



AMERICAN JOURNAL OF PUBLIC HEALTH EDITORIAL BOARD

REPORT TO THE GOVERNING COUNCIL

OCTOBER 2024

This Report provides a summary of the activities and accomplishments of the *American Journal of Public Health (AJPH)* for the past year. The *AJPH* is a premier public health outlet for the United States and the world. It is well-known for its high reputation and standards.

the *AJPH* continues to support the vision and mission that were created to guide our principles. These principles provide direction, action and evaluation.

OUR VISION AND MISSION STATEMENTS ARE OUR ROAD MAP

The Mission of the *American Journal of Public Health (AJPH)* is to advance public health research, policy, practice, and education by publishing the premier public health academic journal in the field.

The *AJPH* will be recognized nationally and internationally as the premier public health journal, being the most highly-regarded and most-cited source of public health knowledge, practice, policy, and education, resulting in the improved health of individuals and communities.

AJPH values editorial independence and sets the bar for the state of public health science. We aim to include diverse voices and provocative viewpoints; we strive for social justice and health equity. We publish quality, timely, accessible, innovative, and useful public health information, knowledge and wisdom. As a publication of American Public Health Association (APHA), the *AJPH* endorses the values of APHA as it forges the future of public health nationally and globally towards optimal health and well-being for all. APHA values include community, science- and evidence-based decision-making, health equity and justice, prevention and wellness, measurable progress in improving health and the fortitude to persevere. The Strategic Plan Defines Our Principles of Direction, Action and Evaluation

The purpose of the strategic plan is to guide the work of the *AJPH* Team (i.e., Editorial Team, Editorial Board, Journal Staff) in achieving the journal's mission and vision. Specifically, the strategic plan will serve to:

- Guide the *AJPH* Team in the execution of journal activities.



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- Guide the assessment of the progress of the *AJPH* Team in meeting goals and objectives driven by the mission and vision.
- Assist authors, readers, and other stakeholders of the *AJPH* in understanding the role of the *AJPH* Team in achieving the mission and vision of the journal.

Five imperatives are reflected in the current strategic plan and include:

Strategic Imperative I: Publish the highest quality public health research and advancements in practice to strengthen public health science, policy and practice

Strategic Imperative II: Disseminate journal content to the broadest audience

Strategic Imperative III: Maximize utilization of journal content by public health researchers, policy makers, practitioners, and educators

Strategic Imperative IV: Advise on journal business practices to ensure sustainability of the journal

Strategic Imperative V: The Editorial Board is fully engaged to support the journal

This report is organized by imperative to show progress in each of the 5 areas.



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Strategic Imperative I:

Publish the highest quality public health research and advancement in practice to strengthen public health science, policy and practice

RANKING OF THE JOURNAL IN CLARIVATE STATISTICS

Our Impact Factor has decreased to 9.6 from 12.7 (Table 1). We are currently ranked 10 of 207 journals in the Public, Environmental and Occupational Health category of the Science Index, and 8 of 180 journals in the same category for the Social Sciences Index of the Clarivate¹ Journal Citation Report. We will continue to strive to increase our impact factor. *Note.* IFs are slow to reflect changes in the citations the journal gets. For example, the IF for 2023 is the ratio of the “citations in 2022 for publications in 2021 and 2020” over the total number of citable items in 2020 and 2021. Any changes that occurred in the journal in 2020 and 2021 are reflected in this year’s Impact Factor.

Table 1—Journal Impact Factor and Ranking, by Year and Index

YEAR	IMPACT FACTOR	SCIENCE INDEX RANKING	SOCIAL SCIENCES INDEX RANKING
2023	9.600	10/207	8/180
2022	12.700	10/207	6/181
2021	11.561	13/210	7/183
2020	9.308	9/203	6/176
2019	6.464	13/193	7/169
2018	5.381	12/185	6/162
2017	4.380	16/180	4/157
2016	3.858	24/176	8/157
2015	4.138	16/172	5/153
2014	4.552	13/162	5/145
2013	4.229	14/160	4/136
2012	3.930	16/158	4/136
2011	3.926	13/157	3/131
2010	3.850	13/140	3/114



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2009	4.371	9/122	2/95
2008	4.241	10/105	3/76
2007	3.612	10/100	2/77
2006	3.698	11/98	2/66
2005	3.566	11/99	2/63
2004	3.241	8/93	2/60
2003	3.363	6/89	2/56
2002	3.279	7/90	9/55
2001	3.034		
2000	3.269		
1999	3.015		

