

Citation overload?

Reference lists are getting longer. **CEDRIC GINESTET**

PSYCHOLOGY journal publishing is a booming business. An average of 100 psychology articles are published each day – about one every 15 minutes. Now another trend has caught the attention of John G. Adair (University of Manitoba) and Neharika Vohra (Indian Institute of Management) – a huge growth in the number of citations per article.

Interestingly, this trend is not mirrored in peer-reviewed publications in other disciplines, such as physics and biology. Psychology and the social sciences seem to outweigh their counterparts in terms of number of citations and references per article.

Does this mean that psychologists are reading more? Or are they just referencing more? We can't really tell, and Adair and Vohra don't supply any direct answers. But they suggest there is a clue in the wider availability of PsycLIT coupled with the expansion of historical databases going back to 1887. It seems that the proportion of *recent* references (defined by Adair and Vohra as less than five years old) is decreasing, while the percentage of *old* references (more than 20 years old) is on the increase.

Adair and Vohra also note the increase in 'batched-together' or multiple citations, which have largely overtaken the use of solitary citations that prevailed in the 1970s. Most of the old references now being used are being lumped together with other citations. According to Adair and Vohra, this extensive use of multiple citations seems to come from an anxiety to support and defend points, rather than from a real attempt to substantiate arguments. They say that multiplying the number of references may be nothing more than a selling strategy on the part of the authors, who are fiercely competing for space in peer-reviewed journals. In contrast with their counterparts in physics, psychologists are under great pressure. Whereas 20 per cent of submitted manuscripts are rejected by physics journals, this rate reaches 80 per cent in psychology.

So how should we preserve ourselves from the information overload? Perhaps, say Adair and Vohra, the responsibility for setting a more reasonable trend lies with journal editors and reviewers.

Adair, J.G. & Vohra, N. (2003). The explosion of knowledge, references, and citations: Psychology's unique response to a crisis. *American Psychologist*, 58(1), 15–23.

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IDENTITY AND MEMORY

Can we have a sense of identity without a memory for where we've been or what we've done? The concepts of identity and autobiographical memory have long been associated. British philosopher John Locke (1632–1704) wrote 'as far as consciousness can be extended backwards to any past action or thought, so far reaches the identity of that person'.

Donna Rose Addis and Lynette Tippett (University of Auckland, New Zealand) investigated the sense of identity, and tested the autobiographical memory of 20 patients with Alzheimer's disease (average age 75.5 yrs). Compared with 20 healthy, age-matched controls, the Alzheimer's patients exhibited impaired memory for facts about their lives (e.g. the name of their school), especially from childhood and adolescence (by contrast, the controls' strongest memories were from that era), and for things/events that had happened to them in their life. On tests of identity (e.g. when asked to produce 20 responses to the question 'Who am I?'), the patients' answers were fewer in number, were more abstract and less definite. Controlling for general cognitive ability (using the mini-mental state exam) there was a significant correlation between the patients' poor childhood memories and the weakness and abstractness of their sense of identity.

The authors concluded that most importantly, this study represents a first step towards quantifying and understanding the sense that 'the Alzheimer's person [ceases] to be the person that he/she was' reported so frequently by caregivers.

Addis, D.R. & Tippett, L.J. (2004). Memory of myself: Autobiographical memory and identity in Alzheimer's disease. *Memory*, 12, 56–74.

Weblinks: www.tandf.co.uk/journals/pp/09658211.html
www.alzheimers.org.uk/

Syllabus advice: Relevant to modules on memory (e.g. SQA adv higher; AQA spec A & B (AS) and Edexcel (AS)) and psychological aspects of illness (see health psychology modules – OCR, Edexcel, and AQA spec B exam boards).