Dear AADCAP Members,

Thank you for the invitation to join you at your business meeting. I regret that I am not able to join you in person, but look forward to seeing many of you in New York in October. Below I have provided information and updates on recent Journal activities and opportunities that I hope will be valuable and of interest to you as informed readers and Academy members.

JAACAP Connect

JAACAP Connect is an online companion to JAACAP, launched in 2014, promoting the development of translational skills and publication as education. The field of child and adolescent psychiatry is rapidly changing, and translation of scientific literature into clinical practice is a vital skillset that takes years to develop. Connect engages clinicians in this process by offering brief articles based on trending observations by peers, and by facilitating development of lifelong learning skills via mentored authorship experiences. The Winter 2016 issue is a special issue on the intersection of child psychiatry and sociocultural issues, helping readers advance their clinical knowledge regarding some of society’s most sensitive issues: culture, gender identity, and race. The Spring 2016 issue (coming soon), itself a moving tribute to the late John F. McDermott, MD, editor emeritus of the Journal and mentor extraordinaire, will feature a series of articles on engaging with and making the most of your relationship with your mentor.

Authorship in Connect is a learning experience, combining education and skill acquisition with mentorship and guidance to offer new experiences in science-based publication. We work with students, trainees, early career, and seasoned physicians, regardless of previous publication experience, to develop brief science-based and skill-building articles. Please consider serving as a mentor or author for JAACAP Connect and encourage your trainees to get involved. JAACAP Connect is available at http://www.jaacap.com/content/connect.

John F. McDermott Assistant Editor-in-Residence

The John F. McDermott Assistant Editor-in-Residence position provides the opportunity for an early-career child and adolescent psychiatrist to join the JAACAP editorial team for two years. Working closely with the JAACAP Editor-in-Chief, the Assistant Editor-in-Residence acquires an intimate understanding of the editorial processes behind the production of the Journal, including but not limited to manuscript preparation, editing, and peer review. The long-term goal of this position is to foster the professional growth of child and adolescent psychiatrists interested in the editorial process.

Oliver Stroeh, MD, now in his first year as McDermott editor, is hard at work learning the ropes of JAACAP Connect, serving as deputy editor, and helping to cultivate and shepherd new submissions. Michelle Horner, DO, immediate-past McDermott editor, serves as the inaugural
editor-in-chief of JAACAP Connect. In 2015, Michelle attended the Council of Science Editors Annual Meeting and participated in a panel discussion on ‘training wheels’ programs to engage trainees and early-careers in the work of their journals. I encourage you to read about her presentation in the appended article from Science Editor. Michelle recently reprised her panellist role in a webinar for CSE to reach an even broader audience and help other journals learn about programs to bring mentorship and skill-building to the next generation of authors, editors, and reviewers. I should also note here (with great pride) that Managing Editor extraordinaire Mary Billingsley is very actively involved in the Program Committee and various leadership positions within CSE.

The call for applications for the 2018-2019 John F. McDermott Assistant Editor-in-Residence will open this fall, with applications due in February 2017. Please encourage the rising stars in your area to apply!

Series Updates and Committee Involvement
The Translations and Clinical Perspectives series continue to thrive. Appended you will find a list of the most recent articles published in each of these series, as well as guidelines for article submissions. At the AACAP Annual Meeting in October 2015, I shared information about the series at a meeting of AACAP committee chairs and encouraged them to consider the Translations/Clinical Perspectives series when exploring outlets to disseminate information and educational material in their key topic areas. Likewise, committees may also consider guest editing specially themed Book Fora featuring reviews of resources in specialized subject areas. I encourage you, either independently or in collaboration with your groups and committees, to submit ideas and proposals about the topics and connections that interest you and that are immediately relevant to everyday practice. We welcome your suggestions and hope you will consider contributing!

Perspectives Meet TED Talks: (Clinical) Ideas Worth Spreading
Building on the success of the Clinical Perspectives series in the Journal and previous Annual Meeting sessions, we have planned a new program for 2016. A 120-minute session, co-monitored by myself and Laura Prager, Assistant Editor for Clinical Perspectives, would bring new clinical perspectives and the eponymous JAACAP column ‘into life’ by casting content from recent and forthcoming instalments of the series into the popular TED Talk format to address novel, unexplored, overlooked, or unusual aspects of everyday practice. Proposed speakers include Craigan Usher, Stuart Copans, David Rettew, Matia Finn-Stevenson, and Dennis Embry. Note: This session has not yet been accepted. It was submitted under the AACAP 63rd Annual Meeting Call for Papers and is currently under review by the AACAP Program Committee (as of March 31, 2016).

