

JCPP – The Journal of Child Psychology and Psychiatry: a history from the inside

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As the *JCPP* marks its 50th year of publication, this paper revisits the founding philosophy and traces the journey from the first issue through to the present. The history of the *JCPP* reflects the many changes that have come about in the fields of developmental psychology and child and adolescent psychiatry and the changes introduced both to meet the needs and shape the practices of clinicians and researchers. It documents the achievements of the *Journal* and the contributions made by many in enabling its success. As the *JCPP* moves forward it will enjoy the benefits of the major technological and other advances being made in research, in the evolving and expanding knowledge base, and in the modes of publication, as well as needing to manage the associated challenges that will inevitably impact on its future. **Keywords:** History, *JCPP*, anniversary, clinical relevance, impact factor, open access, *JCPP* Editors.

The *JCPP* was first published in 1960 by the Association for Child Psychology and Psychiatry, recently renamed the 'Association for Child and Adolescent Mental Health'. Even as the founders were forming the Association in the late 1950s, it was their intention to publish a journal. As stated in the Editorial of the first issue of the first volume, the primary founding aim of the *Journal* was to 'bring together original papers concerned with the child, from such diverse disciplines as psychiatry, psychology, paediatrics, psychoanalysis, social casework and sociology' (p. 1). This broad orientation was reflected in the phrase '*and the Allied Disciplines*' that was for many years part of the original title. (The '*Allied Disciplines*' component was dropped in 2004 to make it easier to track the *Journal* for purposes of indexing how much of an impact it is making in the research and academic worlds, a topic to which we return later, and for other reasons.) The original intent was also to extend the focus from the individual, then a characteristic feature of psychology and psychiatry practice, to the broader family and social context, recognising that development occurs in interactive social settings and that contributions from the other disciplines, including 'cultural anthropology and animal behaviour' (p. 1), would benefit our understanding. Further, it was recognised that the methodologies employed by the different disciplines represented by the *Journal* varied, ranging from those in which 'a considerable degree of systematic exactitude is possible' to others in which 'reliance has often to be placed on the more subjective evidence of the clinician or skilled observer'

(p. 1). Such diversity was considered and relevant, valuable and should be reflected in the *Journal*. Finally, as no general theory existed that would account for what was then known about psychopathology in children and young people, and as there was no agreement as to what such a theory might look like, the founding Editors asserted that the *JCPP* 'will provide a forum in which serious contributions, inspired by any point of view, will be welcomed' (p. 1). Such communication across the disciplines would foster progress, with 'informed controversy' being essential 'if theory and practice are not to remain in watertight compartments' (p. 1).

The first editors were Elizabeth Irvine, a social worker, Colin Hindley, a medical practitioner turned developmental psychologist, and Emanuel Miller, a child psychiatrist whose ideas profoundly shaped the aims for the new *Journal*. The founding editors also constituted a group representing the main disciplines in what was then called 'child guidance', now known as child and adolescent mental health services (CAMHS) or child and family services, in the United Kingdom National Health Service (NHS). Contributions to the four issues of the first volume well reflect the aspirations of the founders, with different disciplines represented. A number of the papers are data-based, some 'philosophical' and others descriptive, the range covering clinical, developmental, educational and other topics. Specific papers illustrating this diversity include: Miller's discourse on method in child psychiatry; a paper by Alan and Ann Clarke on early deprivation; Anthony and Scott's paper on manic-depressive psychosis in childhood; Lunzer's contribution on Piagetian theory; the use of analysis in a child psychiatric clinic by Klein; a critical review of the literature on separation anxiety by Bowlby; and the sociologist Bernstein's paper on language in social

Conflict of interest statement: MB and LH are former Editors of the *JCPP*. LH is currently Book Review Editor for the *Journal*. MB is the Honorary Treasurer of Association for Child and Adolescent Mental Health, a registered charity, and both authors sit on the Board of the Association.

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processes. Many of the topics published in the first year would not be amiss in contemporary journals.

