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A systematic survey of editorial diversity in substance use and addiction journals

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Abstract

Background Medical journals play a crucial role in promoting health equity through diverse leadership. Diversity is also recognized as a critical priority for many organizations and institutions working within the addiction research space, given the disproportionate harms experienced by diverse subpopulations experiencing addictions. We sought to assess the extent of editorial diversity in publishing among substance use and addiction journals.

Methods A systematic survey of journals in substance use and addictions was conducted for the period January 1, 2023 to December 31, 2023. Of the 582 journals screened, data were extracted from 33 journals that met our inclusion criteria. To comprehensively assess diversity across gender, geographic, and socioeconomic status for editorial boards, we employed the Journal Diversity Index (JDI) system. We also assessed the perceived racial background of editors. We used descriptive statistics to summarize results.

Results Among 1738 editorial board members, 57.8% ($n=1004$) were men. White men ($n=816$; 46.9%) were the most represented group, followed by White women ($n=615$; 35.4%). White men were overrepresented in Editor-in-Chief/Executive Editor category compared to other positions. Most ($n=1640$; 94.4%) editorial board members were affiliated with high-income countries, with the majority from the USA ($n=860$; 49.5%), followed by Australia ($n=191$; 11%) and the UK ($n=157$; 9%). Based on JDI scores, 22 of the 33 journals (67%) were rated poor, eight (24%) moderate, two (6%) very poor, and one (3%) good.

Conclusions There is limited diversity among editorial board members of substance use and addiction journals. Monitoring multidimensional diversity metrics and implementing transparent, accountable recruitment and mentoring strategies may help reduce publication inequities and broaden the perspectives represented in substance use research.

Keywords Diversity · Substance-related disorders · Addiction medicine · Publishing · Editorial policies

Abbreviations

LMICs	Low-middle-income countries
UMICs	Upper-middle-income countries (UMICs)
LICs	Low-income countries (LICs)
HICs	High-income countries (HICs)
JDI	Journal diversity index

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EDI	Equity, diversity, and inclusion
MeSH	Medical subject headings
NLM	National library of medicine
API	Asian/Pacific Islander
AIAN	American Indian/Alaskan native

Introduction

Diversity within academic publishing is increasingly recognized as a critical component of health equity, reducing research bias, and enhancing the breadth and quality of scientific literature [1, 2]. Academic editorial boards play a major role in shaping the direction of research, as they influence *what* gets published, by *whom*, and *how* topics are framed and prioritized [3, 4]. However, evidence across disciplines suggests significant underrepresentation of marginalized groups, including women, racial and ethnic minorities, and scholars from low- and middle-income countries (LMICs) [5–11]. Studies consistently show gender imbalances in editorial leadership. For example, women account for only 30% of editorial board members in psychiatry journals [5], 17% in Latin American surgery, anesthesia, and obstetrics journals [6], 28% in rheumatology journals [7], and 44% of global health journals [11]. These differences are more pronounced in higher-ranking roles; for example, on average, women hold only 20% of Editor-in-Chief positions in top-ranked medical journals [8].

While concerning across all medical fields, gaps in editorial diversity may have particularly important implications for substance use and addiction research. Substance use-related harms and access to evidence-based care are unequally distributed across racial, socioeconomic, and geographic contexts [12–15]. Many LMICs face substantial treatment gaps and limited investment in substance use-related services [15]. Yet historically, addiction research has often been led by researchers from institutions in high-income countries (HICs) [16]. Such imbalances may reproduce colonial patterns of knowledge production by concentrating influence over research priorities, interpretation, and knowledge dissemination within 'Global North' institutions, while researchers and institutions in the 'Global South' have less authority over research knowledge production [17]. This imbalance is particularly concerning given that cultural, social, and economic contexts fundamentally shape patterns of substance use, treatment approaches, and policy responses, making diverse editorial perspectives not merely beneficial but essential for producing relevant and applicable research. Moreover, because addiction research can influence policy and practice, limited diversity in editorial leadership may narrow the range of evidence and perspectives that shape drug policies and healthcare [9].

