EDITORIAL
Journal Section

The Inaugural Issue of the Journal of Global Neurosurgery
Paul E Farmer, MD, Ph.D.1

1Kolokotrones University Professor, Harvard University
Chair, Department of Global Health and Social Medicine,
Harvard Medical School, Chief, Division of Global Health
Equity, Brigham and Women’s Hospital, Co-founder,
Partners In Health

Correspondence
Paul E Farmer, MD, Ph.D.
Kolokotrones University Professor, Harvard University
641 Huntington Avenue Boston, Massachusetts 02115
Email: paul_farmer@hms.harvard.edu

Abbreviations:
LMIC’s: low- and middle-income countries.
JGNS: Journal of Global Neurosurgery

Over the last decade, the field of Global Surgery, which some of us had termed the “neglected stepchild of Global Public Health,” has expanded to bridge the gap in surgical care. Evidence of a burgeoning field of research, practice, and cooperation abounds: the 16 countries of the Southern Africa Development Community, for example, are working together to strengthen surgical care in the region. During the most recent meeting of the World Health Organization’s Western Pacific Regional Committee, the 37 member states unanimously agreed to a regional action framework for safe and affordable surgery. A global coalition is forming to meet the need for 143 million surgical procedures in low- and middle-income countries (LMICs) by the end of the decade.

Academic institutions have an essential role and responsibility in the quest for global access to safe and affordable surgical services. In response to pressing material disparities faced by district hospitals, academic institutions can partner with the public sector and bolster access to services by helping provide the staff, space, systems, and social supports required for quality care. By conducting relevant and timely research, investigators inform the planning, financing, and implementation of surgical care delivery programs. Furthermore, specialists are well placed to bring their expertise to bear on disparities in access and outcome, and neurosurgeons are advancing research to link their area of clinical practice to broader efforts for global health equity; this includes, of course, an emphasis on forging fruitful and equitable research collaborations across the globe. To that end, I congratulate all involved in launching the inaugural issue of the Journal of Global Neurosurgery (JGNS).

The current system of prohibitive publishing fees and paywalls in academic scholarship is a central barrier to building research capacity in LMICs. Its perpetuation of power imbalances in transnational research collaborations has been well documented as global educational health has evolved. This journal will not charge publishing or access fees and is free to authors and readers alike. Of course, seeking to alleviate financial barriers to accessing research is just one of many obstacles’ researchers face in LMIC’s. The Journal of Global Neurosurgery seeks to actively accompany researchers through mentorship opportunities and partnerships to support data collection, research design, analysis, and writing—without expectations for co-authorship.

I commend the Journal of Global Neurosurgery for its commitment to equity and accompaniment. It is my sincere hope that this journal will establish the field of Global Neurosurgery as an essential part of neurosurgical research, training, practice, and policy.