The JCPP to the end of the 20th century and into the 21st century

Over the early decades, developmental psychopathology, child development and the allied disciplines became increasingly differentiated, encompassing a widening diversity of topics that reflected the growing breadth and increasing depth of interest in these areas. An examination of the cumulative contents of the first 33 volumes of the *JCPP* and the associated author list, compiled in 1993 by one of the then editors, Dorothy Bishop, illustrates this and how the founding principles were expressed in the published papers. Bishop's (1993) monograph provides a detailed breakdown by country of origin of the papers and clinical or other populations studied (e.g., typical development, attention-deficit/hyperactivity disorder (ADHD), emotional disorders, neurological damage). Papers on specific topics (e.g., cognition, language and communication, temperament), those examining other influences and papers using particular methodologies (e.g., experimental, single cases), were also tallied. Her findings clearly reflect both the continuing diversity of contributions encouraged by the founding editors and the changes that characterised thinking and research in the dynamic and evolving contributing disciplines. Also evident was a widening international presence and an increase in contributions from the United Kingdom. There were few papers on biological factors in the aetiology of emotional and conduct disorders, in stark contrast to the number of papers on biological factors in autism, specific learning disabilities and ADHD. Studies of typical development focused on environmental influences, particularly the contribution of social and family factors. Bishop (1993) also found that a preponderance of the intervention studies published used non-pharmacological treatments. Other notable trends included the marked reduction in case reports and descriptive papers, contrasted with the increased emphasis on good quality empirical studies, characterising the *JCPP* as a 'solidly research-based journal' (Bishop, 1993, p. 8). This latter trend both reflects and supports the pressures to publish robust empirical studies that emerged over the period of analysis, dominating the current clinical, academic, research and service environments in many countries.

Since the 1990s, there has been further diversification of *Journal* content, reflecting the emergence of many new developments that have an increasingly important impact on clinical research and practice. These include an expanded compass of topics, for instance: depression, bi-polar and post-traumatic disorders in children; newer 'talking therapies', computer-supported and psychopharmacological

interventions; advances in genetics (DNA studies and quantitative methods), biochemical analysis, the arrival and ongoing developments in brain imaging technology; and the tools of statistical analysis, both the expanded range of methods and the technologies that enable very sophisticated and rapid processing of substantial and complex data sets. These and other developments have had a profound impact on the *Journal's* scope and content and will continue to do so for the foreseeable future. Yet, as we will argue later, despite such advances, the *JCPP* has remained true to the underlying spirit of the intentions of its founders.

Making it all happen

Establishing and developing the *JCPP* over the last 50 years has involved the coming together of several major, interdependent contributions, including: assembling a suitable panel of editors; securing, refereeing and selecting manuscripts; preparing manuscripts for the publication processes; and, of fundamental importance, financing production, timely publication, distribution and marketing. Finding publishers to take on the financial risks of a new publication in the early years was critical. The Association and *JCPP* were fortunate to secure initial financial backing and publication support from Pergamon Press under its then chairman, the late Robert Maxwell (now disgraced because of evidence of fraudulent activity decades later which severely compromised the pensions of many staff in one of his companies). The secure base provided by financial support, publication and marketing expertise from Pergamon and, later, other publishers freed the editors to pursue the aims of the *JCPP* and enabled them to deal with the other tasks that make for a successful international journal. Once set up, the next and unrelenting challenge is maintaining financial viability hopefully with a surplus to provide funding to support the development of the Association's activities. This is a historical and ongoing challenge: commercial survival and development in scientific publishing is still essentially about being purchased by institutional libraries responsive to the requirements of their research and academic staff (although alternative publishing models are being tested – see later). Journals that do not deliver current, relevant and empirically robust material in a publication that is respected by its readership and by potential contributors will not survive in the highly competitive marketplace where institutional budgets for journal purchase are increasingly limited.