These concerns are reflected in the composition of editorial boards with editors primarily affiliated with high-income countries (HICs). For example, an analysis of global health journals suggests that 68% of editorial board members and 73% of Editors-in-Chief are based in HICs [10]. Another analysis of diversity among the editorial board members of medical education journals showed that about 93% were based in HICs, with 66% from the US, Canada, the UK, and Australia [18]. Racial and ethnic diversity also remains limited, although less studied, with underrepresented minorities including less than 10% of editorial board members in many fields [9]. These disparities undermine the breadth and applicability of research, perpetuate structural barriers to career advancement for underrepresented groups, and reinforce systemic inequities in academia [3]. Conversely, having diverse editorial board members is associated with broader topic selection, a wider pool of peer-reviewers representing different epistemological orientations, and reduced conscious and unconscious publication bias [3, 11].

Despite the critical importance of diverse perspectives in addiction research, there is a notable absence of systematic research examining editorial diversity in substance use and addiction journals. A 2018 study documented geographic underrepresentation among the editors [16], but it did not examine intersecting identities or assess multiple dimensions of diversity, including race, socioeconomic context, and geographic affiliation. This study aims to systematically assess diversity across editorial board members in substance use and addiction journals.

By applying multidimensional diversity metrics, including gender, geography, race, and socioeconomic status, this study provides additional insights on diversity gaps in this critical area of research. The findings have the potential to guide journals in developing their equity, diversity, and inclusion (EDI) initiatives, as well as efforts to improve the breadth and global relevance of substance use research.

Methods

We conducted a cross-sectional systematic survey of editorial board members' diversity in substance use and addiction journals for the period January 1, 2023, to December 31, 2023. We systematically identified journals using Medical Subject Headings (MeSH) terms in the National Library of Medicine (NLM) using the following search strategy: (Addiction Medicine [MeSH Terms] OR Addictive Behavior [MeSH Terms] OR Substance-Related Disorders [MeSH Terms]) AND ncbijournals [All Fields]. Inclusion criteria for journals were: (i) publishing in English; (ii) having editorial board information on their websites; (iii) having a non-zero impact factor based on 2022 Journal Citation Reports; and (iv) being focused on substance use and addiction research, based on each journal's stated aims and scope.

Two authors (FN and MK) independently screened the journal titles and their websites and extracted data on editorial board members. Consistent with previous studies, editorial positions were grouped into six hierarchical categories based on the role and job description: (i) Editor-in-chief and/or Executive Editor, (ii) Senior/regional Editors, (iii) Associate/topic Editors, (iv) Editorial board members, (v) Statistical Editors, and (vi) Other editorial positions [11, 19]. Disagreements were resolved through discussion. We also extracted data on editorial board members' likely gender, geographical affiliation, and race. Gender was operationalized using the binary categories, as the name-based classification tool used in this study provided only binary classifications. This approach maintains comparability with previous studies of editorial diversity that inferred gender using publicly available information and name-based inference tools [6, 10, 11].

We assessed gender using a sequential approach. First, two authors independently reviewed journal websites and publicly available professional profiles of editorial board members for gender-related information, such as self-described gender and pronouns. Disagreements were resolved through discussion. When no explicit gender information was available, we entered the editorial board member's first name and country information, where available, into Genderize.io [20], a probabilistic name-based gender classification tool, which has been previously used in studies of editorial diversity [10, 11, 21]. Genderize.io assigns names to binary male or female categories and provides a probability score for each classification [21]. We accepted classifications with a probability score of ≥ 0.95 [10, 11]. Gender was recorded as unknown when no explicit information was identified or when the Genderize.io classification did not meet the specified threshold.