H-Index

We aim for annual growth in the H5-index, the measure of citations each *AJPH* article receives. The index is based on the set of the scientist's most cited papers and the number of citations that they have received in other publications. Our 2023 H-Index is 307, up from 293 in 2022, 278 in 2021 and 264 in 2020, which ranks us 4 out of 656 journals, down from 3rd position in 2022. Our overall Scimago Journal Ranking Indicator is 2.139, which ranks us 21 of 656 journals and is a decrease from 2022, when *AJPH* was 2.645 and ranked 11 of 611 journals. *AJPH* remains ranked within the first quartile (highest ranking) of all journals. Among all journals in this database, the journal ranks #185 of 29,165 journals overall (or the top 0.6%) for H-index and #1,209 of 29,165 journals overall (or the top 4.1%) for the Scimago Journal Ranking Indicator.

Eigenfactor Score

The eigenfactor score is a metric that indicates the influence of a journal within the field and measures where content is being cited and how often. The greater the score the more influential the journal's content is considered to be. At its core, the score indicates that high impact journals are citing journal material in their articles. For 2023, the journal eigenfactor scores is 0.03724. This score indicates that journal content is being cited often by high-impact journals and therefore remains the top influential journal in the field. Normalized to a score of 1, our eigenfactor jumps to 8.13794, which indicates that studies published in *AJPH* are 8 times more influential than articles published in other journals.



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Historically, the journal has consistently ranked top five in eigenfactor score since 2014 in the Social Science Citation Index and Science Citation Index, respectively.

AJPH research published in the last 100 years was cited 43,406 times in 6,131 journals. Top citing journals include *PLOS One*, *Frontiers in Public Health*, *BMC Public Health*, *Jama Network Open*, and more.

The new strategic plan calls for developing a new indicator to measure the number and rigor of papers addressing our key values (including advancing social justice, critiquing threats to health from the commercial and political sectors, and identifying innovative methods to address emerging public health issues).

Strategic Imperative II:

Disseminate journal content to the broadest audience

RSS Alerts

From July 2023 to June 2024, the journal emailed monthly issue alerts to 5.59 million individuals, or 466,038 people per month. Of the 5.59 million individuals receiving email alerts, 896,010 were members and 4,696,452 were non-members. Approximately 38% (2,137,158) of the emails were opened, and 2.1% of people who opened an email clicked on one of the embedded links. Our newsletter is emailed on a weekly basis.

Website Statistics

In FY2024, we had 6.8 million visitors, an 20% decrease over last year, who read 1.75 million abstracts and 3.96 million articles (27% decrease). Mobile use of the website decreased by 20% to 577,497 mobile accesses during the fiscal year. We averaged 435,070 site visitors per month (23% increase).

Globally, the majority of users are from the United States, followed in order by the United Kingdom, Canada, India, and China. After North America, most users are from Europe, Asia, Australia, and South America.

Marketing Efforts

AJPH is typically promoted at conferences for the North American Serials Group, Special Libraries Association, Pacific Northwest Medical Library Association, South Central Chapter Medical Library Association, North Atlantic Health Sciences Libraries Association, Charleston Conference on Collection



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Development, Michigan Health Science Library Association, North Atlantic Health Science Libraries, The Mid-Atlantic Medical Library Association Conference, American Library Association-midwinter and annual meetings, Special Libraries Association and Health Tech, Massachusetts Health Sciences Library Network, Medical Library Association, and the PubMart booth at the APHA annual meeting. *AJPH* is considered an Essential Core Journal for Public Health by the Medical Library Association section on Public Health and Health Administration.

Marketing efforts this year were heavily focused on customer retention, especially as libraries continue to struggle with smaller budgets in comparison with previous years. In addition, we targeted small health institutes and community health clinics, public health organizations and state departments, and hospitals. Globally, we targeted health agencies and hospitals, with special efforts to retain customers in Japan and Asia. Finally, we focused on sales retention through smaller subscription agents such as WTCox and Prenax with good success.

Each month we email an electronic table of contents (eToc) all *AJPH* customers to promote the usage of journal content and to further establish *AJPH* as their source of information. In total, subscribers open at a rate of 17.4% each month and click on embedded links approximately 3.8% of the time. These are in line with industry norms.

