in this manner. Responses of "other" were low for both journals (7% for *JAALAS* and 8% for *Comparative Medicine*).

medicine or facility management. Content of that type is referred to *JAALAS* for publication.

With regard to *JAALAS*, several respondents were positive about using the journal to obtain continuing education credit, and 1 mentioned that obtaining this credit provides exposure to a variety of current topics and justifies reading beyond one's personal area of responsibility. However, 1 reader explained that when *JAALAS* arrives late, time may be inadequate for reading the articles and completing the questions before the deadline. The staff always tries to get issues to the publisher on time. However, this process can be delayed due to factors beyond their

control (for example, slow responses from authors with regard to approval of final versions, editorial issues such as obtaining permission for use of previously published figures). We will compile information on past and future issue release dates for issues and log reasons for delays. This information may allow us to achieve a better on-time record.

Finally, I thank those readers who provided positive comments. Among those we received, particularly with regard to *JAALAS*, were "eye-catching yet professional-looking," "getting better and better every year," "good information and worth the read," "readable and easy-to-review articles in most cases," "a

Table 5. Other topics of interest in AALAS journals

Other topics of interest	Would like to see more articles on
<i>JAALAS</i>	
Diseases of commonly used species, clinical veterinary studies, disease management, pathology	Clinical medicine, pathology
Surgery, experimental surgery, surgical techniques	Experimental surgery
Infectious disease, and epidemiology	Infectious disease, epidemiology
Animal wellbeing	Laboratory animal welfare and wellbeing, 3 Rs
IACUC processes, regulatory changes, regulatory issues, compliance	IACUC issues, regulatory issues, impact of regulations on research
Large animals (swine, sheep)	Large animals (sheep, swine)
Daily problems in laboratory animal medicine	Optimizing and changing processes of animal care, care of unusual species
Training	Training and education methods specific to animal research
Personnel management	Personnel issues
Ethics	Global aspects of ethics
	Green management, diminishing the waste stream
	Technologic advances
	Bedding products (in-depth analysis)
	Cause and effect of environmental changes on rodents.
<i>Comparative Medicine</i>	
Cardiovascular disease	Immunology
Experimental surgery	Research involving large animal models
	Cardiovascular disease
	Animal models to support veterinary medicine research
	Experimental surgery
	Epidemiology
	Clinical based research
Animal environments	
Care of established models that have unusual needs	IACUC issues
Regulatory issues	Welfare issues of animal model species
Bedding products, quality of products	Enrichment, bedding products and studies, housing
Training and compliance	Daily problems
Anesthesia and analgesia	Anesthesia and analgesia

16 responded that they did not receive or read *Comparative Medicine*.

good read," "well edited," and "improved proofreading (that is, reduction of typographical and grammatical errors)." However, 1 reader stated that "the editors should be replaced, as they do not appear to have the prerequisite skills." This comment is certainly intriguing to me and something I would like to explore. I invite that reader to contact me to discuss this perspective. I am open to listening and learning with regard to all aspects of life, including improving the quality of the service I provide to

the journals. I appreciate feedback without qualification, and will give careful and serious consideration to all suggestions for improving the AALAS journal. You may not convince me of your point of view, but I value all perspectives and want to consider them when making decisions. I view this editorship and the success of the journals as important to our profession, and I remain honored to have the opportunity to contribute to their growth in this significant, responsible, and visible manner.