Special article

Epidemiology and Health Services: 25 years in review

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Abstract

In 2017, *Epidemiology and Health Services: journal of the Brazilian National Health System* (RESS) celebrates 25 years. RESS was created in 1992 as SUS Epidemiological Report (IESUS) and, in 2003, adopted its current name and format. This study's objectives are to describe the subjects covered and the geographical spread of authors' institutions of the articles published in IESUS and RESS; and to map RESS' editorial policies and strategies in the following areas of focus: education, information, communication, co-responsibility and anticipation. The comparison between IESUS (1992-2002) and RESS (2003-2016) periods revealed an increase in the number of documents published, as well as an increase in the topics covered, the geographical spread of the authors and the scope of publication. The mapping of editorial policies and strategies has evidenced a large number of initiatives aligned with the principles of publication ethics, which may have contributed to the development of the journal.

Keywords: Publishing; Periodicals; Epidemiology; Public Health Surveillance; Epidemiological Surveillance; Historical Article.

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Introduction

In 2017, *Epidemiology and Health Services: journal of the Brazilian National Health System* (RESS) is celebrating its 25th anniversary. Its origins trace back to the beginning of the 1990s, when the need to expand the application of epidemiology in services for health situation analyses, with the objective of subsidizing the elaboration of public policies, strongly influenced the creation of the National Center of Epidemiology (Cenepi), a department of the National Foundation in Health (Funasa).[1]

In this context, in 1992, the SUS *Epidemiological Report* (IESUS), edited by Cenepi/Funasa, was created. Its first issue was presented by Adib Jatene (1929-2014), who was the Minister of Health at the time; he defined IESUS as another important step to consolidate the Brazilian National Health System (SUS), highlighting the uniqueness of epidemiological data disclosure and emphasizing the importance of the integration between the Ministry of Health and several society sectors.[2]

> *In its trajectory, RESS has been proving to be an important instrument to support federal management of health surveillance, in its mission to make epidemiological knowledge available to the public.*

In 2003, IESUS became RESS. The change in the name aimed at representing better its main mission: to disseminate epidemiology applied to health services and the epidemiological knowledge for health professionals who work at SUS, in accordance with the competences of the federal health authority of promoting development of epidemiology in health services.[3]

In that same year, the Secretariat of Health Surveillance, of the Ministry of Health (SVS/MS) was created in order to strengthen the health surveillance actions. Meanwhile, Cenepi was extinct and the newly-created General Coordination for the Development of Epidemiology in Services (CGDEP), of the Department of Health Surveillance Management (DEGEVS), of SVS/MS became responsible for editing RESS.[4]

In the period from 2003 to 2011, RESS evolved within SVS with relative autonomy and institutional stability. The following period was characterized by professional training and expansion of its influence in the area of Public Health.

As of 2011, with the expansion of its editorial team and the implementation of its strengthening plan – which envisaged the accomplishment of several actions aiming at the journal's improvement and adequacy to publication standards to meet the indexing criteria required by international bibliographic bases –, RESS took stand among the main Brazilian journals in the Public Health area, with emphasis in epidemiology.[5]

In a short term, RESS was indexed in SciELO Brasil (2014) and SciELO Public Health (2015) collections,[6] as well as in the bibliographic bases Medline (2016),[7] Scopus, Embase (both from Elsevier) and Emerging Sources Citation Index (ESCI, a new database within Clarivate Analytics' Web of Science).[6] Currently, RESS is a communication and scientific dissemination vehicle and is aligned with international quality standards.

In 25 years of history, RESS kept track of the epidemiology and health surveillance scenarios, which advanced as areas of public policies and as fields of specific knowledge, with relevant social impacts. In its trajectory, RESS has been proving to be an important instrument to support federal management of health surveillance, in its mission to make epidemiological knowledge available to the public.[5] It is the only scientific journal edited by the Ministry of Health and the only Brazilian scientific journal that prevails epidemiology in services, and, more specifically, at SUS.[8,9]

In the year of RESS silver jubilee, it is time to make a review of its winning trajectory, which can support future actions, having as a commitment the continuous improvement of the journal's quality and the increase in its visibility. This study has two objectives: (i) to describe the subjects covered and the geographic spread of authors' institutions of the articles published in IESUS and RESS (2003-2016); and (ii) to map RESS editorial policies and strategies in the following areas of focus: education, information, communication, co-responsibility and anticipation.[10]

Methods

The study was conducted in two stages, as presented in Figure 1: (i) bibliometric analysis; and (ii) mapping of its editorial policies and strategies.

