

Gender Representation on Editorial Boards of Rheumatology Journals

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Women are often under-represented on the editorial boards of medical journals.¹ To assess whether this is the case in rheumatology journals, gender representation among editors-in-chief and editorial board members was examined in all the 34 rheumatology journals included in the 2021 Web of Science Journal Citation Reports (appendix). Data on the composition of the editorial boards of these journals were collected from their websites in December 2021. The binary gender of each editorial board member was estimated using the name-to-gender inference platform Gender API (<https://gender-api.com/>) and cross-checked against the personal pronouns and photos used on their institutional web profiles, when available. Moreover, the occupation of all board members as an academic/clinician or a publishing professional was established based on their affiliations with an academic/clinical institution or a publishing company, respectively.

Table 1 shows estimated gender proportions for editorships-in-chief or equivalent highest-ranking editorships and for all editorial board memberships. In total, women hold 15% of editorships-in-chief and 27% of editorial board memberships. Across the 34 rheumatology journals, only seven (21%) have gender-balanced editorial boards, i.e. where female representation is in the 40%-60% gender balance zone. Importantly, gender representation varies greatly by occupation. In four journals, where the role of editors-in-chief is performed by publishing professionals, there is parity in female and male editorships-in-chief. Among all editorial board memberships held by publishing professionals, there are significantly more female than male board members. It appears that while academic rheumatology is male-dominated, academic publishing is female-dominated.

Table 1: Estimated gender representation on editorial boards of 34 rheumatology journals included the 2021 Web of Science Journal Citation Reports, December 2021

Role and occupation	M (%)	F (%)
Editorship-in-chief or equivalent*		
- Academic/clinician	31 (89%)	4 (11%)
- Publishing professional	2 (50%)	2 (50%)
- Total	33 (85%)	6 (15%)
Editorial board membership**		
- Academic/clinician	1612 (74%)	555 (26%)
- Publishing professional	15 (26%)	42 (74%)
- Total	1627 (73%)	597 (27%)

* The total number of editorships-in-chief is greater than the number of journals because three journals had two and one journal three joint editorships-in-chief or their equivalents.

** Editorial board memberships (including editors-in-chief) were determined for each journal and then aggregated; the number of editorial board memberships is greater than the number of persons performing these roles because one person can serve on several editorial boards.

Gender representation on editorial boards matters because editorship-in-chief and editorial board memberships are prestigious roles that increase the visibility of role-holders and provide opportunities to influence research and practice through agenda setting, editorial decision-making, and peer review. Therefore, improving gender representation on journal editorial boards is likely to contribute towards greater gender equity in rheumatology. It is imperative for rheumatology to better represent patients and society. The majority of rheumatology patients are women, and the

proportion of female rheumatologists in many countries is expanding. Inadvertently, journals that do not yet have gender-balanced editorial boards may be contributing to journal-level barriers that slow the advancement of women and prevent them from reaching their full potential.² Moreover, female research leaders tend to investigate sex- and gender-related variables more frequently than male research leaders. It is likely that greater diversity on editorial boards would positively impact on the quality of science through adequate consideration and reporting of sex- and gender-related variables.

The example of the seven rheumatology journals with a 40%-60% female representation on their editorial boards—*Acta Reumatologica Portuguesa*, *Arthritis & Rheumatology*, *Arthritis Care & Research*, *Lancet Rheumatology*, *Lupus Science & Medicine*, *Nature Reviews Rheumatology*, and *Seminars in Arthritis and Rheumatism*—suggests that gender-balanced editorial boards are feasible to achieve. We call on all rheumatology journals to review representation on their editorial boards and monitor gender balance. In doing so, the Committee on Publication Ethics (COPE) provides useful guidance on how to diversify editorial boards.³ Among others, potential strategies include advertising vacancies through open calls, establishing and monitoring gender diversity targets, and making editorial board appointments fixed term.

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