



# Giving a voice to under-represented groups in Global Surgery

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This issue of Impact Surgery has been timed for release alongside a Lancet and NIHR Unit on Global Surgery (University of Birmingham, UK) Side Event at the 7<sup>th</sup> World Health Assembly in Geneva (May 28<sup>th</sup>, 2024). The event aims to re-frame the relationship between surgeons and policymakers ahead of the 10 year anniversary of the Lancet Commission on Global Surgery (2015). The objectives are to prioritise research that can embed surgery into whole systems, rather than leave it as a standalone speciality that is seen as expensive.

This issue will launch a range of important article relevant to Global Surgery and the patients affected. We promised not to shy away from challenging or difficult topics. We have directly addressed the targeted deaths of surgeons in Gaza and the destruction of surgical services, that will last beyond our generation. We have delved into the need for more research to support patients who seek care in rural and district hospitals, also called first referral hospitals, in the Global South. We have also discussed future research challenges, including dire need for energy security in the Global South, which is a World Health Organisation priority.

We have also, for the first time, launched our dedicated Community Engagement section. This is to create research outputs from events that engage and involve communities, which are common but are challenging to write up, especially since most are led by non-surgeons. Here, we provide a flexible platform to achieve an academic output from such work,

Surgery is seen as an expensive luxury, and funding it as a standalone entity will be hard going forwards. The more likely route of success is to embed surgical specialities within horizontal and vertical care pathways for patients' diseases, meaning it is a cost-effective part of a package.

Impact Surgery aims to continue the open debate and flexible publishing model. We aim to give firm academic outputs to a wide variety of work, resulting in a citation

and DOI. We strive to continue to ignore impact factors. We welcome more submission from your reviews, primary data, education, and challenging topics for editorials.