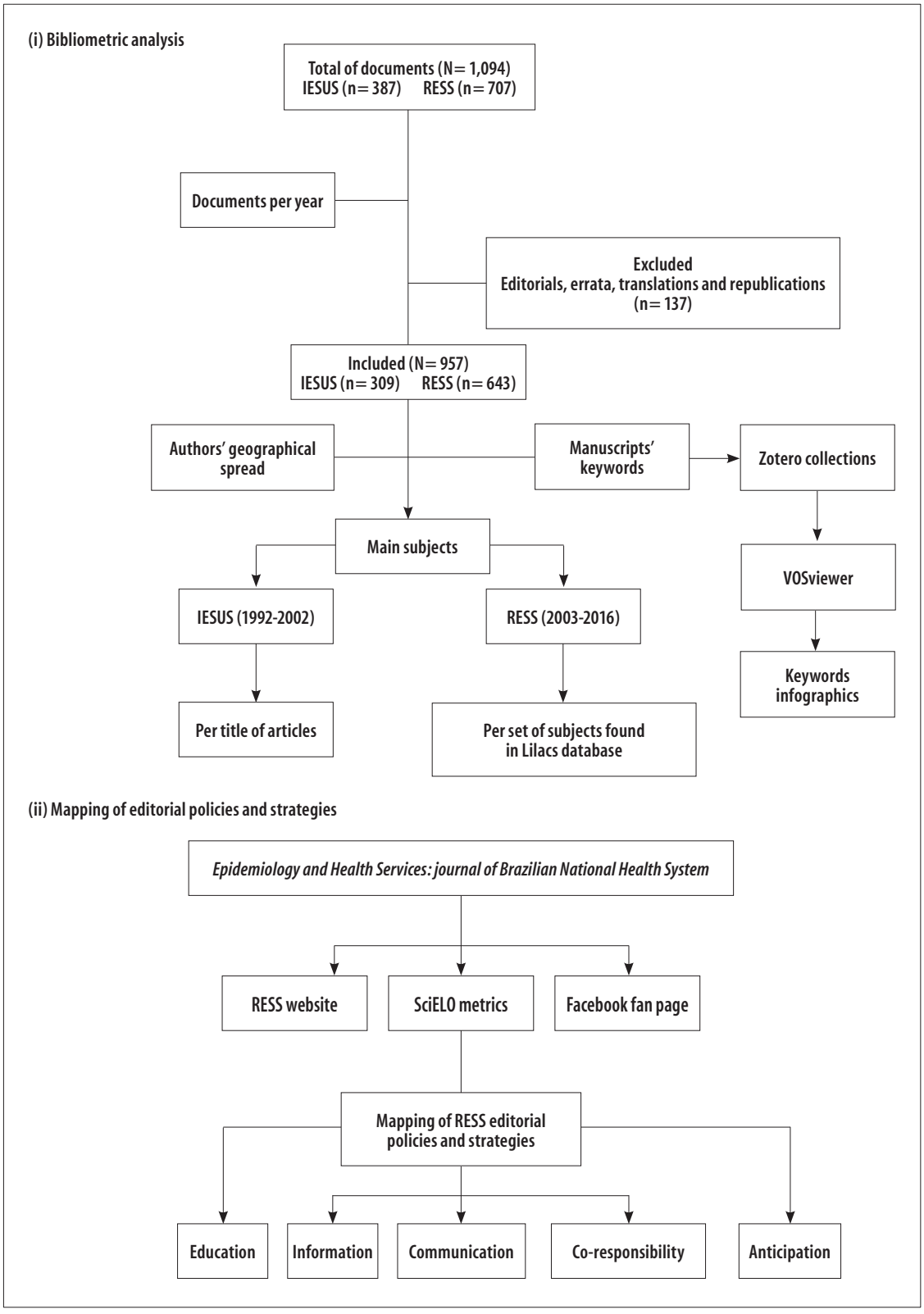

Figure 1 – Chart of study stages

In the first stage, the bibliometric analysis was conducted from the set of data composed of bibliographic elements manually collected from the articles published in the printed (1992-1996) and online (1997-2002) versions of IESUS e online (2003-2016) version of RESS.

The softwares Excel and Statistical Package for Social Sciences (SPSS) were used to conduct the descriptive analyses of the main subjects published in IESUS and RESS, as well as the geographical coverage of authors, per Federative Unit (FU), for authors bonded to Brazilian institutions, and per country, for authors bonded to foreign institutions. At this stage, all the editorials, errata, translations and republications were excluded. One of the authors (JGR) classified the subjects published in IESUS, based on their titles. The articles published in RESS were classified based on the information from Lilacs (Latin American and Caribbean Literature on Health Sciences Information). We chose to gather the terms within the same subject – for example, "Mortality" and "Infant mortality" – and exclude generic terms, such as "Public Health" and those related to the study design, such as "Descriptive epidemiology" and "Cross-sectional study".

In order to visualize the articles keywords, two infographics were created, from two collections carried out in the reference manager Zotero (https://www.zotero.org/), exported in Research Information Systems (RIS) format for the free software VOSviewer Visualizing scientific landscapes (http://www.vosviewer.com), of the Centre for Science and Technology Studies (CWST), from Leiden University, Holland. The inclusion criterion to compose the infographics was the existence of at least two bibliographic records.

In the second stage, we mapped the editorial policies and strategies, using the content available on RESS website (http://ress.iec.gov.br/ress), SciELO Metrics (https://analytics.scielo.org/) and RESS fan page on Facebook (https://www.facebook.com/ress.svs). After that, the editorial policies and strategies were categorized according to the selected areas of focus: education, information, communication, co-responsibility and anticipation.[10]

Results

The research corpus was composed of 1,094 documents identified in the studied period (1992-2016), after the exclusion of editorials, errata, translations and republications (n=137). From 1992 to 2002, 49 IESUS issues containing 387 documents were published. From 2003 to 2016, 57 RESS issues were published – a total of 707 documents. The year of 1992 presented the highest number of published documents (n=63) in the comparison with the following years of IESUS. In RESS, from 2003 to 2010, 21 to 40 documents were published per year. From 2011 onwards, there was an expressive growth (Figure 2). The average number of documents published per year in IESUS was 35.2, and the median was 30 documents per year. In RESS, the average was 50.5 documents published per year, and the median was 40.5 documents per year.

