

Business Plan for the Christian Journal for Global Health

rev. 30 May 2013

Synopsis

The Center for Health in Mission is launching the Christian Journal for Global Health, a new online resource of evidence-based and thoughtful discussion related to Christian approaches to global health care and promotion. The Journal will provide free and open access to scholarly and thoughtful work to meet the needs of health workers, missionaries, researchers and policy makers. This concept already benefits from the participation of several Christian health networks and experts.

The Journal shall articulate and disseminate evidence-based best practices, improve understanding of intercultural work in the context of health, and increase world-wide exposure to the innovations, experiences and perspectives of global health workers. Article submissions will be encouraged from throughout the world, and be subject to rigorous peer review. As such, this Journal will serve as a *reputable and authoritative resource* to help influence funding, policy, and operational decisions regarding Christian global health initiatives.

The Journal will not charge for subscriptions in order to stimulate access and utilization. Costs will be kept low by managing and disseminating the journal online. The limited overhead costs of administering the Journal will be supported at first by startup grants and donations; then eventually by advertising, “partner grants”, continued donations, and publication fees from authors.

The following support is needed to advance this Journal in the early stages.

1. Endorsement or Affiliation by the major Christian health networks and academic partners.
2. Agreement by an array of editors to review articles and guide the journal
3. Willingness of global contributors to submit quality articles
4. Financial partners and grants to facilitate the platform, marketing and coordination by part-time staff. Start up funding of \$120,000 is sought for the first year of operations.

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1. Background

Throughout the world, a significant percentage of health care and health promotion is provided by people motivated by a Christian worldview. Many of their approaches are rooted in the Bible and faith and forged in the various fields of work in many resource-constrained areas. Their approaches are modified through collective sharing of evidence-based best practices among governmental and non-governmental organizations, seeking to optimize health outcomes in their communities.

While there are some avenues to share these best practices, there is no publication with academic rigor from a Christian perspective that is easily accessible to health workers in low and middle-income countries. Nor do these health workers have ready access to submitting innovative research or outcome studies in the global health literature to contribute to the body of knowledge. Practitioners of global health are often unaware of international standards of practice or the collective experience of their colleagues in other fields of work or traditions.

Funders, policy makers, strategic partners and field professionals throughout the world need such a reputable and authoritative source of information – now perhaps more than ever. Economic challenges and reductions in donations and government grants mean that programs need to demonstrate effect. Validation of program results by independent peer review will help make appeals for funding and efforts to expand or replicate programs much stronger. Continuous improvement through self-evaluation and scrutiny of programs will enhance credibility and positively influence funding, policy, and practice.

Through collaborative meetings at health-related mission conferences in the USA since 2004, the need for a free interdenominational interdisciplinary journal led to the publication of the on-line CrossNetwork Journal founded by Peter Yorgin and edited by Dan Fountain, producing articles through 2008. Since then, the Center for Health in Mission has intended to facilitate a movement to enhance the academic rigor and profile of a similar journal with the encouragement of a broad range of colleagues and from partners.

The journal is already registered with the Library of Congress in the United States (ISSN 2167-2415). The journal platform software has been developed (<http://pkp.sfu.ca/?q=ojs>), and an international advisory committee has been formed.

This business plan describes the state of development and the need for interim financing as the Journal is fully established.

2. Objectives

The primary objective is to *publish an open-source, peer reviewed journal on global health with an international and inter-denominational Christian perspective*. The Christian Journal for Global Health seeks to act as a platform for Christians working in global health to publish and share review articles and original field research from a variety of disciplines and from the perspective of various Christian traditions.

Specific objectives include:

- To establish a reputable and authoritative resource regarding Christian global health initiatives to help with donor relations and to influence funding, policy, and operational decisions.
- To share evidence-based best practice concepts from different disciplines within the global health movement.
- To provide a freely-accessible journal for learning from the broader Christian community on topics relevant to health-related relief and development work.
- To provide an academic forum for those working in health from the developing world to disseminate their work so as to magnify their international voice.
- To give credibility to researchers and practitioners in the health-related mission movement.
- To mentor researchers by shepherding them through the submission process and enhancing their professional aspirations.
- To integrate public health, community health, biomedicine and missiology/theology to strengthen a “wholistic” perspective.

