

***Editorial****“FIRST DIVISION” AND “SECOND DIVISION” SCIENCES*

It is well known that clinical psychology starts from the need of finding clinical applications in the psychological field and this necessity is found in the dimension of utility (the application) one of its sensible paths. In order to find the applicative dimensions, clinical psychology, like other health-service sciences, requires resources, multidisciplinary and interdisciplinary approaches. This implies and goes over the simple economic level, with particular reference to the dimensions of projects; the economic resources anyway remain necessary. Recently the Italian Ministry of Health (April 2018), Management of Research and Innovation in Health has published a call for research with a significant financial fund. The aforementioned initiative results absolutely commendable in a country like Italy, where the research investments are certainly not much and where many young researchers are forced to emigrate, perhaps with the excuse of xenophilia, and rare returns (especially the excellent researchers).

Referring to the sector of clinical psychology, the purpose of the announcement deserves a particular acclaim, in fact it declaims *“To evaluate the professional, organizational and system’s factors that influence the efficiency of health services and the impact on the quality of clinical, organizational, management and financial innovations; the development and application of methodologies and tools to improve communication with citizens and patients and to promote their participation; studies aimed at analyzing the welfare needs of the weakest social groups...”*. It results in a commendable humanitarian point of view that warms the heart of every

clinical psychologist when the scientific orientation of the disciplinary sector (M-PSI/08 but we can include the particularly similar – PSI/07), frequently and with pride it's completed by the affective aspects. With Solomon-like knowledge and biblical memory, the resources of the call are so divided "50% is reserved for "change-promoting" research projects; the remaining resources are addressed for research "theory-enhancing "projects. In this fifty-fifty percentage (inter alia not sufficiently explained) we find a democratic choice that preludes new horizons in progress and the evolution of science (at least in the health field).

The reading of the announcement begins to raise some perplexity in reference to the recipients, where it is clear that the involvement of the University is only possible if the academics are in some way involved in the health institutions that are indicated; for example if academia has to have an institutionally embedded role within the SSN (Italian National Health System) and therefore in the regions with the due distinctions between those with ordinary or autonomous status. Only for this reason clinical psychology would be penalized: it is known that not all the colleagues work in areas of the SSN (NHS) structures.

Assuming that the survey would only be biased, the questions that impress us are the selection criteria for "principal investigators", identified as those who present the main projects to the institutional receiver.

Now we'll comment on the latter points. For the so-called Ordinary Research Projects (RF), it is required for an H index at least 18 (for the Theory enhancing projects) and 10 (for the Change promoting projects).

If we make a comparison between the required values for projects and those to access to the national qualification, at least in reference to clinical psychology the values for qualification are much lower (almost half). However what is worrying must be placed in the fact that bibliometric values are very different among the various disciplines for example between recent and historically consolidated sciences; this represents an objective criterion of discrimination.

The entire procedure can be perceived as complicated and that the periods useful for its understanding are completely inadequate because of the rigid deadlines and formulation of a project unless the researcher does not have an archive of projects awaiting calls.

Regarding the promotion of young researchers, even if the H indexes are undoubtedly lower, young researchers remain unlikely to access to projects because of the average time to access to the profession.

Now we just have to ask ourselves the following points: 1) which criteria does it refer to? 2) do the laudable purposes require the same research skills and therefore the same visibility and admissibility among the various disciplines? 3) Should the bibliometric criteria (the same as for national qualification) also refer to more modern indices that are increasingly being proposed? The aforementioned statement is not biased, since this journal is indexed both on Scopus and on WEB of Science. We believe that most of the scientific journals with the same indexing mentioned have publication fees that not all researchers can afford; we can talk about it because the other free publication Journals, just like the MJCP, make serious efforts to respect the free service and therefore the democracy that should remain in the field of science. A country like Italy should take into account these issues in its actions of change.

With regard to the de facto exclusion for most academics of clinical psychology, it again implies a necessity to establish a relationship with the Ministry of Health that passes through different channels, even political ones, capable of conveying and responding to our perplexities.

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