The main subjects covered are described in Figure 3. Communicable diseases, mortality and information systems stood out. The topics which had expressive growth in the comparison between IESUS (1992-2002) and RESS (2003-2016) were: epidemiological surveillance, non-communicable diseases, Brazilian National Health System (SUS), immunizations, road traffic accidents, violence and morbidity. The topics which presented reduction in the same comparison aforementioned were: communicable diseases, hospitalization and environmental health. The subjects published in RESS that had not been covered by IESUS were: health care services, primary health care, health assessments, risk factors and oral health. Epidemiological transition was a main subject of articles published in IESUS that has not been covered by RESS.

Figure 4a presents the keywords of articles published in IESUS and Figure 4b presents the keywords of articles published in RESS. There is a higher number and variety of terms in RESS when comparing with IESUS. In IESUS, six sets of keywords stood out: epidemiological surveillance, information systems, mortality, health indicators, health surveillance and epidemiology. Linked at the central area of the figure, we can see indicators of aging, risk factors, accidents, morbidity, external causes, potential years of life lost and infant mortality. In the peripheral area, we can find the keywords treatment, tuberculosis, AIDS, infection, multiple cause of death, health services evaluation, among others. In RESS, there are seven sets with linked terms. Descriptive epidemiology, epidemiological surveillance, epidemiology, mortality, cross-sectional

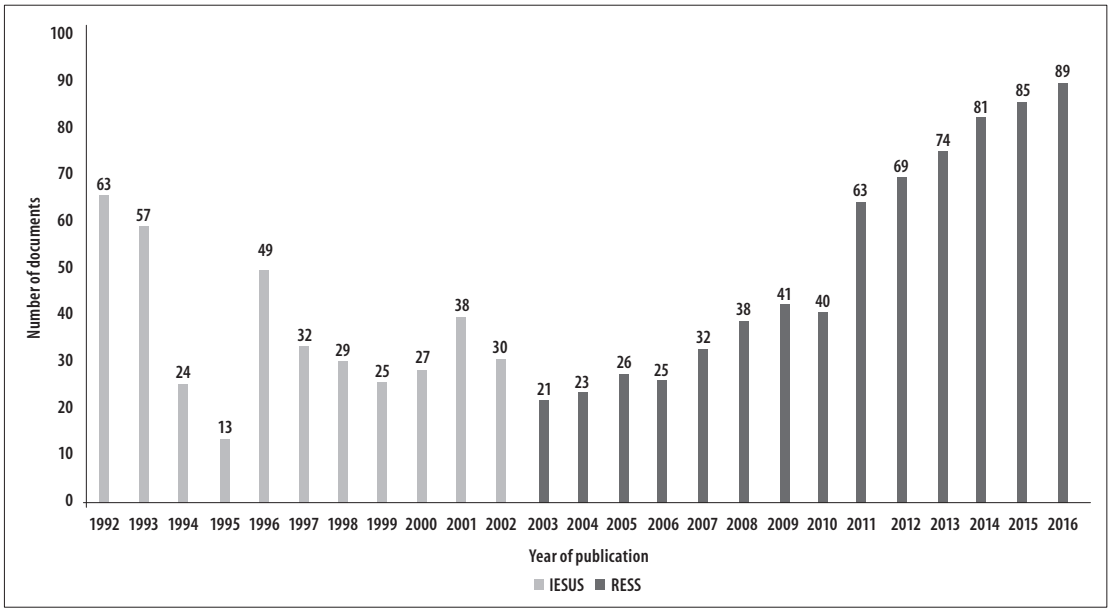

Figure 2 – Distribution of the number of documents per year of publication of *SUS Epidemiological Report* (IESUS, 1992-2002) and *Epidemiology and Health Services: journal of the Brazilian National Health System* (RESS, 2003-2016)

study, primary health care and information systems stood out.

Table 1 shows the geographical coverage of authors from both IESUS and RESS; they are mostly bonded to Brazilian institutions. Among IESUS authors, we can observe a high concentration in the Southeast region (49%), especially in Rio de Janeiro (20%) and São Paulo (22.4%) States. The fact that there were few articles produced by authors from the Brazilian North region also calls attention (1.2%). In turn, RESS scientific production presents a wider geographical coverage. Although the Southeast still presents the highest proportion of authors (38.3%), the contribution of authors from the Midwest (23.4%) and Northeast (20.2%) is also expressive. There is still a small participation of authors from the North region (3%).

In Figure 5, we present the editorial policies and strategies of RESS, categorized according to areas of focus: education, information, communication, co-responsibility and anticipation.