3. Outcomes

The outcomes expected by establishing this Journal include the following.

- Articulation and dissemination of evidence-based best practices among health-related institutions and Christian faith-based organizations (FBOs) leading to better health outcomes for the world’s underserved populations.
- Improved understanding of intercultural work in the context of health care and promotion for greater mission impact and the healing of the nations.
- Increased world-wide exposure to the innovations, experiences and perspectives of global health workers.
- Deepened understanding of the global Church in its role in ministries of health and healing.

4. Approach

The Christian Journal for Global Health is designed to minimize costs while maximizing quality, rigor, and breadth of contribution, dissemination and utilization.

4.1 Open Access

All content shall be available free of charge to any organization or individual, to read, to download, to copy and to disseminate. The website, www.cjgh.org, is under construction. Use of articles is also free, so long as they comply with fair use standards (e.g., citing of source).

Organizations and individuals can subscribe to receive alerts of new publications, but all subscriptions are free.

Authors are free to post their published articles, formatted from the Journal, on their personal or institutional websites following publication.

4.2 Online submission

Article submissions, reviews, and publication will all be online. The Open Journal System software platform of the Public Knowledge Project was selected based on broad international utilization, comprehensive software, low cost and favorable literature reviews.

4.3 Frequency of Publication

Articles may also be posted online immediately as they are ready for publication. Such a rolling basis produces useful information to the field without any of the delays often associated with journal publications. Rolling publication would allow for adjustment for variations in submission volume.

Articles of a particular theme, even if published on a rolling basis, could be linked to one another to create cohesive themes. This would also generate a continuous roll of submissions, related to and possibly stimulated or inspired by prior articles.

Articles shall be aggregated on a quarterly basis and submitted to subscribers.

All articles are assigned a Digital Objective Identifier (DOI) to help identify and locate the articles.

In some cases, articles may be timed to be released together – e.g., different sides of a debate or multiple perspectives on an issue of importance.

4.4 Process of Review

Peer review of submissions and editing will be carried out by section editors and selected reviewers prior to publication. The purpose of this review is to assure that any published articles meet strict and rigorous standards of the Journal. The peer review process entails the following:

1. The Journal editors shall determine if the articles are within the scope of, and appropriate for consideration by, the Journal.
2. All submissions that require peer review shall be sent out for review electronically.
3. All submissions shall be reviewed by at least two independent referees.
4. Identity of the referee and author shall not be disclosed to either party, except at the discretion of the Editor. Such “double blind” review eliminates bias against less-known authors and bias in favor of well-known authors.
5. Review criteria will be supplied to the reviewers, including but not limited to:
 - a. Urgency in light of other coverage of the subject area
 - b. Originality of the submission
 - c. Quality of the article (e.g., ethical standards, accepted statistical and research methods, internal integrity of the submission)
 - d. Thoughtfulness and relevance of the analysis
6. The two referees shall submit their views to the Editor. If they lack consensus, a third referee may be involved.

The peer review process will conclude in any of the following:

- Accept submission without changes
- Accept submission after required revisions (within a stipulated time)
- Revise and resubmit for another review round
- Reject submission – either because it fails to meet standards, or if it is better suited to another journal

4.5 Editorial Board and Reviewers

Editorial Board members will be recruited by the steering committee and include academically qualified individuals from a broad range of disciplines, geographic regions, organizations and Christian traditions.

Reviewers will be selected in an ongoing fashion to assist the Editors in the peer review process for certain submissions, based on their expertise.

In some cases, authors themselves can suggest potential reviewers. In such cases, reviewers should not be co-authors with the submitting author.

