



# Guest editorial

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One of the aims of *Australian Infection Control (AIC)* is to provide a forum for the communication of new ideas and practices, the results of investigations and so on. Through it, Australian infection control practitioners can overcome the 'tyranny of distance' and create and strengthen their identity as a scientific community. In addition, *AIC* helps disseminate the work of the Australian infection control community at an international level. In my view, infection control practitioners in this country are asking important questions about practice, roles and processes that put us at the forefront of knowledge development in this new and growing discipline.

That said, the lifeblood of any journal is the flow of ideas and knowledge in the form of papers from the community it serves. Without a volume of papers that creates a continuous cycle of review, consideration, revision (sometimes) and publication, a journal loses its energy and the community is in some way diminished. So, as members of the Australian infection control community, we can benefit from the journal but also have an obligation to maintain its quality and diversity through our contributions.

People have many reasons for not writing for the journal and, while I cannot discuss all of them, there are a few I would like to address. One is the review process itself. Since *AIC* became a refereed publication, all papers submitted undergo blind review by two or more people considered experts on the topic concerned. This enables the journal to achieve and maintain a high standard of credibility. While the novice author may find the process daunting, the advantages are considerable. Reviewers provide valuable feedback, enabling authors to correct weaknesses and refine their papers, thereby enhancing the standard of their publications. If your paper is accepted for *AIC*, as its author you can be confident of the rigour and relevance of your method/argument/discussion.

Another reason for not writing is the perception by some that the journal is interested in 'scientific' papers only. This is true to some extent, but the real impediment is the lack of a common understanding of the meaning of 'scientific'. It is

important not to confuse 'science' with a big 'S' – that is, wet lab or other experimental processes, with 'science' with a little 's' – that is, a systematic approach to the formulation of knowledge. Thus, the term 'scientific' covers a range of approaches to knowledge development, and a scientific paper is developed from a reasoned and well-argued position, one that results from research, an idea or a practice innovation.

Because *AIC* is new on the refereed journal scene, its standing may be seen as not sufficiently strong for researchers and clinicians trying to build a profile. This brings me back to my earlier point about the quality of work emanating from Australian infection control practitioners, who are taking the lead in thinking about practice in the specialty. Our postgraduate programs are training infection control clinician-researchers to identify real issues in infection control practice, conduct research into those issues and, through publication, promote evidence-based practice. What better way to launch our work than through an Australian journal? When we publish in *AIC* we promote the journal as the vehicle for dissemination of leading ideas in the industry.

A further reason for not writing is a lack of material to write about – the 'I have nothing to say' factor – but a journal article can take many forms. For instance, it can reflect your informed and considered opinion and include such things as a letter to the editor, a response to a published article or a book review. A full article, which presents an argument for a place within the existing body of knowledge, requires a more rigorous approach; it could be a case study report on best practice, a discussion paper, a literature review with recommendations for practice or a research report.

Finally the reason for not writing that is most difficult to address is 'no time'! Those working in health care in the current economic climate do indeed face a workplace situation in which more is asked for and less supported. Often, it is difficult to keep up with journal reading, let alone contributing to one. But, you can always squeeze a bit more out of a busy day ... take this editorial, for example.