The area *education* comprises the set of actions that aim at creating, promoting and stimulating education and training opportunities in communication and scientific dissemination, in the methodological quality of research reports, epidemiology applicability and health surveillance. In this area, we can highlight the thematic series published in RESS: scientific communication,[11-17] applications of epidemiology,[18-22] systematic review[23-29] and economic evaluation.[30-35] Other measures taken in this area include the translation of international guidelines, which aim at releasing worldwide known documents in Portuguese, such as the recommendations of the International Committee of Medical Journal Editors, ICMJE,[36] scientific writing guidelines,[37-39] and the Montreal Declaration on research integrity and collaboration in cross-country studies.[40] Actions aimed at training authors and reviewers include some courses in scientific writing and research integrity, given by members of RESS Editorial Board along with post-graduation programs in the area of Public Health, in events of national and regional scope, as well as at SVS/MS. Moreover, RESS website provides documents for guiding reviewers, such as the Portuguese version of the ethical guidelines for reviewers of the Committee on Publication Ethics (Cope), and the guideline for manuscript's review, written by RESS editorial team.

The area *information* comprises the set of actions that aim at ensuring the access, use, production and quality information dissemination. In this area, RESS has adopted procedures to improve the quality of the published content which involve, besides translation

and availability of international recommendations and reporting guidelines, the promotion of its practical use. One example is the use of checklists and the conduction of technical review of the manuscripts, as a previous stage of the ad hoc review. This ensures a full report of the study, in order to raise essential information for its interpretation and results application. The recommendation to use reporting guidelines can be found at RESS instructions to authors. Moreover, this subject has been covered in editorials[41-44] and in an article of the series Applications of Epidemiology, which approaches scientific reporting guidelines as tools to improve the quality and transparency of health research reports.[45]

The use of Lilacs methodology is a fundamental pillar for data quality and organization of information. The use of the controlled vocabulary in Health Sciences for articles indexation corroborates the organization of epidemiological knowledge, in the terminological specificities of health surveillance and health scientific field.

With regard to the guarantee of access, it is important to highlight that RESS is an open-access journal and does not charge any fee, either for submission or publication of manuscripts. The journal has policies of self-archiving and dissemination of articles. Still with the objective of improving representation of knowledge, RESS carries out a periodic evaluation of its ability of information retrieval and quality of data in bibliographic bases and indexation portals. Up to August 2017, there were more than 600 thousand accesses to RESS articles available on SciELO Portal. In this area, we also highlight the addition of abstracts in Spanish (since 2014), besides Portuguese and English, and the bilingual publication (Portuguese and English) of manuscripts (since 2015).

The area of focus *communication* comprises the set of actions that aim at communicating and disseminating the content published in a clear, transparent and accessible way. Publishing in district formats may reach various target-audiences and expand its reach to society. RESS is published in two formats: online and printed. The printed version is distributed for free all over Brazil, for institutional subscribers and post-graudate programmes in Public Health. The online version has its own site (http://ress.

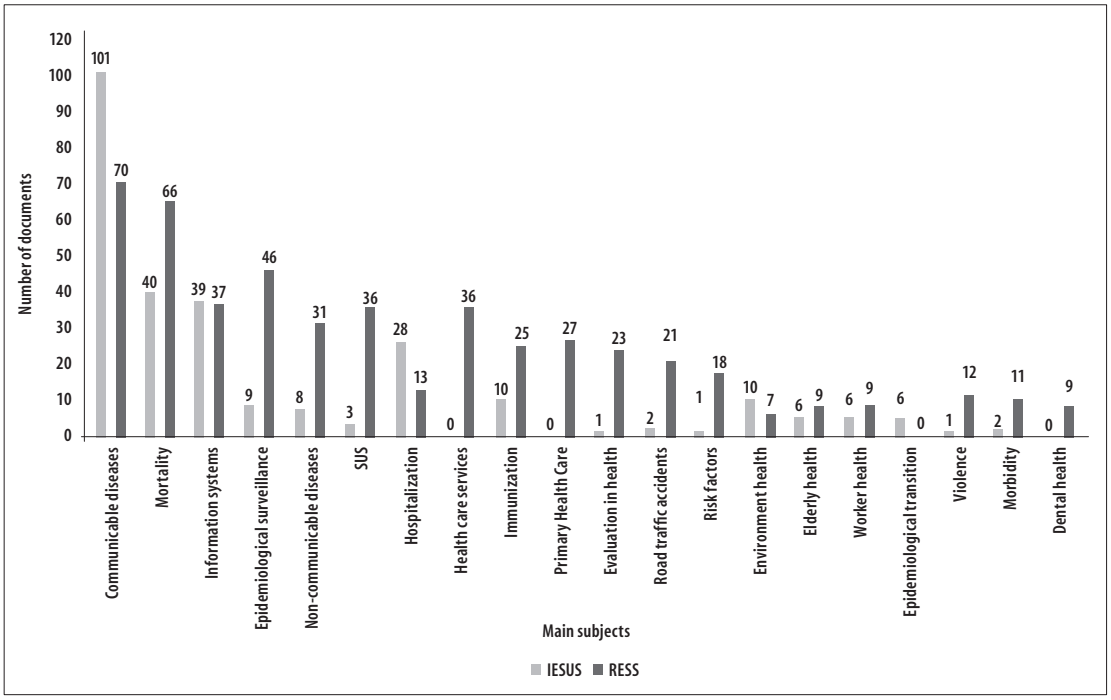

Figure 3 – Distribution of the main subjects of scientific production of *SUS Epidemiological Report* (IESUS, 1992-2002), and of *Epidemiology and Health Services: journal of the Brazilian National Health System* (RESS, 2003-2016)