One index by which a journal's 'goodness of fit' is judged by potential contributors and purchasers is the standardised 'impact factor', the '*Thompson ISI Citation Index*', a measure derived from the number of times its papers are cited in other journals over a

given period (see Appendix links 1 & 2). Although an imperfect index, the 'impact factor' can have an important effect on the perceived status and quality of a publication, its desirability as an outlet for research papers and its capacity to attract institutional library subscriptions: a high ranking in its field would tend to make it worthy of subscription and a 'good' place in which to get published. The *JCPP*'s impact factor has grown impressively in terms of its absolute value and, more importantly, the salience of its current level when compared with journals publishing similar content. The *JCPP* impact factor went from 2.782 in 2004 to 3.927 in 2005 and to 4.432 in 2007, and its ranking to 2nd among the 52 developmental psychology journals category and 7th among 82 journals in the psychiatry (international adult and child) social science category. Listed for the first time in the Psychiatry Science grouping, it achieved 14th place out of 94 journals. Other indicators of its success include subscribership and the popularity of its content. According to the publishers (Appendix link 3), the *JCPP* has a very substantial international readership with over 6,000 institutions having access to its current contents. Internet access to the archive of every paper published is also available to institutional and other subscribers. Additionally, over 425,000 articles are downloaded every year and special arrangements are in place through the World Health Organisation to provide free online access to institutions in the developing world through Health InterNetwork Access to Research Initiative (HINARI – Appendix link 4). Finally, it is worth noting that the papers themselves represent an international authorship, 1/3 originating in the USA, 1/3 in the UK and 1/5 in Europe, with other contributions from Australia and New Zealand as well as Asia, South America, and South Africa. These figures are indicative of the substantial reach and appeal of the *JCPP*, its attractiveness as a publication for authors and the importance of its contents to clinicians, researchers and others (as well as being another sign of the changes taking place in journal publishing as a consequence of new technologies).

A further determinant of a journal's attractiveness to potential contributors is the rapidity of manuscript processing, a key component of which is the publication lag, the time between the receipt of final copy and publication. Papers published in the *JCPP* are now submitted and commonly processed electronically over the Internet and, if accepted, appear online within two months, with a print version available within approximately six months of acceptance. The processes involved in securing timely publication have to be carefully managed: long delays may cause concern for authors as someone else could publish similar findings elsewhere and papers 'submitted' or 'in press' are less impressive on CVs and research grant applications than papers which exist in hard copy in a respected

publication. In contrast, while the offer of rapid publication in the past could imply a dearth of other material, suggesting unpopularity or poor quality of the publication, the relatively recent advent of advance online (Internet) publication for the *JCPP* means that publication lag is no longer a major issue: online publication is now a recognised alternative form of publishing papers. Placing the accepted (by the journal) paper in the public domain in this way enables researchers to establish that they had 'got there' or had even 'got there first' via the 'gold standard' of a peer-reviewed journal.

In its early years the *JCPP* publication lag was not a concern; indeed there were times when the editors struggled to put an issue together. Whereas the first two volumes went to four issues, in 1962 only two issues were published, followed by a further five lean years of three issues per volume, although there was some growth in the number of pages over the latter period. The *Journal* then began to pick up and various incremental adjustments were necessary to cope with its increasing popularity. Additional pages per issue and an increased number of issues to a volume were introduced as necessary: the *JCPP* has grown from a volume of four issues, 27 papers in 300 or so pages in 1960, to a 12 issue volume (beginning in 2005) that can contain over 130 papers in 1300 or so two-column, larger format pages. The *Journal's* growth has also necessitated an increase in the number of editors dealing with submissions and in other roles. The first panel of editors went from the initial triumvirate to two in 1963 and continued at that level until 1993 when an additional appointment was made. Then, as the number of submissions increased, the editorial team expanded (see Table 1). By 2004 it had become obvious that the main Editorial Panel would need to be increased even further to deal with the increased submissions and expertise required to deal with the breadth of content, leading to the current (2009) panel of eight Editors and an Editor-in-Chief. In selecting its main editors, the *JCPP* had a tradition of having both a psychologist and a psychiatrist as current Editors but with new appointments intended to ensure that the senior editor role alternated between the two professions. This tradition, like others, has inevitably had to change, with choice now dependent on other factors. For instance, being a journal editor impinges on the holder's availability to develop their own interests and undertake the other demands of their employment. Institutional employers, unlike peers, do not regard the cachet of editorship as compensating for the consequent loss of earning capacity for the institution. Such considerations, and the extent to which they can be countered by financial compensation for the institution, have become important considerations for many journals in securing editors.