To identify the country of primary affiliation of the editorial board members, we reviewed journal websites for self-reported information, institutional website(s) of editorial board members, and primary affiliations reported in their recent publications. Countries were then classified into one of the seven World Bank geographic regions: North America, East Asia and Pacific, Middle East and North Africa, South Asia, Europe and Central Asia, Latin America and the Caribbean, and Sub-Saharan Africa [22]. The country of affiliation was also classified based on the World Bank's economic classification: HICs, upper-middle-income countries (UMICs), LMICs, and low-income countries (LICs) [22]. We also assessed the difference in proportions of editorial members affiliated with the 'Global North' and 'Global South' settings [11].

We used the Journal Diversity Index (JDI) [11], which evaluates three diversity domains of perceived gender diversity (i.e., based on pooling index of gender differences, presence of women in leadership roles, and statistical significance of gender distribution), geographic diversity (i.e., based on pooling index of Global North/South representation and presence of editors from all World Bank regions), and socioeconomic diversity (i.e., based on pooling index of high/low-income country representation and presence of editors from all World Bank income levels) [11]. Raw JDI scores ranged from 2 to 40 and were converted to percentages by dividing each score by 40

and multiplying by 100. The final score categories were classified as very poor diversity (≤20%), poor diversity (21–40%), moderate diversity (41–60%), good diversity (61–80%), and excellent diversity (81–100%) [11].

To assess inferred racial/ethnic background, we first reviewed journal websites, institutional profiles, and other publicly available professional sources through Google searches. When publicly available information was unavailable or insufficient to assign a category, we used NamePrism [23] as a fallback name-based classification tool. NamePrism is a widely used machine-learning-based platform that assigns individuals to six broad racial categories: Asian/Pacific Islander (API), American Indian/Alaskan Native (AIAN), Black, Hispanic, two or more races (2PRACE), and White. Due to limited representation, AIAN and 2PRACE categories were excluded from the analysis. Data were stored and organized using Microsoft Excel. Data analysis was carried out using R software (version 4.3.2).

Results

Of the 582 journals identified in the initial search, 33 met the inclusion criteria and were included in the analysis. All journals were based in HICs, with 42.4% ($n=14$) from North America, 54.5% ($n=18$) from Europe and Central Asia, and 3.03% ($n=1$) from East Asia and the Pacific. None of the journals were based in the Middle East and North Africa, Latin America and the Caribbean, South Asia, or Sub-Saharan Africa. Journals were predominantly based in the USA ($n=14$; 42.4%) and the UK ($n=9$; 27.3%), with 2 (6.1%) from Switzerland. Only one journal was based in the following countries, each: Australia, Finland, Greece, Ireland, Italy, Netherlands, Poland, and Spain.

We included data from 1738 editorial board members (median [range] board size: 44.0 [13–213]), 57.8% ($n=1004$) of whom were men and 42.2% ($n=734$) were women. Out of the total 1738 editorial board members, 1431 (82.3%) were identified as White, 159 (9.1%) as API, 111 (6.4%) as Hispanic, and 37 (2.1%) as Black. No editorial board members were ultimately classified in the AIAN or two-or-more-race categories. Among all the editorial board members, White men ($n=816$; 46.9%) were the most represented group, followed by White women ($n=615$; 35.4%). Among editorial board members who were men, 816 (81.3%) were identified as White, 98 (9.7%) as API, 73 (7.3%) as Hispanic, and 17 (1.7%) as Black. Among editorial board members who were women, 615 (83.7%) were identified as White, 61 (8.3%) as API, 38 (5.1%) as Hispanic, and 20 (2.7%) as Black. The distribution of editorial board members' gender and race by editorial role categories is presented in Fig. 1. White men were overrepresented in the Editor-in-Chief/Executive Editor category compared to other positions.

Regarding geographical affiliations of editorial board members, a total of 59 countries were represented across the included journals. The USA was the most frequent contributor ($n=860$; 49.5%), followed by Australia ($n=191$; 11%) and the UK ($n=157$; 9%). Figure 2 shows the ten most frequently represented countries of primary affiliation. Most editorial board members ($n=916$; 52.7%) were affiliated with institutions within North America, Europe and Central Asia ($n=498$; 28.7%), and East Asia and the Pacific ($n=245$; 14.1%). Conversely, the least represented geographic regions were South Asia ($n=12$; 0.7%), Sub-Saharan Africa ($n=14$; 0.8%), the Middle East and North Africa ($n=15$; 0.9%), and Latin America and the Caribbean ($n=38$; 2.2%). Almost all editorial board members ($n=1640$; 94.4%) were affiliated with HICs.