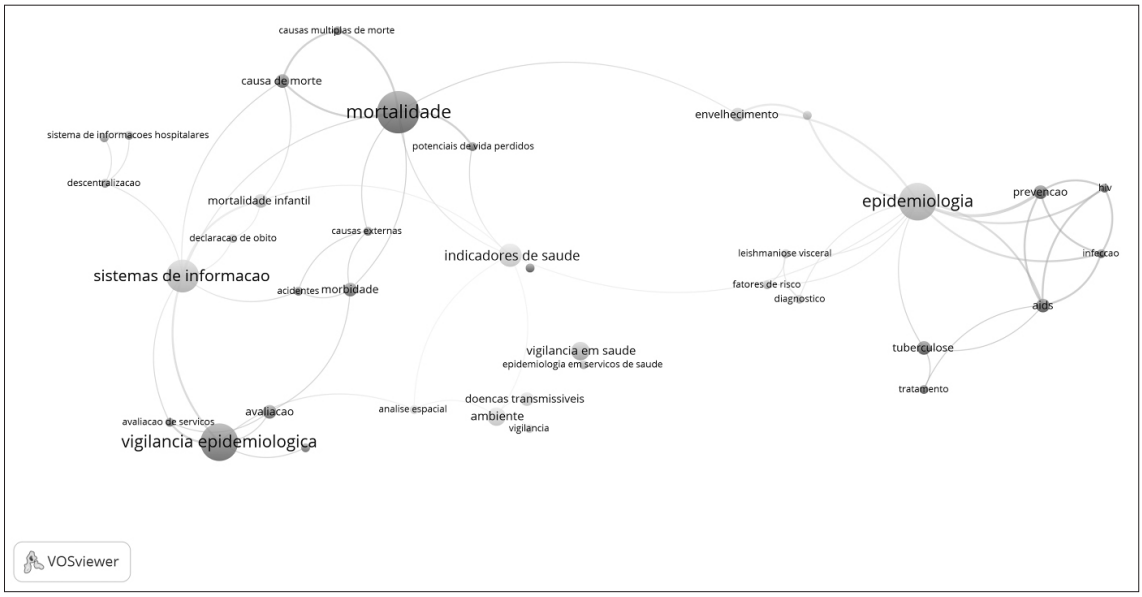

Figure 4a – Portuguese keywords infographic of the articles published in *SUS Epidemiological Report* (IESUS, 1992 -2002)

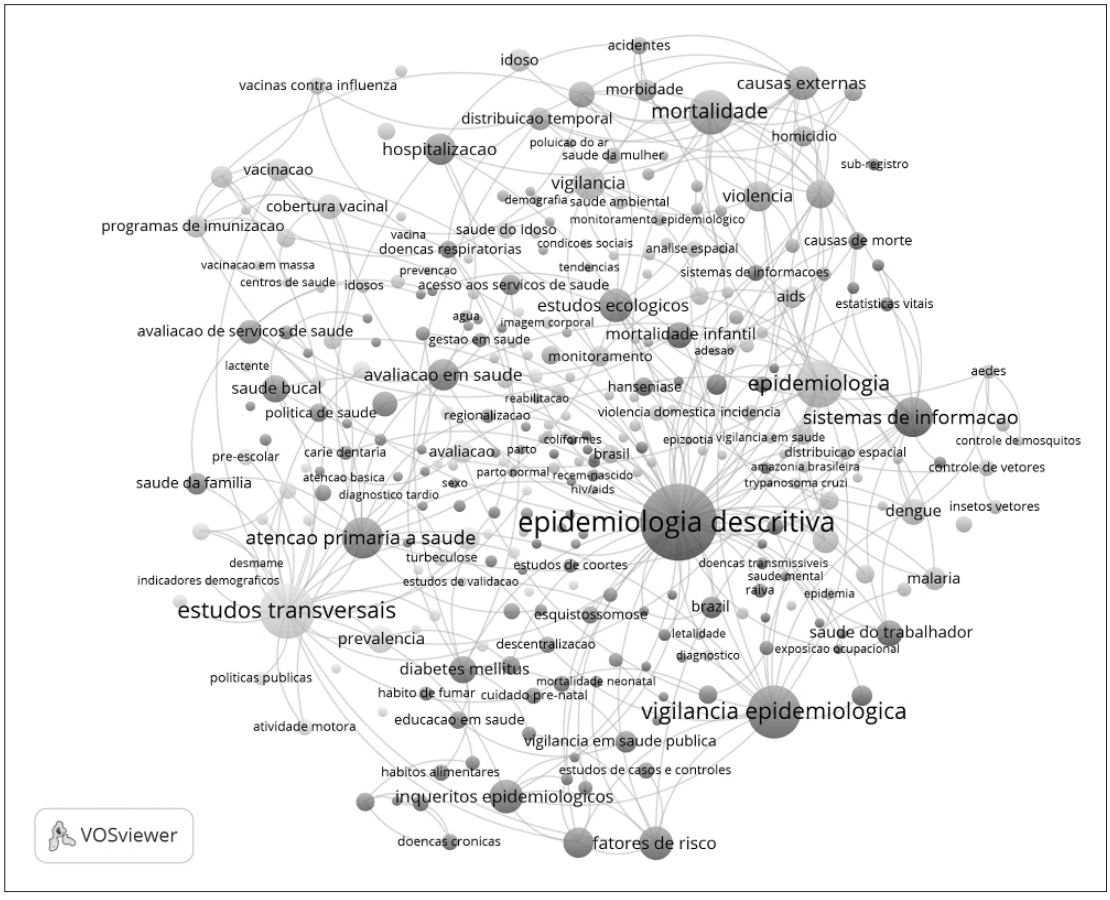

Figure 4b – Portuguese keywords infographic of the articles published in *Epidemiology and Health Services: journal of the Brazilian National Health System* (RESS, 2003 -2016)