AACAP Annual Meeting Proceedings Book
Beginning in 2016, the AACAP Annual Meeting Proceedings Book, featuring the scientific abstracts from the conference, will be published online as a JAACAP supplement issue. This joint initiative of the Program Committee and the Journal will make the proceedings available to a broader audience, across multiple platforms, and going forward, abstracts will be citable as JAACAP content. Abstracts will continue to be available to members and meeting attendees through the AACAP app and online meeting scheduler, as in past years, and will now also be available to members and subscribers via the Journal.

Ad Hoc Committee on Editorship and Publications
My second and final five-year term as editor-in-chief will come to an end with the December 2017 issue of the Journal. With this timeline in mind, the ad hoc committee’s search for the next
editor began last year and will culminate when Council convenes in June of this year. The entire editorial team and office, and I personally, look forward to the final selection and are committed to working with the editor-elect to ensure a smooth transition and to see the Journal go from strength to strength.

I look forward to seeing you in New York later this year and welcome any questions or comments you may have before then. As always, please do not hesitate to contact me personally at andres.martin@yale.edu with feedback about the Journal.

Sincerely,

Andrés Martin, MD, MPH
Editor-in-Chief
Journal of the American Academy of Child and Adolescent Psychiatry

Appended:

- Journal Statistics
- Series Update: Clinical Perspectives and Translations
- Guidelines for Authors: Clinical Perspectives and Translations
- Science Editor report featuring JAACAP Connect
- Subscription Information and Mobile Solutions

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Total new manuscripts received (n)</td>
<td>612</td>
<td>650</td>
<td>604</td>
<td>538</td>
<td>569</td>
<td>598</td>
<td>645</td>
<td>612</td>
<td>644</td>
</tr>
<tr>
<td>Non-US submissions (%)</td>
<td>42</td>
<td>38</td>
<td>45</td>
<td>46</td>
<td>46</td>
<td>45</td>
<td>50</td>
<td>47</td>
<td>48</td>
</tr>
<tr>
<td>Total new research and review articles published (n)</td>
<td>132</td>
<td>119</td>
<td>96</td>
<td>101</td>
<td>95</td>
<td>92</td>
<td>92</td>
<td>95</td>
<td>89</td>
</tr>
<tr>
<td>Non-US research and review articles published (%)</td>
<td>25</td>
<td>24</td>
<td>25</td>
<td>29</td>
<td>24</td>
<td>27</td>
<td>30</td>
<td>37</td>
<td>35</td>
</tr>
<tr>
<td>Peer reviewers (n)</td>
<td>431</td>
<td>396</td>
<td>402</td>
<td>390</td>
<td>361</td>
<td>434</td>
<td>389</td>
<td>390</td>
<td>369</td>
</tr>
<tr>
<td>Average time to complete review (days)</td>
<td>20</td>
<td>18</td>
<td>19</td>
<td>20</td>
<td>18</td>
<td>18</td>
<td>19</td>
<td>18</td>
<td>17</td>
</tr>
<tr>
<td>Receipt to first decision</td>
<td>20</td>
<td>17</td>
<td>19</td>
<td>20</td>
<td>19</td>
<td>22</td>
<td>19</td>
<td>20</td>
<td>19</td>
</tr>
<tr>
<td>Acceptance rate (%)</td>
<td>32</td>
<td>33</td>
<td>31</td>
<td>28</td>
<td>31</td>
<td>29</td>
<td>28</td>
<td>29</td>
<td>27</td>
</tr>
<tr>
<td>Rank (total journals in category)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pediatrics</td>
<td>1 (78)</td>
<td>1 (85)</td>
<td>1 (94)</td>
<td>2 (107)</td>
<td>1 (113)</td>
<td>1 (121)</td>
<td>1 (117)</td>
<td>1 (119)</td>
<td>c</td>
</tr>
<tr>
<td>Psychiatry</td>
<td>11 (94)</td>
<td>10 (101)</td>
<td>14 (117)</td>
<td>13 (126)</td>
<td>8 (129)</td>
<td>9 (135)</td>
<td>11 (135)</td>
<td>10 (140)</td>
<td>c</td>
</tr>
<tr>
<td>Psychologyb</td>
<td>7 (61)</td>
<td>4 (61)</td>
<td>7 (70)</td>
<td>7 (73)</td>
<td>5 (75)</td>
<td>6 (75)</td>
<td>6 (74)</td>
<td>7 (76)</td>
<td>c</td>
</tr>
<tr>
<td>Circulation</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Print</td>
<td>9,648</td>
<td>9,499</td>
<td>9,790</td>
<td>9,137</td>
<td>9,025</td>
<td>9,579</td>
<td>9,227</td>
<td>9,085</td>
<td>7,491</td>
</tr>
<tr>
<td>Online institutional subscriptions</td>
<td>..</td>
<td>..</td>
<td>..</td>
<td>28,295</td>
<td>36,385</td>
<td>37,487</td>
<td>37,520</td>
<td>42,212</td>
<td>53,573</td>
</tr>
<tr>
<td>JAACAP.org (average per month)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Visits</td>
<td>..</td>
<td>..</td>
<td>..</td>
<td>28,295</td>
<td>36,385</td>
<td>37,487</td>
<td>37,520</td>
<td>42,212</td>
<td>53,573</td>
</tr>
<tr>
<td>Unique visitors</td>
<td>..</td>
<td>..</td>
<td>..</td>
<td>24,871</td>
<td>31,161</td>
<td>31,214</td>
<td>32,807</td>
<td>36,941</td>
<td>46,522</td>
</tr>
<tr>
<td>Page views</td>
<td>..</td>
<td>..</td>
<td>..</td>
<td>87,386</td>
<td>105,985</td>
<td>102,637</td>
<td>100,329</td>
<td>111,871</td>
<td>131,506</td>
</tr>
<tr>
<td>Full text article requests</td>
<td>..</td>
<td>..</td>
<td>..</td>
<td>2,077</td>
<td>2,447</td>
<td>3,169</td>
<td>2,902</td>
<td>12,050</td>
<td>2,077</td>
</tr>
<tr>
<td>Science Direct</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Full text article requests (per year)</td>
<td>..</td>
<td>..</td>
<td>..</td>
<td>77,026</td>
<td>286,642</td>
<td>369,530</td>
<td>434,043</td>
<td>461,069</td>
<td>621,463</td>
</tr>
<tr>
<td>Full text article requests (average per month)</td>
<td>..</td>
<td>..</td>
<td>..</td>
<td>6,419</td>
<td>23,887</td>
<td>30,794</td>
<td>36,170</td>
<td>38,422</td>
<td>51,789</td>
</tr>
</tbody>
</table>
Series Updates