The calculated JDI scores are presented in Supplementary Table 1. The median JDI score across the included journals was 14.0 (Q1-Q3: 10–17), with the lowest score (i.e., 8) belonging to *Journal of Drug Education* and *Substance Abuse*, and the highest (i.e., 26) to *Tobacco Control*. Overall, 22 of the 33 journals (67%) were classified in the poor JDI category, 8 (24%) in the moderate category, 2 (6%) in the very poor category, and 1 (3%) in the good category; none were classified as excellent.

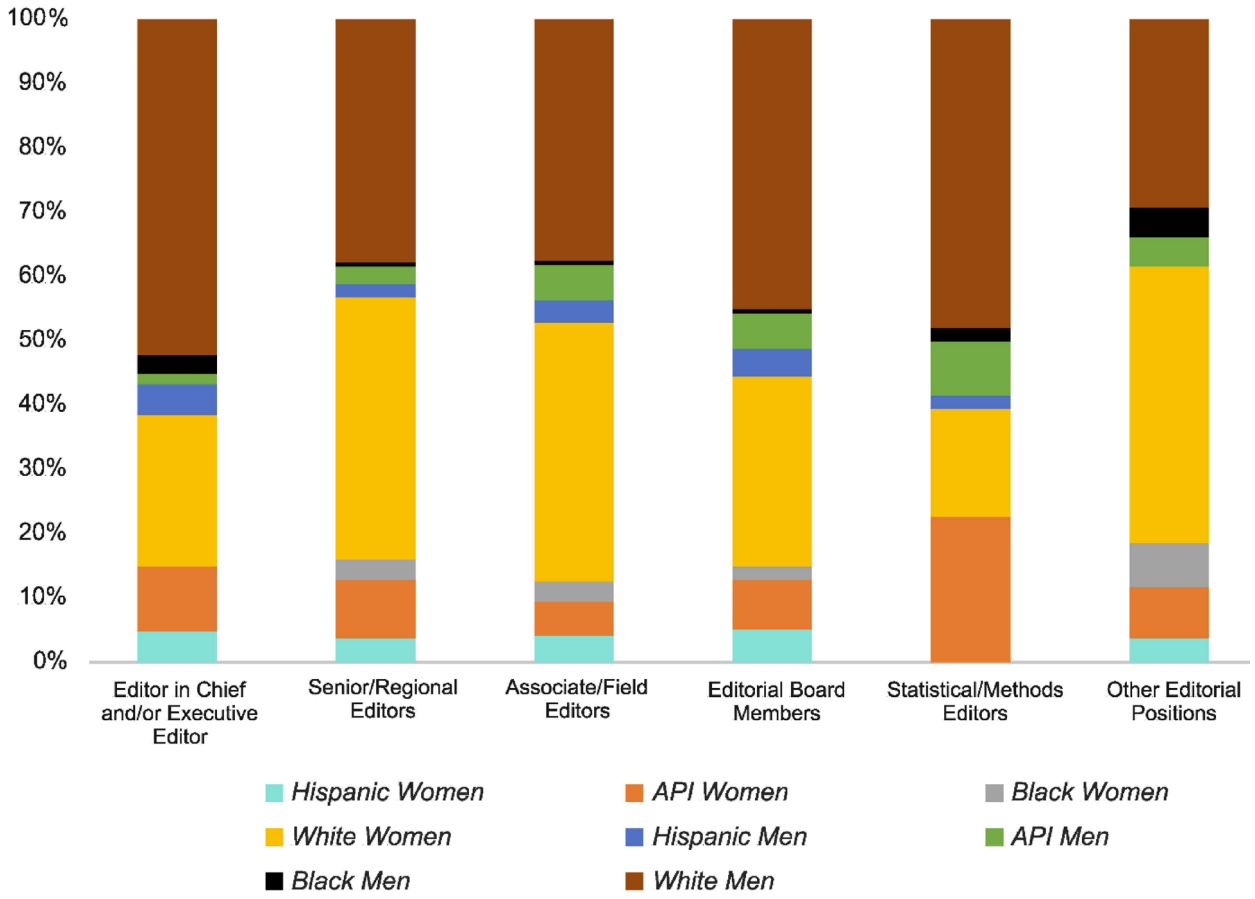


Fig. 1 Gender and race by editorial role

Discussion

In this systematic survey, we assessed the diversity of editorial board members across 33 substance use and addiction journals, examining gender, racial, socioeconomic, and geographical representation among 1738 editorial board members. Our findings revealed persistent patterns of disparity across all diversity indicators, with underrepresentation of women, racial minorities, and scholars from LMICs.

Our results showed a moderate gender disparity among editorial board members, with 57.8% men and 42.2% women in 2023. This is similar to a 2018 study of editorial diversity in addiction journals, which found that women represented 39% of the total editorial staff and men represented 61% [16]. This finding also aligns with recent studies in global health journals that reported 40–44% female editorial representation [10, 11]. However, the gender imbalance was more pronounced in senior editorial positions, with women holding less than one-third of Editor-in-Chief/Executive Editor roles. Consistent with the 2018 study in which men held 80% of Editor-in-Chief positions in addiction journals [16], our findings highlight the persistence of gender disparities in editorial leadership of substance use and addiction journals and little progress in the past few years. The underrepresentation of women in key decision-making positions in substance use and addiction journals reflects ongoing and pervasive gender-based systemic barriers to career development and opportunities in academia.

Our study also found a concerning lack of racial and ethnic diversity among substance use and addiction journals, with 82.3% of editorial board members identified as White, while only 2.1% were Black, 6.4% Hispanic, and 9.1% Asian/Pacific Islander. This finding is particularly concerning when compared to existing research on racial representation in medical journal leadership, where studies have consistently documented the systematic