As part of the editorial complement, an American Corresponding Editor post was established from the

Table 1 Former and current Editors of the *JCPP*

Year	JCPP Editors
1960	C.B. Hindley, E. Irvine, E. Miller
1963	C. B. Hindley, L.A. Hersov
1970	L.A. Hersov, R. Maliphant
1975	L.A. Hersov, M. Berger
1984	M. Berger, E. Taylor
1990	E. Taylor, D. Bishop
1993	E. Taylor, D. Bishop, D. Skuse
1995	D. Bishop, D. Skuse, J. Stevenson
1998	D. Skuse, J. Stevenson, F. Verhulst
2001	J. Stevenson, F. Verhulst, F. Happé
2004	F. Verhulst*; J. Costello; K. Deater-Deckard; T. Eley; F. Happé; D. Pine; A. Rothenberger; E. Sonuga-Barke
2007- 2008	T. Charman*; T. Banaschewski; J. Costello; K. Deater-Deckard; T. Eley; D. Pine; E. Sonuga-Barke; N. Yirmiya
2009	T. Charman*; T. Banaschewski; J. Costello; T. O'Connor; S. Petrill; D. Pine; E. Sonuga-Barke; M. Snowling; N. Yirmiya

*Editor-in-chief.

outset to encourage North American submissions and local processing of the papers in the hope that this would give the *JCPP* an increased salience in what is by far the largest market for English-language journals. Further, the *JCPP*, with its broad coverage and intended international reach, both in terms of readership and origins of submissions, also needs good editorial advisory panels. These work with the Editors to support publication through the *JCPP* by encouraging submissions and highlighting developments worthy of fostering, as well as identifying referees and potential future Editors to ensure a smooth succession. The first Editorial Board (the group directly involved in oversight and policy advice) consisted of notable psychiatrists, psychologists and individuals from other disciplines from Europe and the United States and elsewhere, as did the Advisory Board (a group with a much broader remit), a tradition that remains in both Boards, but both currently with a greatly expanded membership.

Another major factor in manuscript processing is the timeliness of the refereeing or peer-review of submissions, with rapidity of response from referees now being probably the most significant determinant of manuscript processing time. The quality of the peer-reviews is also fundamental to the success of clinical, academic and research journals. Properly reviewing a paper is technically demanding and time-consuming, and expert referees may simultaneously be sought out by several journals. Reviewing is also a voluntary activity and reviewers usually have other full-time commitments so that the efforts of referees and the receipt of insightful and constructive reports are outcomes much appreciated by editors of peer-reviewed publications. While the Editors have the 'final say' about publication, the referee reports typically carry substantial if not the absolute authority in decisions about the acceptability of papers. As journals commonly use two or more independent

referees for the same manuscript, securing good referees and ensuring responses from them in a reasonable time frame has to be a carefully considered and organised process.

Putting together an issue of the journal presupposes the availability of a set of accepted papers to meet the printing and publishing schedules. Being able to meet such deadlines is dependent on the *JCPP*'s in-house publications support staff who manage the day-to-day processes involved, from logging the receipt of manuscripts to ensuring that all runs smoothly to publication. From the first volume of the *JCPP*, arrangements were introduced whereby all final preparations for printing, such as sub-editing, type-setting and publication as well as subscriptions and marketing, are left to the publishers, an arrangement introduced by the original publishers and maintained subsequently. These two systems, in-house and publisher level, release the Editors to concentrate on the core tasks that drive the success of the journal, the selection of papers to be considered for publication, identifying referees, communicating their comments to authors, negotiations with authors and referees about required changes, and the ultimate decision, to publish or not. A Secretary to the Editors dealt with many of these processes in the early days and as the *Journal* expanded, support came from the in-house Publications Team led by a Journal Publications Officer, all employed by the Association whose work is now facilitated by the increasingly sophisticated computerised manuscript management systems.

