Some journals use an author pays system—for example, BioMed Central journals. It is feasible that journals could have a single (free) submission policy or a multiple (pay) approach. This would allow the journal to offset some of its increased costs from losing an article to a rival but it would also depress the demand for the service. However, this approach might be less than ideal given that some organisations can better afford to pay than others. Additionally, authors may be more likely to pay if they have positive findings than negative results. Allowing papers with negative findings to be submitted at no charge might offset this problem.

Several models of multiple submission exist. Journals could adopt any of these, and they might even experiment with different models using a randomised trial.

Contributors and sources: DT and JA originally discussed the idea for the paper. SC, JD, and EP made suggestions for the paper. SC, JD, and EP identified a sample of papers and developed a short email questionnaire to corresponding authors. All authors emailed to a subset of corresponding authors. JD collated and analysed results for survey. DT will act as guarantor.

Competing interests: All the authors have a career interest in having their manuscripts published as soon as possible.

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Corrections and clarifications

Minerva

We inadvertently and unaccountably switched the workplaces of some of the authors of the *Minerva* picture article about the 80 year old woman who presented with a non-healing leg ulcer and cellulitis (*BMJ* 2004;329:1354, 4 Dec). M Roesner and S Aly work in the department of vascular surgery, and R Lewis, B Davies, and M David work in the department of elderly care. All the authors (including S Read, radiology department) work at University College London, as stated. The job titles published were all correct.

Family history of breast cancer

During the editorial process we managed to switch the symbols for men and women in the key of the pedigree diagram in this "10-minute consultation" article by Anneke Lucassen and Eila Watson (*BMJ* 2005;330:26, 1 Jan). The hypothetical patient is, of course, a woman.

Q&A

Poverty and mental health

Question

Are there any recent articles or documents on the effect that poverty has on an individual's mental health? (For my dissertation.)

Katy J Booth, *student, Leeds*

Answer

In your literature search you may find it helpful to begin with two authors at the Institute of Psychiatry in London—Robert Goodman (for child mental health) and Graham Thornicroft (for adults).

The most observable effects of deprivation may be with children under 11 years old,¹ but it is important to consider that the child who experiences poverty may also experience other life adversities.² Led by the economist Martin Knapp, a team at the "health observatory" is currently studying mental health policy and practice across Europe. This study includes the influence of factors such as housing, poverty, employment, and social justice. Poverty at a national level can affect individuals,³ and the UK social exclusion unit has been interested recently in community effects on mental health, such as in relation to neighbourhood renewal fund initiatives.

Inequalities, even in a relatively affluent population such as Whitehall civil servants, may lead to the development of depressive illness.⁴ However, the extreme, individual poverty of a homeless refugee, former prisoner, or seafarer with no benefits and no friends is clearly a risk factor for substance misuse and suicide, as the recent suicide audit in Camden illustrates and the Salvation Army has known for a century. Loss, as in the recent tsunami tragedy, includes destitution and destruction of social networks at both the level of individual mental functioning and at

the level of a community's capacity to respond. On a much smaller scale, this was described acutely for several communities affected by the abrupt collapse of traditional steel or coal industries: whereas one household might have weathered a sudden financial loss, a whole town could not.

A good starting point for your reading might be a thought provoking and balanced account of one service in the London Borough of Newham for "boys, whose home backgrounds are impoverished in every sense, including domestic violence, alcoholism and sexual abuse."⁵

Woody Caan, *professor of public health, APU, Chelmsford*

Competing interests: Chair of the Social Care Research Group (NHS R&D Forum).

http://bmj.bmjournals.com/cgi/qa-display/short/bmj_el;85718

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This exchange was posted on the Q&A section of bmj.com. If you want to respond to the question, or ask a new question of your own, follow the link above or go to <http://bmj.com/qa>