4.6 Authors

Authors will be sought from a similar broad range of categories, with intentional contribution from workers in developing countries, students, and professionals. Authors will be solicited where possible, including attendees and speakers at Christian global health conferences, participants in health workshops, members of Christian organizations working in global health, and other global health networks.

4.7 Articles

The journal shall publish several types of articles. Many types will be open submissions, though some will be solicited (e.g., invited editorials); all published work shall be indexed and archived; and everything will be peer reviewed except for editorials and book reviews.

Types of Articles to be considered in the Journal

| | Open Submission | Index/Archive | Peer Review |
|--------------------------|------------------|---------------|-------------|
| a. Editorials | Open and Invited | ✓ | |
| b. Review Articles | Open and Invited | ✓ | ✓ |
| c. Original Articles | Open and Invited | ✓ | ✓ |
| d. Case studies | Open | ✓ | ✓ |
| e. Short Communications | Open | ✓ | ✓ |
| f. Current Debates | Open | ✓ | ✓ |
| g. Commentaries | Open and Invited | ✓ | ✓ |
| h. Study Design Articles | Open | ✓ | ✓ |
| i. Capacity Building | Open | ✓ | ✓ |
| j. Book Reviews | Open | ✓ | |

4.8 Subject matter

Subject matter will be broad, but specific topics may be selected as themes that run for multiple issues for single issues. Sample topics of interest include but are not limited to:

- Mission health care and sustainability
- Short term health missions support, efficacy, and risks
- Results of health partnerships, projects, and community transformation initiatives
- Results of clinical studies
- Impacts of changes in policies, financing, and organization on Christian global health
- Role of the Christian FBO in providing health care, programs
- Christian health training/teaching, including pedagogical tools and methods.

4.9 Index and Archiving

All articles shall be assigned Digital Object Identifier (DOI). Archives shall then be maintained and searchable using the LOCKSS system developed at Stanford University (<http://www.lockss.org/>). Contributions that are accepted shall be forwarded for PubMed and other indexing.

4.10 Transparency and Accountability

Business operations shall be transparent and professional. Contributions are tax-deductible and will be receipted. Expenditures shall be according to annual budgets. Processes for article management shall be clear and the status and outcome of peer review, editing, and publication availed to any contributor. Correspondence will be from authorized sources, using appropriate professional standards for communication.

4.11 Online collaboration and social networking (crowd sourcing)

A related social networking site can be operated with weekly discussions on articles and topics of interest. This may yield valuable insights, critiques, or even additional research that comes to light that could also be published. This will be a benefit for registered subscribers only. Online comments will be monitored prior to publishing to avoid any opportunity for inappropriate comments.

4.12 Editorial support

Editing and assistance with referencing shall be provided for contributors for whom English is not a first language, or who come from organization settings that do not have sufficient editorial support. This assistance may improve language, referencing style, and formatting.

4.13 Printed copies

While this is intended to serve as an online publication, some printed copies may be requested by the authors or others. They will be provided at a charge when requested.

5. Justification for the Approach

Publication of innovative ideas and evidence-based results (positive or negative) are the litmus test for the quality of the thinking and the research. Universities and academic organizations use a scholar's publication history to evaluate their performance. Funders of research and development activities benefit when the world comes to know of their contribution to knowledge.

Journals are the domain of choice for publication by academicians and other researchers. Journals provide the following benefits¹:

- Registration of author ideas and results, with a “date stamp” and location to cite the result
- Dissemination of ideas and results to an interested community
- Certification of validity of the ideas and results
- Archiving of the information in a manner that can be searched and accessed later.

Publication in a journal is superior to other forms of publication that do not assess the ideas and results to standards required for publication. Many authoritative sources exist that subject their work to stringent standards (e.g., government agencies, foundations) but often these publish their own results and publication is biased by their selectivity. Moreover, the digital age makes it easy to create attractive and professional-appearing publication of poorly done research and inappropriate information.