Table 1 – Geographical distribution of authors of scientific production of *SUS Epidemiological Report* (IESUS, 1992-2002), and of *Epidemiology and Health Services: journal of the Brazilian National Health System* (RESS, 2003-2016)

Macroregion/Federative Unit	IESUS		RESS	
	n 709	(%) 100.0	n 2,636	(%) 100.0
Midwest	134	18.9	618	23.4
Federal District	93	13.1	453	17.2
Goiás	21	3.0	78	3.0
Mato Grosso	7	1.0	64	2.4
Mato Grosso do Sul	13	1.8	23	0.8
Northeast	151	21.4	527	20.2
Alagoas	–	–	10	0.4
Bahia	87	12.3	107	4.1
Ceará	9	1.3	41	1.6
Maranhão	–	–	20	0.8
Paraíba	–	–	28	1.1
Pernambuco	48	6.8	195	7.4
Piauí	5	0.7	75	2.8
Rio Grande do Norte	–	–	39	1.5
Sergipe	2	0.3	12	0.5
North	9	1.2	78	3.0
Acre	–	–	2	0.1
Amapá	–	–	–	–
Amazonas	1	0.1	35	1.3
Pará	7	1.0	22	0.8
Rondônia	1	0.1	7	0.3
Roraima	–	–	2	0.1
Tocantins	–	–	10	0.4
Southeast	348	49.0	1,008	38.3
Espírito Santo	5	0.7	37	1.4
Minas Gerais	42	5.9	302	11.5
Rio de Janeiro	142	20.0	302	11.5
São Paulo	159	22.4	367	13.9
South	59	8.4	388	14.7
Paraná	29	4.1	96	3.6
Rio Grande do Sul	14	2.0	239	9.1
Santa Catarina	16	2.3	53	2.0
Brazil	701	98.9	2,619	99.6
Other countries	8	1.1	17	0.4

Data source: IESUS e RESS.

iec.gov.br), and a webpage on SciELO Portal (www.scielo.br/ress), both available in Portuguese, English and Spanish.

Moreover, RESS has a newsletter with more than 6 thousand e-mail addresses and, more recently, has explored the use of social networks for dissemination. RESS fan page on Facebook (https://www.facebook.com/ress.svs/) had more than 5 thousand followers in August 2017. From those, 80% were women and 33% were from 25 to 34 years old. The main countries

Area of focus	Editorial policies and strategies	
Education	Thematic series	Scientific Communication
		Systematic review
		Applications of Epidemiology
		Economic evaluation
	Translation of international recommendations	Montreal Statement on research integrity in cross-boundary research collaborations[a]
		Recommendations for preparing, reporting, editing, and publishing of scholarly work in medical journals[b]
		Scientific writing guidelines: Prisma,[c] Gather,[d] Sager[e]
	Qualification of authors and reviewers	Courses on scientific writing and integrity in research
		Ethical Guidelines for Peer Reviewers (Cope)[f] Guidelines for Reviewing Manuscripts[g]
Information	Recommendations for manuscripts (ICMJE)[h]	Conference checklist
		Technical review
	Equator network[i]	Scientific writing guidelines: translations, editorials, articles and use recommendations in the instructions to authors
	Lilacs methodology[j]	Health Science Descriptors (DeCS)
	Electronic list of acronyms of the Ministry of Health	Use of acronyms
	Open access	Submission free of charge
		Free access
		Copyrights' policy
		Pre-publication policy
		CC-BY-NC License[k]
		Self-archiving policy
	Version in other languages	Abstracts in English and Spanish, besides Portuguese Bilingual publication of articles (Portuguese and English)
	Bibliographic databases and indexing portals	Monitoring of data quality and ability of information retrieval
Communication	Printed version	Free distribution
	Site	Portuguese, English and Spanish
	Newsletter	Quarterly
	Social networks	Facebook fanpage
		Blog
		Twitter
		Mendeley
	Public recognition	Disclosure of the annual list of reviewers
	RESS Evidencia Prize	Public recognition of the best original article published each year
Co-responsibility	Cope ethical principles[f]	Declaration on ethics in publications
		Declaration of conflicts of interest
		Editors' responsibilities
		Reviewers' responsibilities
		Authors' responsibilities
		Ethical Guidelines for Peer Reviewers
	ICMJE[h] Recommendations	Authorship criteria
	Ethics in research involving human beings	Guidelines of the National Committee of Ethics in Research

Figure 5 – Editorial policies and strategies of *Epidemiology and Health Services: journal of the Brazilian National Health System* (RESS, 2017 -2016)