Clinical Perspectives sheds a new and focused light on topics within child and adolescent psychiatry. A Clinical Perspective should demand that readers look at problems, controversies or tenets of the field from a new vantage point; it should prompt readers to wonder how they could have missed or overlooked this singular side of a story or issue. Pieces published in this section may include themes including, but not limited to, doctor-patient relationships, social systems, innovative educational or therapeutic programs, or diagnostic dilemmas. A column may include citations and references, but should not be a review of existing literature. A Clinical Perspective will not necessarily relate to papers within the same issue, but could represent responses or reactions to papers published earlier.

- Chinese International Students: An Emerging Mental Health Crisis
  Justin A. Chen, Lusha Liu, Xudong Zhao, Albert S. Yeung
  Published in issue: November 2015

- Psychiatric Hospitalization of Children With Autism or Intellectual Disability: Consensus Statements on Best Practices
  Kelly McGuire, Craig Erickson, Robin L. Gabriels, Desmond Kaplan, Carla Mazefsky, John McGonigle, Jarle Meservy, Ernest Pedapati, Joseph Pierri, Logan Wink, Matthew Siegel
  Published in issue: December 2015

- Wellness, Not Weight: Changing the Focus in Children and Adolescents
  Jenna Saul, Rachel F. Rodgers
  Published in issue: January 2016

- “Failure to Launch”: Shaping Intervention for Highly Dependent Adult Children
  Eli R. Lebowitz
  Published in issue: February 2016

- Prepubescent Transgender Children: What We Do and Do Not Know
  Kristina R. Olson
  Published in issue: March 2016

- Is Talking About What’s Wrong Necessarily Right: A Positive Perspective on the Diagnostic Interview
  Kyle H. O’Brien, Alan Schlechter
  Published in issue: April 2016

Forthcoming (accepted but not yet published):

- Decreasing Ambiguity in Child Protection
  Gordon Harper
  Expected in issue: May 2016

  Matia Finn-Stevenson
  Expected in issue: June 2016

Translations will attempt to bridge gaps between child and adolescent psychiatry and other professional and scientific disciplines. By casting a broad net, it will bring to the readership other knowledge and perspectives, promoting an exchange of information and ideas among researchers, clinicians and other professionals, scientists, and policymakers. It will place empirically derived information into language that is broadly accessible and relevant to those who may be less familiar with the topic and consider scientific controversies and their implications for those who are involved with the
care of children with psychiatric disorders. Unlike editorials, these short pieces will not necessarily relate to papers contained in the same issue.