There is a groundswell of support for free and open access to peer reviewed results of research. Subscriptions to journals are expensive (hundreds of dollars per year) and reprints of articles can cost as much as \$50 per article in some journals. Traditional practices of submitting to expensive journals that restrict access to published information is now met with skepticism – why should the result of research, often done with public or non-profit funding, be subject to distribution through profit-motivated publications? A recent issue of the New England Journal of Medicine included several articles on the issue of free access, one of which² noted that free access provides the literature to at least five overlapping audiences:

- Researchers who happen upon open-access research articles while browsing the Web rather than a password-protected database;
- Researchers at institutions that cannot afford the subscription prices for the growing literature;
- Researchers in disciplines other than that of a journal's intended audience, who would not otherwise subscribe;
- Patients, their families, students, and other members of the public with an interest in the information but without the means to subscribe; and
- Researchers' computers running text-mining software to analyze the literature.

¹ Frank M. (2013). Open but Not Free — Publishing in the 21st Century. *N Engl J Med* 2013; 368:787-789 February 28, 2013DOI: 10.1056/NEJMp1211259.

² Carroll, MW (2013). Creative Commons and the Openness of Open Access. *N Engl J Med* 2013; 368:789-791February 28, 2013DOI: 10.1056/NEJMp1300040

Certainly these benefits are compounded by the economic challenges faced in developing countries or resource constrained organizations, many of which participate actively in Christian global health activities.

Free access of course requires that publication costs be kept to a minimum, which is why this journal will be published online. Online publication has the following benefits:

- Eliminates postage costs for prospective authors
- Eliminates printing and postage costs for the publishers
- Makes all the content available for anybody who wants to see it, any time.

Online publications still incur costs related to *editing* and *marketing*. Some unscrupulous online journals publish anything so long as authors, desperate to get their work out, pay the price. In such cases, they often do not have a robust editorial review, the publication process is not transparent, and they do not archive results. This Journal may still charge a nominal processing charge to authors, but all rules and procedures and benefits will be transparent.

It is therefore imperative that this journal be well designed and operated in order to assure that high quality ideas and research are received and published, and the results made accessible.

6. Market for Readers

The journal will be designed to reach a variety of readers, both individual readers and those within organizations. Types of readers and strategies to reach them are outlined in the following table.

| Reader | Description | Strategy to Reach These Readers |
|---|---|--|
| Faith based health workers | Workers in both secular and Christian health organizations throughout the world | Website and online search indexing |
| Universities including staff and students | Christian universities as well as individuals within secular universities throughout the world | List global Christian universities with health programs and market directly Website and online search indexing |
| Missionary organizations | Organizations that serve or send mission partners across cultures | List agencies of all denominations and direct mail them, requesting to have information also forwarded to mission partners Website and online search indexing |
| International (cross-national) faith based organizations | Christian organizations that are active across borders - relief and development organizations, child sponsorship agencies, counseling programs, economic development organizations and others | List partners and direct mail their senior management and libraries Website and online search indexing |
| “Local” faith based organizations | Christian organizations that primarily operate within a single country or location | Collaborate with Christian medical bureaus and other associations in countries, through lists maintained by partners Website and online search indexing |
| Volunteer missionaries | Christian health workers who volunteer independently or through their church to serve another population group | Advertise through mission oriented websites and mission travel agencies Website and online search indexing |
| Policy makers | Leaders in both secular and Christian organizations which manage resources or advocate for government policies related to global health | Invite submissions from policy makers Editorial board members represent journal Website and online search indexing |
| Colleagues from secular and other faith traditions | Other scholars and inquirers who seek deeper understanding of what makes Christian global health unique | Website and online search indexing |

7. Financial Sustainability and Subscriptions

7.1 Free Subscriptions

This journal is “open access” to readers who register and log in. Registration allows the Journal to monitor readership and the articles that are most interesting to them. Registration also provides access to “premium content” options such as the social networking function of the journal. The selected journal platform includes a registration process.

No subscription fees will be charged and no fee will be required to read articles. As noted above, this is in line with modern developments in research dissemination.