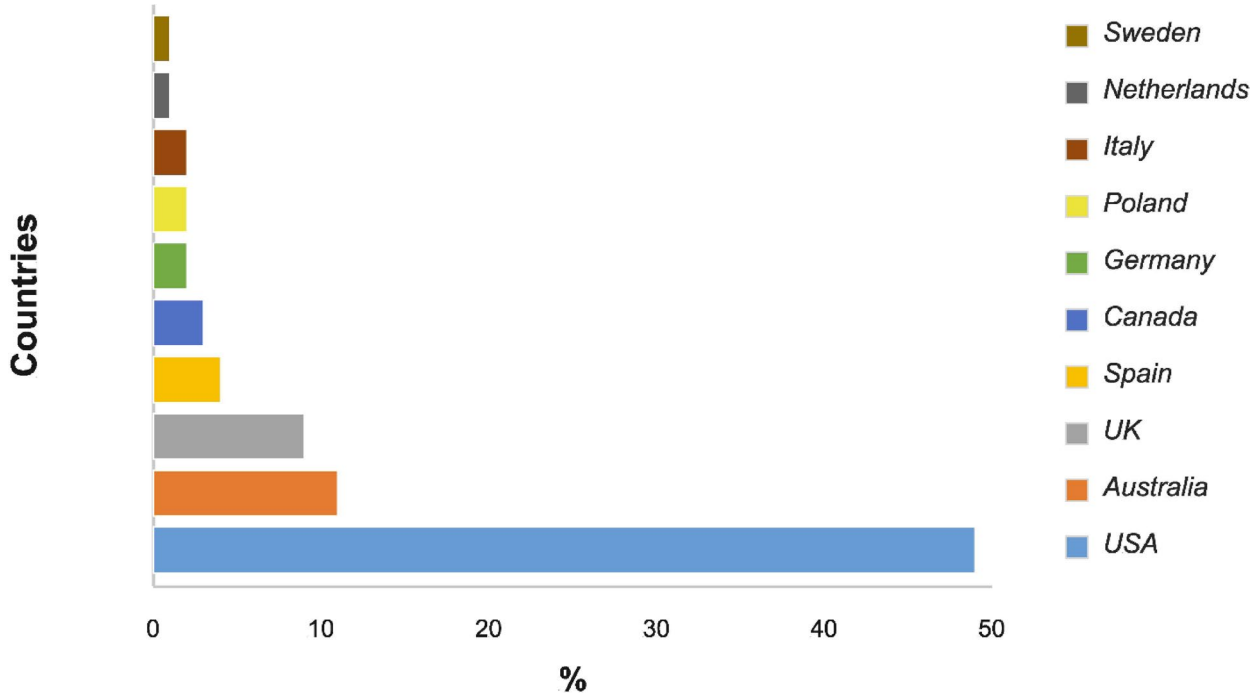


Fig. 2 Top ten countries of the editorial board members' primary affiliation

exclusion of underrepresented minorities from editorial positions [9]. The high proportion of White editors was especially pronounced in senior roles (i.e., Editor-in-Chief and Executive Editor). This lack of representation could perpetuate existing biases in research priority setting [24] and publication practices, as manuscripts from underrepresented regions face longer acceptance delays and scientists from racial and ethnic minorities receive fewer citations than their White counterparts [25]. The homogeneity in editorial leadership in substance use and addiction journals may contribute to creating a publication environment where research addressing the substance use challenges of diverse populations may be systematically undermined and undervalued.

Our results also indicated a significant overrepresentation (94.4%) of editorial board members from HICs. This finding is consistent with broader patterns observed in global health publishing where studies have shown that over two-thirds of editors are based in HICs [10, 11, 16, 18, 26], and medical education journals demonstrate over 90% representation from HICs [18]. The overrepresentation of editors from the 'Global North' and HICs found in our study is particularly problematic given that regions with substantial prevalence and burden of opioid use, such as South-West Asia/Near and Middle East and Africa [27], have minimal representation on editorial boards. This imbalance highlights the need for greater inclusion of scholars from underrepresented regions to ensure diverse perspectives in substance use and addiction research, as the current geographic homogeneity may result in research priorities that inadequately address the substance use challenges faced by populations in LMICs and the 'Global South'.

Implications and path forward

Editorial underrepresentation by gender, race and ethnicity, socioeconomic position, and geographic affiliation is not only an EDI issue, but also reflects the distribution of power within scholarly publishing. When editorial authority remains concentrated among socially and institutionally privileged groups, existing inequities may be reinforced by shaping whose scholarship, perspectives, and research priorities are recognized, legitimized, and disseminated [3, 28].

