## **Editorial**

Health policy is one of the most debated and analysed areas of social policy internationally, and encompasses a multitude of seemingly disparate but, in fact, largely interrelated issues. For example, how should we motivate doctors to improve performance? What is 'performance', and how do we measure it? What is the impact of antitrust law on provider behaviour? How do we ensure that we attain the most benefit from our health care resources? What is 'benefit', why is it defined in the ways that it is, and how do we measure it? Can the implementation of World Trade Organization regulations produce legislation that favours public sector health care development?

More broadly, what are the goals, institutions, policies, reforms, and effects of health care? Why do they take the forms that they do, and what forms should they take? What (if anything) can we learn by comparing health care systems? The list of questions is endless, but most have at least one thing in common: they can be subjected to economic, political, and legal analyses. Indeed, international trends in health care highlight the confluence of economics, politics, and legal considerations in the policy process, and efforts to encourage cross-disciplinary understanding are warranted.

Health Economics, Policy and Law (HEPL), a new quarterly peer-reviewed journal, is intended to serve as a forum for scholarship on economic, political, and/or legal considerations in health policy. As such, the disciplinary focus of the journal is restricted to economics, political science, and/or law. HEPL is international in scope, accepts submissions on social care in addition to health care, and aims to bring currency, authority, and accessibility to the reporting of current research, issues, and debates. The journal will publish material ranging from original theoretical, methodological, and empirical papers, to articles surveying the state of the art in specific areas.

Since we envisage a cross-disciplinary, cross-sectoral, and cross-country readership, the journal's articles will be rigorous but mostly non-mathematical, and, in assessing submitted manuscripts, considerable emphasis is placed on both clarity of expression and on use of terminology. Manuscripts are also assessed on their research methods and/or conceptual reasoning, the strength of the economics/political science/legal content, and, where appropriate, their originality and policy relevance. The standards and style to which we aspire are reflected by the *Milbank Quarterly* and the *Journal of Health Policy*, *Politics and Law*.

HEPL will publish four types of articles. Occasional guest editorials of up to 2,000 words will normally be published by invitation, although suggestions will be considered. Debate essays, in part a forum to discuss controversies and which will occasionally be accompanied by responses, have a word limit of

3,000 words; and review essays, where between two and four recent books on a related theme are discussed in a substantive article, will be up to 5,000 words in length. Original research articles, perhaps the most important of *HEPL*'s outputs, ought to contain between 6,000 and 8,000 words. Special issues devoted to important topics in health policy research will occasionally be published. All ideas, questions, and suggestions relating to whether a particular manuscript might fit into the journal's scope should be sent to hepl@lse.ac.uk.

We are sure that there is a gap in the health policy literature that we hope *HEPL* will fill. Future submissions and subscriptions to *HEPL* will attest to whether this gap is more than a figment of our imaginations, but given the extensive and growing debate on practically all aspects of health care from the economic, political and legal perspectives, and given the clear interrelation between these perspectives at the policy level, we suspect that, in the absence of *HEPL*, this gap will grow. We therefore hope that this new journal will offer good service to the health policy community.

The Editors