Meeting the needs of the readership

One of the most important founding principles and a major strength of the *JCPP* is the scope of the independence of its Editors. Although appointed by and accountable to the Association, provided the *Journal* content is consonant with the broad compass of the aims of the Association, and that it is financially viable, the Editors remain free to appoint the Editorial and Advisory Boards, publish or reject submitted papers, commission papers and publish special issues or sections and make other changes and generally guide the development of the *Journal* and its policy. This degree of autonomy has also enabled the Editors to respond as appropriate to the perceived needs of readers and especially Association members through the publication of current clinical and developmental research findings and the introduction of special sections, issues and other resources, detailed below. These enhancements have meant that the *JCPP* has been more than just a medium for the publication of empirical research papers: it is a journal that is simultaneously cognisant of the needs of practitioners, demonstrated by its specially commissioned Annotations/Research Reviews, Practitioner Reviews and other features.

The Annotations, now renamed Research Reviews, have a dedicated Editor who commissions papers typically written by research-active and experienced clinicians covering a range of topics, commonly with immediate clinical applicability and aimed at elucidating one or other aspect of research and clinical application. The first, on the treatment of anorexia, by K. Tolstrup appeared in 1975 and set the pattern. Since then, one, but commonly more, Annotations/Research Reviews have appeared each year. Another feature, Book Reviews covering current clinical and other relevant publications, was published from the first issue onwards, initially without an identified editor but as the number of books submitted for review increased, a dedicated Book Review Editor was appointed. The first Critical Notice, an extended book review accorded to what are considered significant clinical or other noteworthy publications, appeared in 1964. The *JCPP* introduced an issue, the Annual Research Review (ARR), in 1990, comprised of specially commissioned, peer-reviewed papers on single themes or a range of topics brought together by a dedicated commissioning Editor. Authors of papers for the ARR are asked to identify current and future trends in the field and to be selective and evaluative rather than comprehensive. It is intended that each of the topics could be revisited periodically, depending on the rate at which a particular field developed. Practitioner Reviews, a further way of addressing the specific needs of clinicians, were introduced in 1993. These focus on topics that are central to clinical practice, with the series being able to capitalise on the rapidity of publication, enabling topical reviews of important developments. Authors of these Reviews are asked to 'present an account of current concepts and findings with particular reference to the interests of the clinician: the challenge of the series is that of translating theory and research into a concise, palatable and useful form' (Taylor & Bishop, 1993, p. 1283). The first Practitioner Review by Malik and Furman was entitled 'Problems in Children's Peer Relations: What Can the Clinician Do?' A further development aimed at highlighting the clinical implications of papers in the *JCPP* is the introduction in 1993 of an Editorial covering the contributions made by the papers in that issue.

Other enhancements to the *JCPP* introduced from time to time included removable index cards of the Abstracts written in English and subsequently French and Japanese (a pre-computer-age filing resource) and the tables of contents of the *Journal of the American Academy of Child and Adolescent Psychiatry*, enabling readers to keep up to date with developments as reflected in that publication. All such information, albeit in English, is now readily obtained over the Internet or via email alerts from the publisher and is no longer included in the *JCPP*. Also, in an attempt to identify clinically relevant computer software, a Software Survey section was introduced but soon abandoned. Currently, mem-

bers of the Association can access free electronic copies of all *JCPP* papers including the entire *JCPP* back content, from Volume 1, via the publisher's website. Other benefits include free paper copies of the *JCPP* and both paper and electronic copies of some of the other Association publications as part of the membership subscription. Despite these enhancements, Editors have from time to time been taken to task over the 'clinical relevance' of the *Journal* content.

The issue of 'clinical relevance'

We suspect that a coherent definition of 'clinical relevance' may be somewhat elusive and note that the pervasiveness of this view has never been empirically determined. Nevertheless, we recognise that contributing to this perception may be some of the features noted by Bishop (1993) in her study of changes to the *JCPP*, including the reduction in case reports (especially those of a psychoanalytic nature) and descriptive papers, as well as the emergence and dominance of the 'empirical' papers – reflecting, as noted earlier, the *JCPP*'s emergent status as a 'solidly research-based journal'. Such a characterisation could in part be due to less space being given over to papers that are experience or clinical opinion based, features that were more prominent in the earlier volumes and clearly part of the founding vision. Such perceptions could also arise from the multidisciplinary practitioner membership of the Association. The training and experience of many of those who work in child mental health services in the United Kingdom did not, and may still not, include familiarity with the research design, methodology and statistics that feature in the training of other practitioners and in the research communications characteristic of the *JCPP* and similar scientific publications. The adoption by *JCPP* Editors of models of accepted research practice and reporting derive from the evolving culture of scientific research in child mental health that was, and continues to be, reinforced by research ethics committees and funding agencies, as well as the peer reviewers. Whatever the accuracy of the perceptions may be, *JCPP*'s Editors – many of whom were or are active clinicians – have from the outset recognised the importance of communicating current research developments to their colleagues in the wider clinical community and have exploited their freedom to do so by introducing the special solicited contributions described earlier, aimed specifically at the needs of practitioners and intended to complement the empirical papers.

