The Future of CDI

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Communicable Diseases Intelligence aims to disseminate information on the epidemiology and control of communicable diseases in Australia. Communicable Diseases Intelligence invites contributions dealing with any aspect of communicable disease epidemiology, surveillance or prevention and control in Australia. Submissions can be in the form of original articles, short reports, surveillance summaries, reviews or correspondence. Instructions for authors can be found in Commun Dis Intell 2016;40(1):E189–E193.

Communicable Diseases Intelligence contributes to the work of the Communicable Diseases Network Australia.

Dear readers and contributors,

I would like to share with you some of the upcoming changes to the Communicable Diseases Intelligence (CDI) publication as we finalise the shift to a completely digital future and open access format.

CDI has been published since 1977, and was originally designed and produced with the intent to be printed. Although it is now available on the Department of Health’s website, print has always been the final intent in the CDI production workflow.

One of the outcomes of that previous approach was to divide yearly volumes into quarterly issues, which is an artificial barrier to publication in the digital space and slows down the entire publication. As you may be aware, in contrast to browsing print or online issues in the past, scientific content is now mostly discovered at article level. From September 2018, the CDI model will change to a single per-article publication.

Article submissions will still be collated into yearly volumes for readers who prefer to browse them that way, however each article will also be directly accessible by a unique identifier. These unique identifiers are generated using Digital Object Identifier (DOI), an international standard for document identification. This new approach considers the changes in the ways researchers create and explore content nowadays, and the need to conform to the current industry standards.

From a researcher’s perspective, speed of publication is becoming an increasingly important factor and increases the impact of the research. By moving to article-level publication, CDI is disengaging the state of each article in the production timeline from the others, improving the publication speed.

Another recent development is storing scientific data on digital repositories which will minimise unforeseen loss. The CDI team is in the process of storing its content to repositories certified by U.S. National Library of Medicine.

With these continued efforts we are re-affirming our commitment to publishing peer-reviewed articles in the shortest possible timeframe, following an open access model that is online and free of cost to both authors and readers.

As we venture into this new era of CDI, we invite you to contribute by submitting articles, or letting us know if you are interested in being involved in our peer-review process as a peer reviewer. The CDI team will continue to review and adjust the processes supporting the publication of CDI and update our readership and contributors when necessary.

Once again, thank you for your continued support of this important peer-reviewed scientific journal, and being a part of the extended CDI community.

Yours sincerely

Cindy Toms
Editor – CDI
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