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Area of focus	Editorial policies and strategies	
Anticipation	Planning	Periodical meetings of the Editorial and Management teams
		Annual meetings of the Editorial Board
	Collaboration network	Abrasco Forum of Editors of Public Health Journals
		SciELO Public Health Advisory Committee
		Reviewers' database
	Monitoring	Bibliometric indicators
		Collaboration indicators
		Geographic spread indicators
		Indicators of type of contribution
		Influence indicator
		Audience indicator
	Qualification of the editorial team	Courses in scientific writing
		Participation in national and international events in the areas of scientific communication and integrity in research Participation in national and international events in the areas of scientific communication and integrity in research

a) Montreal Statement on research integrity in cross-boundary research collaborations.[40]
b) Recommendations for preparing, reporting, editing, and publishing of scholarly work in medical journals of the International Committee of Medical Editors.[36]
c) Preferred Reporting Items for Systematic Reviews and Meta-Analyses: The PRISMA Statement.[37]
d) Guidelines for Accurate and Transparent Health Estimates Reporting: the GATHER Statement.[38]
e) Sex and Gender Equity in Research: rationale for the SAGER guidelines and recommended use.[39]
f) Cope: Committee on Publication Ethics, version in Portuguese of the ethical guidelines for reviewers Available at: http://ress.iec.gov.br/ress/home/carregarPagina?lang=pt&p=orientacoesEticas&format=
g) Guidelines for Reviewing Manuscripts. Available at: http://ress.iec.gov.br/ress/home/carregarPagina?p=guiaRevisao&lang=pt
h) ICMJE: International Committee of Medical Journal Editors
i) Equator: Enhancing the QUAlity and Transparency Of health Research.
j) Lilacs: Latin American and Caribbean Literature on Health Sciences Information.
K) CC-BY-NC: Creative Commons license which allows the user to share and adapt the content, since appropriate credit is given, and for non-commercial use.

Figure 5 – Editorial policies and strategies of *Epidemiology and Health Services: journal of the Brazilian National Health System* (RESS, 2017 -2016)

reached were Brazil, Portugal, Peru, Angola, United States, Argentina, Colombia, Canada, Paraguay, Chile, Venezuela and Mexico. The main Brazilian cities reached were Rio de Janeiro, São Paulo, Brasília, Salvador, Goiânia, Curitiba, Pelotas, Macapá and Niterói. In 2017, RESS blog was released (https://revistaress.blogspot.com.br/), aiming at bringing the authors, readers and other people involved in topics of interest for Public Health and scientific communication closer.

Communication also encompasses acknowledging the precious work done by reviewers. The acknowledgments, presenting the names of the reviewers who worked in the previous year, are published in the first issue every year.

The area of focus *co-responsibility* comprises the set of actions that ensure good practices of all agents involved in the processes of research, editing, publishing and dissemination of results. In this area, we can highlight the initiatives related to ICMJE recommendations[36] and Cope ethical principles, especially with the publication of the authors' contributions and the elaboration of the declaration on ethics in publication of RESS, which lists responsibilities of authors, reviewers and editors.

The area of focus *anticipation* comprises the set of actions that identify, aggregate and coordinate the information to support decision taking, planning and organization of processes and work-flow, as well as to improve products and highlight the impacts generated by RESS. This area covers meetings of the Editorial Team, the management team and the Editorial Board. RESS has a very active collaboration network. It has representation at the Forum of Editors of Public Health Journals, of the Brazilian Association in Public Health, and at the SciELO Public Health Advisory Committee (2016-2018). In this area, the monitoring of bibliometric indicators and other metrics are also contemplated. Finally, RESS conducts several initiatives aimed at the improvement of the editorial team, especially with the participation in events of scientific editing, integrity in research and epidemiology.

Discussion

In its 25 years of history, the journal passed through two periods so far: IESUS (1992-2002) and RESS (2003-2016). IESUS period was marked by topics on communicable diseases, mortality and information systems. During RESS period, the subjects covered have expanded, and non-communicable diseases, health care services and external causes stood out. The comparison between both periods revealed a growth in the number of documents published, as well as an increase in the geographical spread of the authors and the scope of publication. The mapping of editorial policies and strategies in the focus areas education, information, communication, co-responsibility and anticipation revealed a large number of initiatives aligned with the principles of publication ethics, which may have contributed to the development of the journal.

IESUS aimed at "broadly organizing and disseminating some epidemiological information that had been accumulated in a compartmentalized way within various organs of the Ministry of Health".[46] In its first issues, it published tables containing periodically consolidated data about the distribution of cases of notifiable diseases and hospitalizations funded by SUS, in the Federative Units and Brazilian macroregions. One of the first organizational strategies of IESUS was the inclusion of instructions to authors in the third issue of 1992. In addition to the tables with consolidated data of the health information systems, IESUS published articles on topics related to epidemiological surveillance. In 1998, IESUS format became closer to that of a journal, and the position of the editor-in-chief and the Editorial Board were created. The tables were now published in the *Epidemiological Report*.[3] This history is related to the profile of the articles published in IESUS, with emphasis in topics such as communicable diseases,[47] mortality and information systems.[48]

In 2003, besides the change in the title and in its graphic design, the journal incorporated new contents, improving the scientific character and the editorial policy of IESUS. The journal started to focus on the epidemiology in health services, which gave it a unique scope. The increase and diversity of topics published since then reflect the evolution of the journal, which has accompanied advances in health surveillance, with the expansion of its scope and the incorporation of actions aimed at non-communicable diseases and conditions and the health promotion.[49]

