

# Connection, Commitment, and Community in Family Medicine

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It's nice to come together again, days after we celebrated the STFM Annual Spring Conference in beautiful Salt Lake City, Utah. This celebration was to be very busy for me, due to my role as deputy editor at *Family Medicine* and as current board president of the Family Physicians Inquiries Network. I looked forward to participating in the six presentations my author teams had worked on, including the Bishop Lecture. As you know, Dr Marion Bishop led the Department of Family and Preventive Medicine at the University of Utah, where I work.

Part of being a family physician is recognizing that family is essential. On the day before the meeting, one of my adult children called me during clinic and asked me if I would please go to see them. They were ill, and they needed me. Although I am a physician, my adult child needed their father. When they asked me, I remembered something a wise mentor told me many years ago. Dr Victoria Gorski said, “José, I never met anyone who wished they spent more time at work.”<sup>1</sup>

Thanks to the excellent teams I work with, I could travel to another state to assist my child in a way that no one else could, while my copresenters delivered all the presentations I was a part of. That was an unbelievable gift, and I will be eternally grateful to my colleagues for having my back. I am delighted that we could live by the advice of sage family medicine leaders, who instructed, “No one writes (or presents) alone.”<sup>2</sup>

This, the final spring issue of *Family Medicine*, presents articles on diversity, survey research, and medical student education. Alumni and faculty from the Leadership through Scholarship Fellowship wrote an excellent special article, “Defining and Addressing Mentorship Gaps for Underrepresented Faculty.”<sup>3</sup> While there is great controversy and fear surrounding discussions regarding underrepresentation and diversity, *Family Medicine* continues its commitment to bring its scholarly audience the best information on issues that are important to our patients and learners. *Family Medicine* continues to lead in diversity, equity, and inclusion research.<sup>4</sup> This issue shows we will not abandon that role.

This issue also presents two articles related to surveys from the Council of Academic Family Medicine Educational Research Alliance (CERA). CERA annually administers this survey, and faculty can submit questions. Family medicine leaders in the United States and Canada are the principal respondents. The first CERA paper, “Evolution of the Family Medicine Clerkship: A CERA Secondary Analysis,”<sup>5</sup> was presented at the Medical Student Education conference in San Antonio, Texas earlier this year, and the finished article is presented here. Family medicine clerkships have changed over time, and Dr Ringwald and colleagues describe those changes and discuss the implications. *Family Medicine* encourages all presenters at family medicine conferences, especially those sponsored by STFM, NAPCRG, and the AAFP, to use their presentation to develop publishable research article submissions related to family medicine education.

Another CERA paper, “A Descriptive Bibliometric Study of CERA Publication Dissemination, Authorship, and Citation Rates,” looks at how researchers use CERA survey data in publication.<sup>6</sup> The data in this study, along with the information published in the April issue on gender diversity in CERA submissions, gives us a clearer picture of who is submitting questions,<sup>7</sup> writing about the results, and being cited.

An author group from the Association of Departments of Family Medicine also offers an informative article on increasing the number of medical students choosing family medicine as a career.<sup>8</sup> Early exposure to family medicine has been a staple of this effort, but these authors address a different tactic—*admitting* those more likely to choose family medicine. More than 70% of those who chose family medicine indicated a different specialty when admitted to medical school.<sup>9</sup> Admitting medical students planning on family medicine requires identity work, as those from minoritized backgrounds, nontraditional students, and community college graduates are more likely to choose our specialty.<sup>10–12</sup> These authors provide more insight on accomplishing these goals in a post-Affirmative Action environment.

My personal favorites are the stories; this issue’s “Invisible” resonates with me.<sup>13</sup> We all feel overlooked and unheard sometimes, and I am grateful that Dr Borowsky has shared her experience so poignantly.

The editors at *Family Medicine* wish you fulfillment as you enter the summer and do the incredible work that is your calling. Thank you for reading the journal and contributing to the science and stories presented here. You are the voice of *Family Medicine*.

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