For FY2025 we will continue to focus on retention by showcasing our improved fulfillment process to the subscription agencies and consortia, both domestic and foreign. By having the materials in their hands well in advance, we expect them to be able to quickly address price requests and close subscription renewals with their customers.

Finally, we will be conducting planned promotion efforts aimed at further expanding *AJPH* reach within federal and state governmental entities. This will be done both with direct promotion and through relationships with agencies that have strong sales reputations within the various departments.

Subscriptions Performance

As of year-end CY2023, *AJPH* had 421 subscribers vs 432 in CY2022, a loss of 11 subscriptions. Despite a continued decline in subscriptions, small decline in subscriptions actually represents a stabilization compared with previous years. We're encouraged our retention efforts have been successful and this declining rate signals a potential stemming of year-over-year losses. Overall, customer satisfaction has improved, and our current subscription management team is focusing on building relationships.

Currently, the journal has 411 institutional subscribers, which is 11 less than our final total in CY2023. Geographically, 59% of our subscribers are domestic and 41% are foreign, with the largest five (5)



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subscriber concentrations in India, Japan, the United Kingdom, Canada and China in that order. However, it is important to note there are thirty-three (33) countries represented among our subscribers. Most have online subscriptions or print + online subscriptions vs print-only subscriptions. The print subscription business continues to decline year over year as customers migrate to a digital-only subscription.

Strategic Imperative III:

Expand the readership of the journal to include public health researchers, policymakers, practitioners, and educators

The *Journal* continues to promote articles through various social media channels, which includes the blogs--*AJPH* Talks and Public Health Newswire--Facebook page, YouTube channel, and Twitter feed. These outlets are used to promote individual issues and articles within the *Journal*, highlight articles being covered by other news outlets, relate content in the *Journal* to current affairs and APHA efforts, and announce new policies, products, and *Journal* features.

The most read articles this past year were:

- “Spatiotemporal Analysis Exploring the Effect of Law Enforcement Drug Market Disruptions on Overdose, Indianapolis, Indiana, 2020–2021”: Read **24,987** times, published in the July 2023 issue.
- “Unpacking Cochrane’s Update on Masks and COVID-19”: Read **12,913** times, published in the October 2023 issue.
- “CRISPR in Public Health: The Health Equity Implications and Role of Community in Gene-Editing Research and Applications”: Read **6,024** times, published in the August 2023 issue.

The most shared articles this past year were:

- “Spatiotemporal Analysis Exploring the Effect of Law Enforcement Drug Market Disruptions on Overdose, Indianapolis, Indiana, 2020–2021” published in the July 2023 issue; Altmetric Score: **1562** (ranks 235 of 383,173 articles published around this time).
- “We Can’t Arrest Our Way Out of Overdose: The Drug Bust Paradox” published in the July 2023 issue; Altmetric Score: **559** (ranks 1,187 of 383,050 articles published around this time).



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- “Employee Cardiometabolic Risk Following a Cluster-Randomized Workplace Intervention From the Work, Family and Health Network, 2009–2013,” published in the December 2023 issue; Altmetric Score **441** (ranks 1,102 of 375,418 articles published around this time).

The most cited articles this past year were:

- “Spatiotemporal Analysis Exploring the Effect of Law Enforcement Drug Market Disruptions on Overdose,” published in the July 2023 issue; **41 citations across 6 disciplines**.
- “Social Vulnerability in US Communities Affected by Wildfire Smoke, 2011 to 2021,” published in the July 2023 issue; **17 citations across 4 disciplines**.
- “Extending an Antiracism Lens to the Implementation of Precision Public Health Interventions,” published in the August 2023 issue; **8 citations across 3 disciplines**.

The most read issues this past year were:

- “Overdose: The Drug Bust Paradox”: Accessed **25,193** times (July 2023)
- “Finding Common Ground for Public Health Action”: Accessed **24,997** times (October 2023)
- “US Life Expectancy Falling Behind”: Accessed **21,068** times (September 2023)

Twitter

We currently have 13,625 (5% increase from 2022) followers on Twitter. Our 240 tweets (8.6% increase) this past year were viewed 333,359 times (32% decrease), and 9,635 people (5.4% decrease) have engaged with posted content.

