What I stand for as *BMJ Mental Health* editor

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Welcome to *BMJ Mental Health*. In January 2023, *Evidence-Based Mental Health* (*EBMH*) has changed its name to *BMJ Mental Health*, after 25 years of activity (the journal was founded in 1998) and after recently becoming one of the top 10 psychiatric journals in terms of impact factor. *BMJ Mental Health* is now online only and entirely open access. Changing name is not just a rebranding exercise. It is a fantastic opportunity to do things better and reach a wider audience of mental health clinicians and researchers. In the last year, *EBMH* published a variety of original articles, spanning from global health,[1] self-harm[2] and suicide[3] to pharmacological interventions[4 5] and psychological therapies,[6 7] from childhood mental disorders[8] to innovative methods in evidence synthesis.[9 10] This is a great achievement for a journal, which started as an international digest commissioning commentaries about already published papers and which did not have an impact factor until 2020. But at *BMJ Mental Health*, we have now even bigger ambitions. We aim to facilitate multidisciplinary collaboration and discussion among mental health professionals (psychiatrists and psychologists, and, more generally, researchers and/or practitioners in the field of mental health), offering a platform for the debate on clinically relevant topics and the exchange of new ideas to inform real-world practice and improve outcomes of patients and carers. During the course of this year, we will launch ad hoc calls to expand the editorial board and be sure that our journal covers the most important areas of clinical mental health. Closely aligned with *The BMJ*, we are looking for evidence-based, innovative research articles, methodological papers and provocative viewpoints with the potential to improve clinical practice, global policy in mental health, evidence-based training or the direction of future research. *BMJ Mental Health* will publish articles in all areas of mental health, including new topics such as digital health;[11 12] precision psychiatry, risk prediction/stratification;[13] consultation-liaison psychiatry;[14] data science and computational mental health.[15] Feel free to contact the editors to discuss your research and ideas—new submissions are open!

WHAT I STAND FOR AS BMJ MENTAL HEALTH EDITOR

In my first editorial for *BMJ Mental Health*, I would like to start with a thank you (and a personal note). Last December, I attended the annual Editors' Retreat, a regular appointment held at the BMA House in London to meet with colleagues working within the BMJ Group. This year the opening lecture was given by Richard Horton, editor-in-chief of *The Lancet*. His presentation covered his 30-year experience in the world of publishing, with a specific focus on his job as editor of the world leading medical journal. Richard said many interesting things about his professional life (sharing many tips and wise advice), but the one thing that really inspired me was when he said what he was told at the beginning of his career by his American mentor: 'as a journal editor, you need to have something to stand for' (sorry, I am not quoting verbatim). So, what do I stand for as *BMJ Mental Health* editor?

► I stand for embedding evidence-based research in routine mental healthcare. As a practising clinician, I feel the need to bridge the gap between research and the real world. For me this means three separate yet complementary things: (1) adopting a personalised approach, so people are assessed and treated as unique entities, not only with their individual clinical and demographic characteristics, but also with their own preferences and values; (2) implementing the proven best treatments in everyday clinical settings to materially improve the outcome of our patients, in the NHS and globally; (3) enrolling patients in clinical trials or other research protocols/programmes to offer them innovative treatments that are otherwise not available

► I stand for fighting stigma and ideology in mental health. I see *BMJ Mental Health* as a place where mental health professionals, patients and carers will share their different views and opinions in evidence-based arguments and constructive debates, avoiding factitious ideas but also nihilistic approaches.

► I stand for a true partnership with patients and carers across the journal's content and structure. This includes promoting the coproduction of research and commissioned articles and conducting patient review alongside traditional peer review.

Thank you, Dr Horton, for your contagious passion and for fuelling my motivation to continue my job as journal editor.

A Gold Open Access journal

One of the big changes of our journal is that we are now fully open access. *BMJ Mental Health* is compliant with Plan S, an initiative for Open Access publishing launched in 2018 and supported by cOAlition S, an international consortium of research funding and performing organisations. Plan S requires that scientific publications that result from research funded by public grants must be published in compliant Open Access journals or platforms. All articles in *BMJ Mental Health* will be published as CC-BY NC as default and authors will be asked to pay an article processing charge (APC) on acceptance. BMJ journals offer waivers for the full APC where all authors are based in low-income

countries. Moreover, a number of institutions have open access agreements with BMJ which can either cover the whole cost of open access publishing for authors at participating institutions or can allow authors to receive a discount of the APC. The Editorial Board of *BMJ Mental Health* look forward to making research published in the journal more accessible and more transparent.

For more information about *BMJ Mental Health*, please visit the journal website: https://mentalhealth.bmj.com/.

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