Based on the literature and evidence from other medical specialties, addressing diversity gaps in substance use research requires implementation of systematic, multi-level efforts at both journal and field levels [1, 2, 4–11]. Journals should establish clear EDI goals supported by transparent criteria for recruiting, appointing, and promoting editors, EDI training for editorial board members and Editors-in-Chief, as well as diversity metrics that extend beyond binary gender categories where feasible. Accountability mechanisms should include assigning responsibility to a designated committee, establishing measurable diversity targets through appropriate consultation, routinely monitoring board composition, recruitment, promotion, and turnover, and publicly reporting aggregated metrics and progress over time [1, 2, 4]. Journals should use these data to periodically revise their recruitment and retention strategies. Publishers can also support implementation by appointing EDI leads and providing the resources needed to evaluate and sustain these initiatives [1, 4].

Recruitment strategies should move beyond traditional, recall-based methods (i.e., relying on who "comes to mind") to recognition-based methods (i.e., systematically identifying qualified candidates), particularly from underrepresented groups. Existing EDI frameworks can help journals define diversity objectives, reform editorial processes, and communicate progress [1, 11]. At the field level, substance use organizations, publishers, and journals should create structured pathways to editorial leadership through mentorship, training, and fellowship programs, particularly for early-career racialized scholars and researchers from LMICs [4] Cross-journal sharing of effective practices, publisher-level coordination, and attention to regional representation can further strengthen accountability and broaden participation. Coordinated and sustained action is needed to develop editorial leadership that better reflects the diversity of the global substance use research community.