Therefore in order to raise the revenue required for editorial and marketing support, the Journal shall: seek start-up funding from donations, develop advertising income, solicit targeted grants from partners, and collect an article processing fee.

7.2 Endorsements

Organizations will be asked to endorse the Journal. Endorsement does not cost anything to the endorser, but is by invitation of the journal. Endorsement means the name of the organization will, when practical, be listed in the journal, website, and printed materials.

The Christian Medical and Dental Association (CMDA) has already endorsed the Journal.

Additional invitations to endorse will be sent out to the organizations represented by the International Advisory Board as well as other health, mission, and aid organizations.

7.3 Donations

Fundraising with organizations and individuals will raise start up and ongoing operating funds. Passive fundraising through “donate now” links on the website will be supplemented by soliciting donations from individuals and submitting applications for grants to foundations. Sponsors will be recognized as follows:

Sponsorship Levels and Recognition

| | Individual | Organization | Recognition |
|-------------------|---|---|---|
| Donor | Up to \$1,000 per year | Up to \$2,000 per year | Thank you from Advisory Board |
| Gold Donor | \$1,000 in one year, or \$2,000 commitment over 3 years | \$2,000 in one year, or \$5,000 commitment over 3 years | Above, plus annual listing in the Journal and website |
| Founder | \$5,000 donation | \$10,000 donation | Above, plus feature listing in website |

7.4 Advertising income

Advertising space will be sold on the website and in journals. It is expected that organizations that work in global health or sell products in global health will be interested in advertising. These include the many Christian organizations and secular organizations.

7.5 Targeted (Partner) Grants

The Journal will approach foundations, university partners, research organizations and libraries to provide support for the journal. Website and journal access will be monitored for those organizations that make the most use of the journal resource, and they will be invited to donate commensurate with that use.

7.6 Article Processing Fee

Article processing fees will be collected from authors whose articles are accepted for publication. This fee is collected only after their articles are accepted to avoid any perception of bias to favor authors who pay, or to avoid the reputation of predatory behavior. Processing fees will be charged on a sliding scale based on the economic status of the country of the authors. Waivers of fees will be considered on a case by case basis.

8. Ownership and Oversight

8.1 Ownership

The journal is owned by the Center for Health in Mission, which is a registered non-profit organization (registered in North Carolina, www.centerforhim.org). The Center is affiliated with the Alliance for Transformational Ministries (www.atmlive.org), which is a registered 501(c)(3) non-profit organization that serves as an umbrella for other organizations and which can receive tax deductible donations on behalf of the Center.

8.2 International Advisory Board

The Board of the Center for Health in Mission established an advisory board to guide development of this journal. The International Advisory Board shall guide the Editor and provide overall direction for the Journal. The International Advisory Board provides credibility and connectivity on an ongoing basis. This Board would be distinct from the Editorial Board, which is tasked with the ongoing review process, and reporting to the Editor. Specific duties of the International Advisory Board include:

- Monitor quality and quantity of submissions and publications
- Advocate for the journal in relevant forums
- Help raise support, solicit articles, and identify editors and reviewers
- Act as reviewers when their expertise is needed
- Agree to have their name on the journal
- Participate in regular (e.g., quarterly) conference calls and respond to questions

