

Factors of impact (size and the way it's used)

Welcome to the third issue of the 39th volume of the *Australian Journal of Advanced Nursing (AJAN)*. This issue marks the 11th since the Australian Nursing and Midwifery Federation (ANMF) relaunched *AJAN* at the end of 2019. While we won't quite cap off a full three volumes until the end of 2022, I wanted to share some good news with our readers and didn't want to wait. I was pleasantly surprised to see that *AJAN*'s Impact Factor in 2021 has recently almost doubled to 1.206, up from 0.647 (see Figure 1) with a Five-Year Impact Factor of 1.311.

I thank our entire journal team and Editorial Board for their efforts to grow and promote *AJAN* and want to especially thank our dedicated peer reviewers and editors whose work and insights are vital to the operations of the journal. I also want to thank and congratulate our authors who made the decision to publish in *AJAN*. This new high watermark is certainly an excellent recognition of the journal and the quality and appeal of our authors' work. It's important however, to recognise that there is more to quality and value in research than a higher Impact Factor. Indeed, Clarivate Analytics also publishes a range of other metrics, and we still have a lot of work ahead of us to ensure the continued success of the journal over the coming years.

To move beyond measuring journals against one another and on to broader notions of impact and value; while it's always nice to see another citation or jump in a metric, *AJAN*'s mission is to inform and empower nurses, midwives, and other health professionals to improve the health and wellbeing of our community. Bibliometrics are all well and good, and it's understandable that universities, academics, and publishers would seek to evaluate their outputs, but I don't imagine that patients, community members, and the frontline workforce across the healthcare and related industries could care less about citations if the quality of the care they give or receive, or the safety of their workplace is no different.

Ensuring that research is impactful and valuable is clearly more than just about publishing and getting citations. Of course, the results need to 'get out there' and citations are one way of evaluating how many others have found and used the work in their own publications, but this is just part of the story. For example, unless published in another journal, the citation of published evidence in a clinical guideline used by nurses or midwives doesn't contribute to Impact Factors. Likewise, evidence laid out in reports or other grey literature will not be counted in an Impact Factor but might

be immensely influential in terms of policy and the way healthcare is delivered. Although there are other means of quantifying 'impact', for example through Altmetric Attention Scores that measure the volume and reach of a particular research output, these again, are not necessarily an indicator of the quality or value of the evidence.

The real value and contribution of research links all the way back to clear identification of the topic of study, where it is important to select and pursue a topic that is genuinely meaningful to those affected. Through rigorous and quality conduct and reporting of the research, outcomes and evidence can then influence, inform, and guide policy, practice, and future research. While the reputation of where that work is published might provide insight into the degree to which a journal adheres to best practices in terms of review and publishing, it doesn't necessarily connote quality or impact; a very good journal can still publish poor research in the same way that a journal with a poor reputation can publish papers of excellent quality. This highlights that a journal's Impact Factor doesn't necessarily relate to the individual quality or value of individual papers. Similarly, many citations to a single paper doesn't directly reflect real-world value or impact.

It is important to remind ourselves why we do research in the first place and to consider whether we are focussing on the most meaningful factors. This is especially important given the competing demands that are carried by the health workforce. From my discussions with busy clinicians, undertaking research while also working in a direct care role is immensely challenging, even if the main barrier is simply having enough time and headspace while managing patient care. Publications and citations are great, but a focus on volume and bibliometrics can be a distraction from where the real value of research lays; in guiding and influencing sustainable changes that result in people living healthier, safer, and more rewarding lives.

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Peer-review disclosure

This editorial has not been peer-reviewed