

Building on Strength Together: Changes Within *Family Medicine*

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Arch G. Mainous III, PhD, long-time deputy editor of *Family Medicine*, tenured full professor, and vice chair for research in the at the University of Florida Department of Community Health and Family Medicine, has stepped down from the deputy editor position and is pursuing other interests.

Dr Mainous is well known in family medicine circles and has been honored with multiple awards in the Society of Teachers of Family Medicine and the North American Primary Care Research Group, where he received the prestigious Maurice Wood Award for Lifetime Contribution to Primary Care Research. A gifted scientist and methodologist, Dr Mainous is the author of more than 500 articles published in peer-reviewed journals, with over 31,000 citations and a stunning h-index of 86. He is in the top 2% of all scientists cited in his field. The National Institutes of Health, the Agency for Healthcare Research and Quality, the Robert Wood Johnson Foundation, and the Centers for Disease Control and Prevention have all funded his research. His recent editorial on employer-based health care and the change we need to make to ensure that populations get better health *and* care has all of us thinking about solutions and new directions for primary care.¹ We will miss Dr Mainous as deputy editor; he has left large shoes to fill. Lucky for me, I have his cell phone number.

After an extensive national search, I was offered the role of deputy editor of *Family Medicine*. I am honored to work with the gifted team that runs the journal and have had the good fortune of serving on the editorial board for the last 6 years. I value my association with this journal and I hope to build on the beautiful legacy of the journal and that of Dr Mainous.

Earlier in my career, I struggled with finding my voice in medical literature. I was interested in the experiences of minoritized faculty, and as I learned about them, I dedicated my energy, effort, and expertise to improving those experiences. Occasionally, I would write and submit something inappropriate and unscholarly. In 2013, my author team and I sent a poorly-written paper to *Family Medicine*. The reviewers hated the paper, but a kind editor saw through my anger and wrote, “I think you have something important to say. Please re-write

this from your perspective.” We did, and that paper became one of our team’s most cited papers.²

I love and admire the nurturing nature of this journal. *Family Medicine* is often the first journal in which new family medicine faculty publish their work. We love that you think of us first, and we invite all authors, as your science becomes more sophisticated, to continue to send us your work. We take pride in being the longest-running journal of the Society of Teachers of Family Medicine, and we invite you to share your work with us. Your voices matter.

There are new and exciting things on the horizon. *Family Medicine* publishes research on educational topics. We know that you do innovative work in this area, and even if your studied intervention is not a huge, multi-institution research collaboration, it can benefit the community of *Family Medicine* and medical education in general. We bring you the best research, letters, narratives, book reviews, and commentaries. Part of this effort will be special issues, but it also entails asking essential questions such as, “How can family medicine continue to lead medicine in the areas of diversity, equity, and inclusion?” and “Can we develop a way to grade the medical education literature similar to how we grade clinical medicine literature to ensure that quality medical education research is identified and operationalized?” Most importantly, “How do we teach medical students and residents to find joy in family medicine and our craft?”

We can answer these questions through collaboration and team science. I look forward to working with you as we tackle these medical education questions. Thank you for this opportunity to serve you.

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