In 2011, RESS began a new phase of consolidation. The position of the scientific editor was created and the editorial team was expanded. In 2014, the position of the editor-in-chief was detached from the figure of the secretary of SVS/MS, which reaffirmed the independence of the editorial process. At that time, the positions of scientific editor and editor-in-chief were unified. Despite the changes, the journal kept its commitment to the quality of scientific publication, without losing sight of the focus on health services.[6,8]

The journal's orientation for the scientific production of epidemiology in services makes it a privileged space for integration between academy and SUS health services. This vocation guided the initiatives carried out in the area of focus education, directed mainly to authors. Among these initiatives, we can highlight the publication of articles on scientific writing and epidemiological methods, the translation of international reporting guidelines and the conduction of scientific writing courses.

The fact that the RESS is a scientific journal edited by SVS/MS links its production to open access and the absence of any type of fees for submission, publication or translation. These are prominent elements in the area of focus information. Likewise, distribution of its printed copies is free.

Notwithstanding the continuation of the printed publication, in order to disseminate RESS, mainly in health services and in areas where access to the Internet is restricted, RESS has adopted several initiatives to promote its online version. These initiatives are included into the area of focus information.

In the area of focus communication, we can include RESS website, Facebook fan page, blog and Twitter profile. Although these initiatives are recent and still in development, it was possible to measure some results and verify a significant audience reach, not only in Brazil, but also in other countries. It is also worth mentioning RESS Evidencia Prize, which started in 2012 and already counts with five editions. The prize has publicly acknowledged the merit of the best articles published each year in RESS.

RESS works intensely in actions that comprise the area of focus co-responsibility. In addition to the adherence to ICMJE recommendations

and Cope's ethical guidelines, RESS promotes the dissemination of their content through the translation into Portuguese of relevant documents and the publication of their versions in this language. The work of RESS editorial team in the area of integrity in research and scientific publication[41] is widely acknowledged. It has participated in national and international events,[50,51] and has also addressed the subject in scientific writing courses.

It is worth mentioning that RESS initiatives aimed at authors' training and promotion of integrity in research and scientific publication are in line with the REWARD campaign (REduce research Waste And Reward Diligence), launched by the British journal The Lancet (http:// www.thelancet.com/campaigns/efficiency). In 2014, the Lancet published a special series that showed how the dividends of research investment could be increased by prioritizing the relevance of research and care in the design, performance, and reporting of studies. As a result, [17] recommendations were addressed to five key stakeholders: funders, regulators, journals, academic institutions and researchers. To evaluate the journals' responses, Moher et al.[52] investigated the response to ten questions related to the initiatives of the journals to reduce waste in research. A survey that applied the same ten questions to all 50 Brazilian journals indexed in Medline in 2017, verified that RESS, together with another journal, obtained the highest score, with nine of the ten criteria being met.[53] This finding reinforced the alignment of RESS with initiatives listed in the area of focus co-responsibility.

Another area of focus with relevant performance of RESS editorial team is the anticipation. RESS actions in the area include planning activities, collaborative network mobilization, monitoring of indicators, and strategies for qualification of the editorial team. These actions were fundamental for the improvement of the journal and the adequacy to publication standards to meet the criteria of indexation in bibliographic bases of greater reach.

Indexing in an international bibliographic basis yielded greater internal recognition to RESS, including the rise of the category in Qualis Journals evaluation, carried out by the Coordination of Improvement of Higher Education Personnel (Capes).[54] The greater visibility of the journal resulted in an increase in the number of articles submitted, as well as in the increase of international submissions (data not shown). The number of accesses to RESS content in SciELO portal has also increased. Another element that points to the increasing visibility of the journal is its rise in Google Scholar ranking. From 2014 to 2017, RESS ranked in 54th, 45th, 33rd and 18th positions, respectively. This ranking uses the h-5 citation index to classify all scientific journals published in Portuguese worldwide.

The scientific journal is the main vehicle of communication of scientific production and has as fundamental characteristic the selection of published content guided by the process of peer review. RESS adopts the double-blind review process, in which reviewers do not know the authors' identity and vice-versa. Ad hoc reviewers are essential for ensuring the quality of the articles published in RESS. New initiatives aimed at valuing and qualifying reviewers are being planned, as recommended by RESS Editorial Board.

The research on the 25 years of history of RESS allowed rescuing the elements that made possible its current condition, being in the same level of the most renowned Brazilian scientific journals of the Public Health area. This position was achieved through the hard work of its editorial team, who is committed to the development of the journal, attentive to the scenario of national and international scientific publication and aligned with the highest ethical standards and integrity. The fact that the journal is edited by SVS/MS was essential to guarantee the conditions for its development and growth. RESS Editorial Board, which is composed of renowned researchers bonded to Brazilian and foreign institutions, also had fundamental collaboration in the development of the journal.

In the future, we hope that the greater visibility of the journal and the recognition of its high scientific quality can contribute to increasing the publication of content relevant to epidemiology in health services and contributing to the improvement of SUS activities in Brazil. The bases for the continuous improvement of RESS are consolidated, and it will be up to the editorial team and management of SVS/MS to recognize their relevance and maintain the commitment to the dissemination of epidemiological knowledge applicable to health surveillance actions.

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