In recent years, the notion of 'clinical relevance' has acquired a tighter requirement, that of supporting practice from an 'evidence-base', although it is recognised that in some areas the evidence might comprise predominantly of 'expert opinion'. Annotations/Research Reviews and Practitioner Reviews,

with their different coverage, were introduced well before the current emphasis on evidence-based clinical practice and combined available empirical evidence and expert opinion to provide a synthesis of topics relevant to practitioners. All such clinician-orientated enhancements to the *JCPP* have been achieved without compromising its core, the research-based clinical papers. At the same time we would also contend that it would be unrealistic and inappropriate for the *JCPP* on its own to attempt to be all things to all clinicians. Instead, its contributions must be seen as they always have been, as part of the overall contribution of the parent Association to meeting the needs of practitioners. The Association hosts several major conferences on clinical topics each year and supports a substantial Branch network in the United Kingdom and Ireland that provides local clinically orientated training and educational events. Other Association benefits to members include publications whose costs could not be met from subscription fees alone and are made possible by the financial success of the *JCPP*; these include *Child and Adolescent Mental Health*, the *Occasional Papers* series and *The Bridge* newsletter. These different strands of activities and publications together reflect the aims of the Association and constitute its contributions to meeting some of the needs of its academic, research and clinical practitioner membership (see Appendix link 5).

Looking to the future

Like much other paper-based publishing, scientific journals in all disciplines are going through major changes. These are driven by advances in information technology, with a significant impact on the publication process, distribution and the financial models that underlie such activities. Conventional commercial publishing, for understandable reasons, 'restricts access' to journal content to those who have either a personal subscription or access through an institutional subscription. Nevertheless, such restrictions exist in a context in which free and ready access to academic and research papers and clinically relevant publications is essential to meeting the needs of clients in clinical settings and to progress in research and academic disciplines. In recent years, an alternative model, 'open access', has risen to prominence. In this model, a paper is submitted to an open-access journal and, if accepted following peer reviews, the author (or, for example, their grant-giving body) pays for its publication and the paper becomes freely available immediately in electronic form over the Internet. According to the *Directory of Open Access Journals* there are, at the time of writing, over 3,500 journals publishing in this manner or in 'hybrid' form, the latter a conventional subscription journal in which some of the papers are open access, their cost of publication

having been paid by the author (Appendix link 6). The financial viability of the open-access model still needs to be demonstrated (Bulter, 2008).

The continued use of paper-based publication is another issue that needs actively to be reconsidered as a consequence of the increasingly wider availability of rapid access to the Internet and its almost ubiquitous use by the research, academic and, increasingly, clinical communities. With ready access to computers and powerful software that enables readers to search for, read, annotate and store electronic copies of articles, the benefits and disadvantages of paper compared with those of electronic publication need to be kept under constant review. For instance, it is today easy for those needing access to journals to read the papers online. Copies can also be downloaded and stored on a personal computer. Several hundreds of articles can also be stored on cheap, small portable electronic storage devices that will then allow the documents to be read on any computer at the user's convenience. The advent of portable electronic books, now increasingly available as hand-held paperback-dimensioned devices that simulate the experience of ink-on-paper pages and page turning, will also change the way users get access to the information they need. Electronic publication also has additional advantages, including links to other resources such as videos, either within the electronic article itself or to material on the Internet. While current users of printed material may deride such changes, we are clearly in a transition period, coming to terms (or not as the case may be) with the major changes brought about by these technological advances. Upcoming generations will be more used to electronic forms of communication and information access, and may well be less convinced of the benefits of paper. A further and increasingly important set of considerations concern the substantial environmental, energy and financial costs incurred in providing paper copies to a wide national and international readership: paper manufacturing (trees, transport and chemical processing), other printing materials, production, binding, packaging and distribution all have a substantial environmental impact, likely to be much greater than the cost of electronic publication and distribution. Reducing or even eliminating the use of paper-based publications will also likely have an adverse impact on employment, with other individual and social ramifications. Or, in relation to scientific periodicals for instance, institutional libraries provide the funding and act as the gateways for their staff to gain access to the virtual publishing world hosted by profit-making commercial publishers: open access does not require such intermediaries. However, given just the non-social cost considerations, the present paper-based publishing culture may well lose its dominance, if not disappear. Major journals published by other associations already have an 'electronic only' subscription option