International Advisory Board

| | Name | Positions |
|-----|---|---|
| 1. | Jeffrey D. Amstutz, DDS, MBA | Vice President for Dental Ministries Christian Medical & Dental Association |
| 2. | John H. Bryant, MD | Retired, Chair, Christian Medical Commission Lifetime Achievement Award for International Health, APHA |
| 3. | Alice Chen, MD | Medical Doctor Evergreen China |
| 4. | Jose DeAngulo, MD, MPH | Latin American Regional Director MAP International |
| 5. | (Name withheld) | Professor, Mayo Medical School Department of Pediatric and Adolescent Medicine, Mayo Clinic |
| 6. | Nathan Grills, DPhil, MBBS, MPH | Public Health Physician (FAFPHM) Nossal Institute for Global Health, University of Melbourne |
| 7. | Ted Lankester, MA, MB, BChir, MRCGP, FFTM, RCPSGlasg | Founder, Community Health Global Network, United Kingdom Director of Health Services, InterHealth |
| 8. | Ray Martin | Executive Director Christian Connections in International Health |
| 9. | Robert Mitchel | Chief Executive Officer, Anglican Overseas Aid (Solicitor by profession) |
| 10. | W. Henry Mosley, MD, MPH | Professor Emeritus Johns Hopkins University, Bloomberg School of Public Health |
| 11. | Peter Okaalet, MBChB, MDiv | Consultant Okaalet and Associates Ltd, Nairobi |
| 12. | Vinod Shah, MD | Christian Medical College Vellore Board Member, Int'l Christian Medical & Dental Association |
| 13. | Grace Tazelaar, MS, RN | Missions Director Nurses Christian Fellowship |
| 14. | Mesfin Teklu, MD, MAHA | Director, MCH, HIV, & Infectious Diseases (Global Health & WASH Team) World Vision International |
| 15. | Rev. Dr. Tomi Thomas, IMS | Director General The Catholic Health Association of India |
| 16. | Ravi Jayakaran, B.V.Sc. | Vice President for Global Programs MAP International |

9.0 Key Staff and Editors

9.1 Managing Editor

The Managing Editor is the Chief Executive Officer for the Journal. The Managing Editor sets the overall direction, policy and tone of the journal. The Managing Editor is as part of, and also receives oversight from, the International Advisory Board.

Dr. Daniel O’Neill, MD, is the Managing Editor. Dr O’Neill is an Assistant Clinical Professor of Family Medicine at the University of Connecticut School of Medicine. He received his BA from Hope College and MD from StonyBrook University Health Science Center in New York. He did his Family Medicine Residency training in Pensacola, FL and studied tropical medicine in Puerto Rico through the US Navy. He practices holistic Family Medicine in Connecticut He has a Certificate of Theological Studies from Bethel Seminary of the East, and is pursuing a MA in Global and Contextual Studies. He has served as interim physician at Hospital Vozandes Del Oriente in Ecuador and on multiple health and development projects including in West Africa and North India.

9.2 Chief Editor

The Chief Editor serves as the Chief Operating Officer for the Journal. The Chief Editor oversees the entire review, editing and publishing process. The Chief Editor works with the Managing Editor to establish the policies and procedures for the journal. In the editorial process, the Chief Editor assigns submissions to the Section Editors to see through Submission Review and Submission Editing. The Chief Editor keeps an eye on the submission's progress and assists with any difficulties. Once review is completed, the Chief Editor typically sees the submission through the Editing process (including copyediting, layout editing, and proofreading) although in some journals this remains the responsibility of the Section Editor in charge of the submission's review process. The Chief Editor also creates the journal issues, schedules submissions for publication, arranges the Table of Contents, and publishes the issue as part of the Publishing Process. The Chief Editor can restore archived submissions to the active In Review or In Editing lists.

This position is currently vacant, though the duties of Chief Editor are shared by the Managing Editor and the two editors listed below.

9.3 Associate Editor for Health Mission

The Associate Editor for Health Mission facilitates interaction between the Advisory board, the Center, and the Alliance for Transformational Ministry. He helps with marketing and promoting the journal, and coordinates the affairs of the International Advisory Board.

Dr. Michael Soderling, MD, MBA, serves as Associate Editor for Health Mission. Dr. Soderling is currently developing an intercultural health program at Campbell University College of Medicine. He received his MD from the Medical College of Wisconsin and finished his residency in OB/GYN in Baltimore, MD in 1991. After 10 years of private practice in Wisconsin, Dr. Soderling and his family moved to full time cross-cultural work in Guatemala where he serves as President of Salud que Transforma (Transformational Health). Dr. Soderling completed an MBA in International Development at Hope

International University in December of 2008. Dr. Soderling has been active in short term health mission teams in Guatemala and is interested in assisting those who have a heart for health related mission to explore how to do this most effectively for the long term benefit of the world's poor.