  Maria E. McGee, Arden D. Dingle, Gail A. Edelsohn
  Published in issue: April 2016
Guidelines for Translations
Visit the Translations collection online at http://JAACAP.org/content/translation.

Overview of Translations
Translations will attempt to bridge gaps between child and adolescent psychiatry and other professional and scientific disciplines. By casting a broad net, it will bring to the readership other knowledge and perspectives, promoting an exchange of information and ideas among researchers, clinicians, and other professionals, scientists, and policy makers. It will place empirically derived information into language that is broadly accessible and relevant to those who may be less familiar with the topic and consider scientific controversies and their implications for those who are involved with the care of children with psychiatric disorders. Unlike editorials, these short pieces will not necessarily relate to papers contained in the same issue.

Manuscript Development
Topics of Translations manuscripts will be agreed upon by the editors. Selected authors will be invited to submit a manuscript although receipt of invitation does not ultimately assure acceptance of the manuscript.

Manuscripts should be uploaded to Editorial Manager by the author. The manuscript word count, including references, for Translations should not exceed 1500 words. Authors should use no more than 5 references and have the option of including one figure or table. Manuscripts should follow the general Instructions for Authors regarding the formatting of the title page, figures and tables, blinded manuscript, and references. The Instructions for Authors are attached.

Manuscript Submission
The Journal utilizes Editorial Manager® for its peer-review process. To upload the Translations manuscript, the author should visit http://JAACAP.edmgr.com. If the author has not previously registered on the JAACAP Editorial Manager site, she/he will need to do so before submitting the manuscript. Once the author has registered and logged in, Editorial Manager will provide step-by-step instructions for uploading the manuscript and accompanying files.
For submission, the author will be required to provide: a title page, a blinded manuscript including a table or figure (if applicable), and a Manuscript Submission Form. If included, the figure should be uploaded as a separate document. No abstracts or keywords are required for this article type. Please be sure to select Article Type: Translations when uploading the manuscript.

Manuscript Submission Form
The Journal requires that a Manuscript Submission Form (MSF) be completed for each submission. The MSF is available at www.JAACAP.org. For assistance in completing this form, please contact Kristine Pumphrey, Assistant Managing Editor, at kpumphrey@JAACAP.org.

Peer Review
All Translations articles undergo the same rigorous peer-review and editorial processes as other articles. Please note that manuscripts may be rejected without peer review or may undergo blinded peer review. An invitation to submit a Translation article has no bearing on whether the manuscript will ultimately be accepted by the Editor-in-Chief. The editorial team aims for a rapid review and decision process.

Authors Required to Obtain Patient or Guardian Permission
Patient anonymity must be protected and any identifying information omitted (including but not limited to name, address, chart number, and date of birth). If any photos or images may be used to identify the patient, the author must follow the requirements stated below.
Any submission that has not been approved by an Institutional Review Board but that includes patient information (such as clinical case presentations, clinical images or case studies) requires the parent/guardian's signed permission for publication and the child's written assent (if the child is able to give it). A copy of the Patient Consent Form is required at the time of submission. The form is available at www.JAACAP.org.

Authors Required to Obtain Permission for Previously Published Figure or Table
Authors must identify figures or tables that are unpublished or previously published from another source. Written permission should be obtained from the copyright holder. Such permission should be included in the manuscript submission. Failure to provide permission will delay in the processing of the manuscript.
Overview of Clinical Perspectives
Clinical Perspectives will shed a new and focused light on topics within child and adolescent psychiatry. A Clinical Perspective should demand that readers look at problems, controversies or tenets of the field from a new vantage point; it should prompt readers to wonder how they could have missed or overlooked this singular side of a story or issue. Pieces published in this section may include themes including, but not limited to, doctor-patient relationships, social systems, innovative educational or therapeutic programs, or diagnostic dilemmas. A column may include citations and references, but should not be a review of existing literature. A Clinical Perspective will not necessarily relate to papers within the same issue, but could represent responses or reactions to papers published earlier.