for their members/readers. The *JCPP* currently straddles both the conventional and electronic worlds, with further involvement in the new developments and possible changes under active review.

Concluding comments

In concluding, we note that since its founding just about everything of the *JCPP* that could be changed has been: the title, the 'look' of the cover, the page size and structure, the frequency of publication and publication processes, the nature and range of its content, the Editors and size of the editorial team, the Editorial and Advisory Board memberships, publications support staff and the publishers! Given that the *JCPP* was conceived in very different clinical, academic, research, technological, publication and other environments, it is appropriate to ask if the vision of its founders is still relevant in this different world. In one sense, the answer is, fortunately, an unequivocal 'No!' Being an all-encompassing publication attracting and publishing papers from all the key multidisciplines relevant to the mental health needs of children, young people, and their families and carers has long been unrealistic. Such is the proliferation of relevant theory and research that no single publication could successfully encompass such a broad vision in today's highly differentiated 'niche publication' market. But in another sense, the answer is a firm 'Yes!' The overarching intention of its founders was that the *JCPP* should publish quality material that contributes to the enhancement of clinical practice and, through that, help respond to the needs of service users. This purpose has, we believe, consistently driven editorial policy, has guided the transformation of the *JCPP* over the past 50 years, and has done so successfully. This is evidenced by the significant indicators of its ongoing commitment to, and its achievements in, publishing quality systematic research, and its additional unique, practitioner-orientated content. The *JCPP* continues to drive and affirm these aims in the context of major advances in the understanding of child and adolescent development and psychosocial well-being, in healthcare policy, information technology and unforgiving 'market forces'. It has also been able, in our view successfully, to use the clear framework set up by the founders to guide its selection of content, determine policy, and most importantly, give the Editors discretion to develop the *Journal*, guided by their clinical and research expertise. This base has enabled the *JCPP* to maintain its relevance, enhance its status as a publication within its niche and generate the income that has allowed it to continue and, at the same time, to contribute substantially to the development and viability of the Association.

As former Editors, we are acutely aware not only of the challenges and demands of the role, but espe-

cially of the appreciable and valued contributions of many people – the developmental and clinical researchers who submit papers, the referees, members of the *JCPP* Boards, the ACAMH Publication Officers and teams, past and present, Wiley-Blackwell, the current publishers, and their predecessors, and of course, those Editors who came before and our successor Editors – all of whom have enabled the *Journal* to advance and flourish. May we presume to speak on behalf of all Editors and take this opportunity to thank all these individuals and organisations for their contributions to the success of the *JCPP*? And to say to the current and future Editors, those working with them now and who will do so in the future, that we offer our hopes that the *JCPP* will continue as a key resource for clinical and developmental researchers. In doing so, it will meet some of the needs of practitioners and, through them, remain responsive to the needs of children, young people and all those involved in helping them.

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Appendix links

1. <http://scientific.thomson.com/free/essays/journalcitationreports/impactfactor/>
2. http://en.wikipedia.org/wiki/Impact_factor
3. <http://www.blackwellpublishing.com/journal.asp?ref=0021-9630>
4. <http://www.who.int/hinari/en/>
5. <http://www.acamh.org.uk/>
6. <http://www.doaj.org/>