9.4 Associate Editor for Journal Development

The Associate Editor for Journal Development is responsible for overseeing fundraising, advertising and marketing, subscriptions, and business operations for the journal.

Douglas Fountain, MPA, serves as Associate Editor for Journal Development. Mr. Fountain is currently a consultant in global health and international higher education. He brings over 23 years of experience in health and higher education, research and consulting. He served for 8 ½ years at Uganda Christian University, a fully accredited university with 11,000 students. He founded the Department of Health Sciences, launched nursing and public health programs, wrote a book on Health and Wholeness, and subsequently served as Deputy Vice Chancellor responsible for Development and External Relations. He (with his wife) are publishing a resource and planning guide for universities in developing countries. His previous work included sustainable forestry and agriculture in Tanzania, and public health and substance abuse treatment research and economic analysis in the United States.

9.5 Editorial Board

Section Editors manage the review of submissions and the editing of those that are accepted. They assign a review of the submission to appropriate reviewers, and oversee the review process. Some Section Editors would only oversee the review process, while others would also see the accepted manuscript through the editing process. Editors are generally volunteer experienced academics or practitioners with a deep understanding and commitment to the journal's objectives. They need English proficiency, and internet access. They will represent a broad range of geographic regions, professional disciplines and Christian traditions. Editors will be recruited into the following set of "clusters" by topic area:

Cluster and Sub-Topics

| Cluster | Sub Topic |
|---------------------------------------|--|
| Public Health | Health Promotion/Prevention Nutrition and Food Security Maternal and Child Health Community Development |
| Health Care Services | Primary Health Care Surgical Service Disaster and Emergency Rehabilitative services Mental Health Palliative Care |
| Organization | Health Administration and Finance Health Policy and Advocacy Health Workforce |
| Mission and Health | Theology Evangelism |
| Conditions of Special Interest | HIV/AIDS Non-Communicable Disease Neglected Tropical Diseases |

Over 20 people have already committed to serving on the board.

9.6 Reviewers

The Reviewer is selected by the Section Editor to review a submission. Reviewers are asked to submit reviews to the journal's web site and are able to upload attachments for the use of the Editor and Author. Reviewers are generally volunteers with experience in the field related to the topic of the submission. There will be a large working list of reviewers accessible to the Editors.

10. Challenges

The Journal anticipates a series of potential challenges and has prepared the following strategies to mitigate their impact.

| Challenge | Mitigating Strategy |
|--|---|
| Insufficient articles submitted | <ul style="list-style-type: none">• Identify authors and experts through advisory and editorial board, solicit articles• Advertise more through associations and other partners |
| Insufficient funding | <ul style="list-style-type: none">• Scale up processing fees and advertising and appeal for transitional grants. Once readership is established, appeal for donations from users. |
| Insufficient articles at methodological standard required | <ul style="list-style-type: none">• Seek university and academic partners• Recommend that authors review methods with local experts (e.g., at local universities) and resubmit |
| Insufficient reviewers | <ul style="list-style-type: none">• Rely on recommendations from authors, both current and prior, to nominate those they consider experts for vetting |
| Too many articles in a particular subject | <ul style="list-style-type: none">• Monitor numbers of articles by subject and country and consider allowing only more original or innovative studies on the subject• Increase recruiting for authors from subject areas or locations that are underrepresented. |
| Controversial subject, sections or conclusions | <ul style="list-style-type: none">• Monitor the theological and political aspects of the articles and determine the legitimacy of the foundation for the investigation in light of the values of the journal• Assure that conclusions drawn are related to the evidence that is presented.• Move some controversial subjects to ‘current debates’ and allow or solicit counterpoint submissions |
| Challenge of partnering in developing countries | <ul style="list-style-type: none">• Researchers and authors may not use English as their primary language or may lack experience with strict referencing formats; editing oversight and assistance need to be provided. |