Our study did not assess whether editorial board members had lived and/or living experience of substance use, nor whether such experiences were disclosed, recognized, valued, or meaningfully incorporated into editorial roles and decision-making. Future EDI efforts in substance use and addiction publishing should meaningfully include this group as they are directly impacted by substance use-related harms and drug policies [29]. Their involvement can help ensure that published research reflects community-defined priorities, accurately represents experiences of substance use and service access, and avoids stigmatizing or harmful framing. Editorial diversity should therefore extend beyond gender, race, and geography by creating opportunities for people with lived and/or living experience to influence editorial decision-making, journal priorities, and knowledge production [29, 30]. Such involvement should move beyond tokenistic representation and be guided by principles of meaningful engagement and genuine decision-making authority [29].

Limitations

Our findings should be interpreted considering several limitations. First, the cross-sectional design limits our ability to assess longitudinal trends in editorial diversity. Second, our binary classification of gender did not capture gender identities beyond binary categories, and we did not assess sexual orientation or disability. Third, country-level income classification does not capture editors' individual socioeconomic circumstances and should not be interpreted as a measure of individual-level socioeconomic status. Fourth, use of name-based classification tools may have introduced misclassification error. We did not record the proportion of classifications from Genderized.io, which limits our ability to assess the potential extent of gender misclassification. Similarly, NamePrism may perform differently across racial and ethnic groups and may disproportionately misclassify racialized individuals [31]. Because NamePrism was used only when publicly available information was insufficient, we did not have paired classifications with which to assess agreement between the two approaches. Consequently, the representation of some racial and ethnic groups may have been under- or overestimated. Fifth, we did not assess editorial diversity with respect to lived and/or living experience of substance use. Sixth, our restriction to English-language journals with a non-zero Journal Impact Factor and publicly available editorial-board information may have excluded regional or newer journals, particularly those based outside HICs, and may therefore have contributed to the observed geographic concentration. Lastly, the JDI does not encompass several

potentially important dimensions of diversity, including sexual orientation, Indigenous identity, gender identities beyond binary categories, individual-level socioeconomic status, disability, and lived and/or living experience of substance use. Editorial diversity studies commonly rely on publicly available information, which limits the extent to which diversity can be adequately assessed. Future research should use primary data collection to obtain self-reported sociodemographic information and provide a more comprehensive assessment of diversity.

Conclusions

This systematic survey underscores the need to improve the diversity of editors and editorial board members across substance use and addiction journals. Two-thirds of the included journals were classified as having poor diversity, and an additional 6% were classified as having very poor diversity. The predominance of editors affiliated with HICs, together with limited gender, racial and ethnic, and geographic diversity, suggests that editorial leadership does not reflect the breadth of the global scholarly community or the varied contexts in which substance use research is conducted. These disparities may shape research priorities, publication decisions, and the relevance of the evidence disseminated across populations and settings. Meaningful progress will require transparent and inclusive recruitment and promotion processes, structured mentorship and pathways to editorial leadership for underrepresented scholars, meaningful inclusion of people with lived and/or living experience, and routine monitoring and public reporting of diversity metrics. Sustained and accountable action is needed to develop editorial leadership that better reflects the global substance use research community and supports knowledge production that is relevant to the diverse communities affected by substance use.

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Author contributions MK conceptualized and designed the study, including contributing to writing the original draft and providing critical revisions. FN contributed to screening, data analysis, writing original draft and revising final manuscript. DW provided critical revision and feedback. We also acknowledge Shahryar Moradi who contributed to the early phases of the project.

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Data availability All data used is is publicly available on the included journals' websites.

Declarations

Ethics approval and consent to participate Not applicable given this was a systematic survey.

Competing interests The authors declare no competing interests.

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