Manuscript Development
Topics of Clinical Perspectives manuscripts will be agreed upon by the editors. Selected authors will be invited to submit a manuscript although receipt of invitation does not ultimately assure acceptance of the manuscript.

Manuscripts should be uploaded to Editorial Manager by the author. The manuscript word count, including references, for Clinical Perspectives should not exceed 1500 words. Authors should use no more than 5 references and have the option of including one figure or table. Manuscripts should follow the general Instructions for Authors regarding the formatting of the title page, figures and tables, blinded manuscript, and references. The Instructions for Authors are attached.

Manuscript Submission
The Journal utilizes Editorial Manager® for its peer-review process. To upload the Clinical Perspectives manuscript, the author should visit http://JAACAP.edmgr.com. If the author has not previously registered on the JAACAP Editorial Manager site, she/he will need to do so before submitting the manuscript. Once the author has registered and logged in, Editorial Manager will provide step-by-step instructions for uploading the manuscript and accompanying files.

For submission, the author will be required to provide: a title page, a blinded manuscript including a table or figure (if applicable), and a Manuscript Submission Form. If included, the figure should be uploaded as a separate document. No abstracts or keywords are required for this article type. Please be sure to select Article Type: Clinical Perspectives when uploading the manuscript.

Manuscript Submission Form
The Journal requires that a Manuscript Submission Form (MSF) be completed for each submission. The MSF is available at www.JAACAP.org. For assistance in completing this form, please contact Kristine Pumphrey, Assistant Managing Editor, at kpumphrey@JAACAP.org.

Peer Review
All Clinical Perspective articles undergo the same rigorous peer-review and editorial processes as other articles. Please note that manuscripts may be rejected without peer review or may undergo blinded peer review. An invitation to submit a Clinical Perspective article has no bearing on whether the manuscript will ultimately be accepted by the Editor-in-Chief. The editorial team aims for a rapid review and decision process.

Authors Required to Obtain Patient or Guardian Permission
Patient anonymity must be protected and any identifying information omitted (including but not limited to name, address, chart number, and date of birth). If any photos or images may be used to identify the patient, the author must follow the requirements stated below.

Any submission that has not been approved by an Institutional Review Board but that includes patient information (such as clinical case presentations, clinical images or case studies) requires the parent/guardian's signed permission for publication and the child's written assent (if the child is able to give it). A copy of the Patient Consent Form is required at the time of submission. The form is available at www.JAACAP.org.

Authors Required to Obtain Permission for Previously Published Figure or Table
Authors must identify figures or tables that are unpublished or previously published from another source. Written permission should be obtained from the copyright holder. Such permission should be included in the manuscript submission. Failure to provide permission will delay in the processing of the manuscript.
Journal Training Wheels: Building a Pipeline of Future Authors, Reviewers, and Editors

Moderator:
Mary K Billingsley
Managing Editor
Journal of the American Academy of Child and Adolescent Psychiatry
Washington, DC

Speakers:
Kathy Pieper
Managing Editor
Neurology
Rochester, New York

Jason Roberts
Executive Editor
Headache
Plymouth, Massachusetts

Michelle S Horner
Editor-in-Chief, Journal of the American Academy of Child and Adolescent Psychiatry Connect
Assistant Professor of Psychiatry and Behavioral Sciences, Johns Hopkins University School of Medicine
Baltimore, Maryland

Reporter:
John Hammersley
Co-founder and CEO
Overleaf
London, United Kingdom

How do we train authors and early career researchers with the skills they need to be effective reviewers and editors? In this intense session full of practical advice and tips, we were privileged to hear from three speakers who have all set up training programs doing exactly that.

Our first speaker, Kathy Pieper, has been at the journal Neurology for 16 years. Along with the Resident and Fellow Section editors, she has been mentoring neurology trainees since the training program’s inception in 2004. The program provides a forum for new researchers to publish articles and helps them learn the ins and outs of peer review.

Launched online only (to keep costs low), this section began with a few submission subcategories: Education Research, Career Choices, and Residency Training. They now have 15 article types and have added new interactive offerings. One current key initiative is the “Call for Authors” section, which lists suggested article topics. Users can check out interesting topics, and interested submitters have six weeks (plus grace) to submit. If there is no submission by this time, the topic opens back up. “Mystery cases”—where a teaser of the case is shared on social media before they are published—help encourage interaction, and “e-Pearls”—just 85 words—encourage new authors to get involved.