11. Timeline

Following is an approximate 18 month schedule. Shading refers to progress, while “X” refers to key performance indicator dates.

| | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | |
|--------------------------------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|---|
| Business Plan | - | - | X | | | | | | | | | | | | | | | | |
| Editorial Board | - | - | - | X | | | | | | | | | | | | | | | |
| Advisory Board | - | - | - | X | | | | | | | | | | | | | | | |
| Affiliations and Endorsements | | - | - | - | X | | | | | | | | | | | | | | |
| Donations sought | | - | - | X | - | - | - | X | - | - | - | - | - | X | - | - | - | - | |
| Partner grants | | | - | X | | | - | X | | | | | | X | - | X | | | |
| Journal System, and review | | | - | - | X | | | | | | | | | | | | - | X | |
| Marketing notices sent | | | | | | X | | | X | | | X | | | X | | | X | |
| Conference presentations | | | | X | | | | X | | | | | | | X | X | | | |
| Selective call for articles | | | | X | - | - | X | | | | | | | | | | | | |
| Website | | | - | X | X | | | | | | | | | | | | | | |
| Peer Review system | | | - | - | - | X | | | | | | | | | | | | | |
| Platform established | | | - | - | - | X | | | | | | | | | | | | | |
| Submissions, Publication | | | | | | | - | - | X | - | - | X | - | - | X | - | - | X | - |

12. Budget and Cash Flow for Years 1-5

| | 2013/14 | 2014/15 | 2015/16 | 2016/17 | 2017/18 |
|---------------------------|-------------------|------------------|------------------|------------------|------------------|
| Beginning Balance | \$0 | \$2,000 | \$2,000 | \$ 3,000 | \$ 3,000 |
| Income | | | | | |
| Charitable Donations | \$30,000 | \$18,000 | \$20,000 | \$20,000 | \$25,000 |
| Partnership Grants | \$90,000 | \$35,000 | \$35,000 | \$35,000 | \$35,000 |
| Advertisements | \$0 | \$1,000 | \$3,000 | \$4,000 | \$4,000 |
| Processing fee | \$0 | \$6,000 | \$6,000 | \$6,000 | \$6,000 |
| Subtotal | \$120,000 | \$ 60,000 | \$ 64,000 | \$ 65,000 | \$ 70,000 |
| Expenses | | | | | |
| Staff | \$70,000 | \$35,000 | \$35,000 | \$ 40,000 | \$ 40,000 |
| Equipment | \$5,000 | \$2000 | \$5,000 | \$2000 | \$5,000 |
| Marketing and Fundraising | \$ 15,000 | \$5,000 | \$5,000 | \$5,000 | \$5,000 |
| Journal management | \$5000 | \$3000 | \$3000 | \$3000 | \$3000 |
| Editing and formatting | \$8000 | \$8000 | \$8000 | \$8000 | \$8000 |
| Webhost management | \$15,000 | \$ 7,000 | \$ 7,000 | \$ 7,000 | \$ 7,000 |
| Subtotal | \$ 118,000 | \$ 60,000 | \$ 63,000 | \$ 65,000 | \$ 68,000 |
| Ending Balance | \$2,000 | \$2,000 | \$ 3,000 | \$ 3,000 | \$ 2,000 |

Assumptions:

6 - Charitable donations from individuals and family foundations

7 - Partnership grants especially from first year start up and then "readers"

8 - Advertisements from non-published sources

9 - Processing fee - \$150 per article average, scalable by country of primary author

13 - Staff rates include employment administration and payroll for a Editor who works 50% in Y1 and 30% after, and hourly other support.

14 - Equipment - Editor's computers, presume working from home offices

15 - Marketing - attending conferences, advertising in partner newsletters

16 - Journal management: system to receive, assign articles and communicate with authors

17 - Editing and formatting: doing copy editing, creating PDF, XML versions

18 - Webhost management - web host, indexing, DOI assignment, registration system social network, established in Y1 and maintained.