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## NEWS ANALYSIS

## JAMA's incoming chief editor promises to get political to improve health for all

The racism row that engulfed the American Medicine Association's flagship journal last year will usher in a fresh approach to tackling inequalities, hears **Adele Waters**

Adele Waters

It's 7.30 am, but there is no whiff of morning weariness from Kirsten Bibbins-Domingo as she begins her morning conference calls.

She is smiling, beaming even, and for good reason. She has just landed her "dream job" as editor in chief of the *Journal of the American Medical Association* and its network of 13 specialist titles. She is talking on a video call from her office at the University of California, San Francisco, her backdrop a spectacular treescape that can also be seen from the San Francisco campus library—a constant reminder of where she spent so many hours as a student studying and, she admits, occasionally sleeping.

Bibbins-Domingo is currently professor of medicine and chair of the Department of Epidemiology and Biostatistics at the UCSF School of Medicine. Her new role, which she takes up in July, will see her split her time between her home in San Francisco and Chicago, where *JAMA's* offices are.

She is excited about the move, especially at this time of "such an important crossroads for science, medicine, and public health," she says. "We are in a time when scientific discovery is so powerful and has changed everything in how we've responded to the pandemic so quickly and what is really possible for so many diseases, conditions, and overall health. And yet the translation of that to improvements of health in society is, oftentimes, not there."

She continues, "At the same time, large forces are really shaping medicine, health, and public health, including deep inequities and large scale challenges like climate change, for example. I think it's the responsibility of an outstanding journal with a broad reach to publish the best science but also to be able to put some science in context of these larger challenges that are being faced right now in science and medicine and to give voice to the discussions, the debates, and new ideas to try to move those forward.

"That is what attracted me to the job; that is what I know will be front and centre of how I approach it."

And she is ready to get political too, seeing her new role and the endeavour of medical publishing more broadly as important drivers of change.

"Most of my career I've taken the position that sciences should stay out of politics, but we want the journal to be something that is moving science and medicine in a way that improves health and improves

society. And that, in the end, I think, does mean talking about the larger issues. And that will be read by many as being more political."

She sees the level of apparent mistrust in science and medicine and in institutions as something that medical journals have a particular responsibility to tackle. "How we both communicate science in a trustworthy way and give voice to the debates and the controversies that exist is actually the real challenge at this time."

### Intense appointment process

Bibbins-Domingo's appointment followed three rounds of interviews with selection panels that included 18 leaders from across medicine and academia throughout the US. "The interviews were among the most intense that I participated in," she said. "It was a diverse—by every measure—selection committee. They were very intense with questioning, as was every step of the process."

The final hurdle was a lunch meeting with the AMA's chief executive, James Madara, which she understood to be part of the interview process but turned out to be a meeting to offer her the job.

"He made me the offer during our lunch, which was quite surprising. I spent the rest of my time a little bit tongue tied," she says.

For someone who has spent her life conducting research, a journey into academic medical publishing might seem a natural step, but she says she was uncertain about whether she would be the right fit. "I really had no idea that I would ultimately be chosen, because this is a dream job for many, and there are many who come with really outstanding qualifications," she says. "But I was really pleased when they finally made the decision [to appoint me]."

She is cognizant of the task that awaits her when she takes the helm but also the weight of responsibility, as the first person of colour to fill the job. "It's not lost on me. That [race] is certainly one part of my identity," she says. "But we all bring many identities and experiences to our work."

### Race row

In her case, these include biochemist, physician, scholar, and leader. Her stepping into the top job at *JAMA* will be a symbol of change, but especially so given that the journal was embroiled in a race row

last year that resulted in the previous editor in chief quitting.

The row was instigated by a podcast, published last February (and since withdrawn), that featured two members of staff discussing racism in medicine. One of them, the previous deputy editor Ed Livingston, is reported to have argued that racism in medicine had ended and that the discussion needed to move from structural racism to the way socioeconomic status affected African-American doctors.

This view prompted the Institute for Antiracism in Medicine to launch a petition calling for changes at *JAMA*, including a review of leadership. It has since gathered more than 10 000 signatures.<sup>1</sup> It also prompted an apology from Madara, who said that structural racism did exist in US medicine and should be tackled.<sup>2</sup> Livingstone resigned, and the then editor in chief, Howard Bauchner, took editorial responsibility and stood down.

AMA later announced a plan to dismantle structural racism within the organisation and to work towards health equality.<sup>3</sup>

So is Bibbins-Domingo satisfied that lessons have been learnt at *JAMA*? “Am I satisfied? No, I’m not satisfied. There’s a lot to do,” she says. “But I am satisfied that this is an organisation that has really taken important steps and is looking towards that direction, and I’m really looking forward to being part of that process.”

## Programme of change

In the run up to her appointment she says it became very clear to her that the whole race incident had prompted “quite a bit of self reflection” at *JAMA* HQ. A programme of change had already begun, such as appointing editors for equity issues across all of *JAMA*’s titles, for example. “I’m satisfied that change is starting to happen.”

But she is also clear that achieving material change “isn’t the job of one person or one voice.” Rather, it will be a systematic process, requiring her and the team to pay attention along the chain of production, from authors to reviewers and editors, reviewing processes and, also, language used.

And it will be wider than *JAMA* too, she adds, because current scientific publication is “neither responsive nor reflective of all of the voices that are producing outstanding science moving the fields of medicine.”

She says, “The entire scientific enterprise—and the entire enterprise of medicine and public health—is embedded in a society that is both biased and has historical and contemporary structures that continue to be racist, biased, and unequal.

“We need to think about how we tackle the structures at all levels. The most important thing that we can do is to create the structures that both name and acknowledge the biases, as well as put processes in place to make sure that more voices are at the table and contributing to this important endeavour.”

1 Ask JAMA (top medical journal) to stop perpetuating racism in medicine. Change.org. <https://www.change.org/p/jama-editorial-board-ask-jama-top-medical-journal-to-stop-perpetuating-racism-in-medicine>.

2 Tanne JH. *JAMA* deputy editor resigns after critics hit out at podcast on structural racism. *BMJ* 2021;372:n768. doi: 10.1136/bmj.n768 pmid: 33737405

3 Tanne JH. American Medical Association confronts its racist past with plan for a more equal future. *BMJ* 2021;373:n1314. doi: 10.1136/bmj.n1314 pmid: 34020970