The program has seen rapid growth in the last decade and now has more than 500 unsolicited submissions per year. In 2014, they published 150 articles, up from 10 (heavily solicited) articles in the first year. What makes for a successful initiative? Pieper introduced three key themes, which were also prominent throughout all three speakers’ talks:

1. Provide a positive and open environment: Those who join the program usually want to offer ideas in a safe environment.
2. Keep focus and momentum through regular calls: For this, it is important that everyone is comfortable with the technologies being used.
3. Build transferrable skills that researchers can take forward: This helps them to continue to contribute beyond the end of the program.

Jason Roberts described the “article review club” training program he set up with the journal Headache, which is now in its fourth year. Two society members lead a Skype call twice a month, and each time they focus on a different element of the review process. They then look at examples—Roberts sends them six papers, and the group picks one to be the live case they work on. The review they produce is used by the journal as an extra review.

When they start out, the trainees are very critical: “It’s like a shark tank—papers get ripped to shreds!” as Roberts describes it, and this has been fed back into the teaching sessions. Discussing ethics is important; for example, this is often the first time the trainees have seen a confidentiality agreement, which they have to sign before they can participate in the program.

Overall this initiative has been “tremendous in fostering relationships with early career researchers” Roberts concluded; the society is similarly excited by how this develops the active member who will continue to contribute in years to come.

Promoting the development of transferrable skills was a key reason behind the launch of the Journal of the American Academy of Child and Adolescent Psychiatry (JAACAP) Connect, the online extension of JAACAP that focuses on practical translational and skills-building articles. Michelle Horner described the dual mentorship model that has been a core part of the program’s success: in addition to a “content mentor,” the trainee’s “editorial mentor” is a friend and guide who works closely with authors every step of the way, ensuring that they “never worry alone”.

Ensuring the trainees have a positive experience makes them more likely to refer others, and it all starts with a phone call to find out what they’re passionate (continued on page 94)
reviewing proofs after outsourced copyediting and composition. Kaufman reiterated the significance of communication, saying, “Understand the nuances of your publisher’s workflow as they understand yours.” Constructive complaints must be shared, but societies should remain open to the publisher’s ideas. Whether deciding on a publisher or currently working with one, constant communication is key, allowing the publisher to hear and address client needs. Both SP and CP have advantages and disadvantages, and one path may not be ideal for a particular publication.

continued (from page 83)

violation risks, Wiley undertakes several steps including (in escalating seriousness) investigation (very important because of the need for accurate records), negotiation, threats, partnerships with peer publishers in group actions, litigation, and criminal prosecution. McKenzie concluded by noting that the CTA is critical as proof that the publisher is the authorized repository of the version of record. When versions are not under the publisher’s control, corrections and retractions may be missing, with potentially serious implications such as dosage or chemical formula errors.

continued (from page 85)

What to Expect in the Future?
These speakers agreed that content cannot be repurposed if data sources are not shared. Beyond policy changes, the solutions will result from industry standards, public data repositories, data descriptors, formal credits, accession codes, and community support.
Stack pointed again to the Institute of Medicine and its January 2015 recommendations: “Biomedical journals have an important role to play in advancing the creation of an environment in which sharing of clinical trial data is a standard and an expectation for publication in the scientific literature.”

continued (from page 91)

about; Horner emphasized this early interaction as a key first step. Naturally, some trainees rise to the top, and JAACAP Connect provides opportunities for these authors to do more, including mentoring experiences for guest editors and editorial board positions, which further helps to build the pipeline.

No two trainees have the same level of experience or expertise when they start, however, and Horner closed the session with a clear piece of advice: find out what your trainees need help with and use this to improve your program. It will pay off in the long run, as these three successful programs have all demonstrated that.

Program Links and Contact Information
- Neurology Resident & Fellow Section: www.neurology.org/site/feature/index.xhtml
  Contact: kpieper@neurology.org
- JAACAP Connect: www.jaacap.com/content/connect
  Contact: connect@jaacap.org
Your AACAP membership now includes access to JAACAP, JAACAP Connect, and 4 more Elsevier pediatrics and psychiatry journals

Log in at www.aacap.org and click on JAACAP under Member Resources or register at www.jaacap.org to claim your subscription.

Need access to JAACAP on the go?

Visit www.jaacap.org on your phone or tablet

OR

Download the JAACAP app from iTunes or the Google Play store

For questions about online access or activating your JAACAP subscription online, please call 1.800.654.2452 or email JournalsCustomerService-usa@elsevier.com.