Facebook

On Facebook, we have 17,439 followers (0.3% decrease from 2022). We posted 177 times (7.3% decrease) on Facebook, and those posts were viewed 9,670 times (92.2% decrease) and engaged by 1,415 people (no change from last year).

Podcasts

Dr. Morabia continues to produce the *AJPH* Podcast in both English and Chinese. Since 2015 the *AJPH* podcast has been listened to 157,000 times. Over the last 12 months, it had 22,700 listeners. The podcast continues to be ranked 3 out of 30 for the best public health podcasts (<https://www.mphonline.org/best-public-health-podcasts>).



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The most listened English tracks were:

- *AJPH* 9/2023: "Decline in US Life Expectancy," 1,610 accesses
- *AJPH* 10/2023: "The Drug Bust Paradox" 1,257 accesses
- *AJPH* 11/2023: "Something Related to Education is Ailing the US" 1,194 accesses

The most listened Chinese track was:

- *AJPH* Chinese Podcast, "2023 Third Chinese Podcast," 711 accesses

Media Coverage

The *American Journal of Public Health* continues to be featured, cited or referenced in local and national news coverage from online, print, radio and television media outlets. The media has covered *AJPH* studies with each monthly release of new research and special supplements.

Strategic Imperative IV:

Enhance *Journal* sustainability and business practices.

In FY2022, we published 18 issues (12 regular issues plus 6 Supplement issues), or 362 articles, 211 of which were published as open access pieces. We produced a total of 1,816 pages (1,312 print pages plus an additional 504 online-only pages).

Times from Submission and Acceptance to Publication

Submissions increased by 1.74% compared to 2023 numbers. Submissions were 3,101 in FY2024 vs 3,048 in FY2023. Figure 1 presents data from the last 5 years. The pandemic artificially inflated the number of incoming submissions but we feel that we are now receiving the true number of submissions per year.



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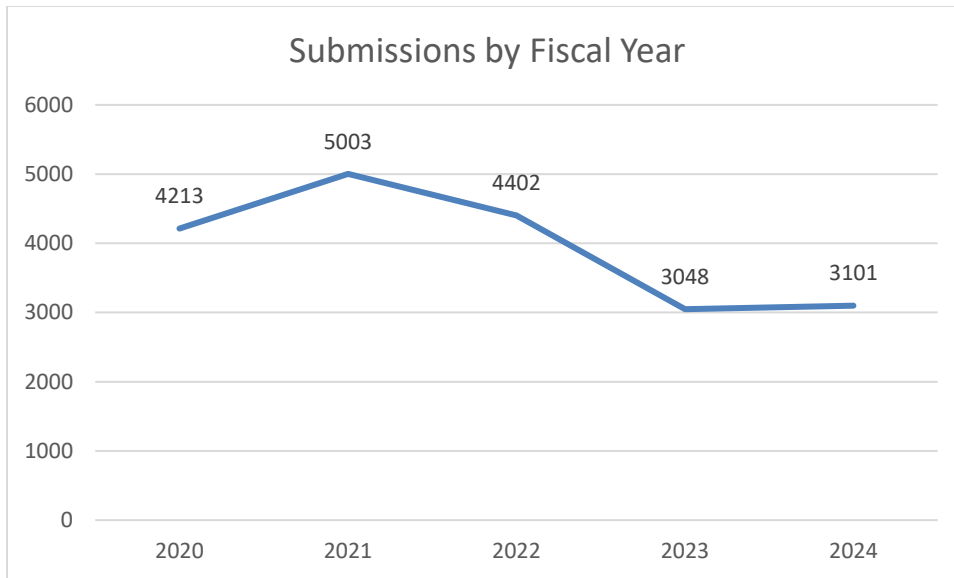


Figure 1—Submissions to the journal, by fiscal year: 2020–2024.

In FY2023 “Accept” decisions numbered 377 of 2,690 decisions vs 326 of 2,950 in 2023. Figure 2 provides data from the last 5 years.

The overall acceptance rate increased to 14.01% from 11.01% the previous year. For research-oriented papers, the acceptance rate remains very low at 6.5%. The journal Editors continue to be selective about the papers that make it into peer review, and this has kept the acceptance rate stable while keeping other rankings high. Generally, a lower acceptance rate indicates greater selectivity in which papers are published. Figure 3 shows change in acceptance rate over 5 years.



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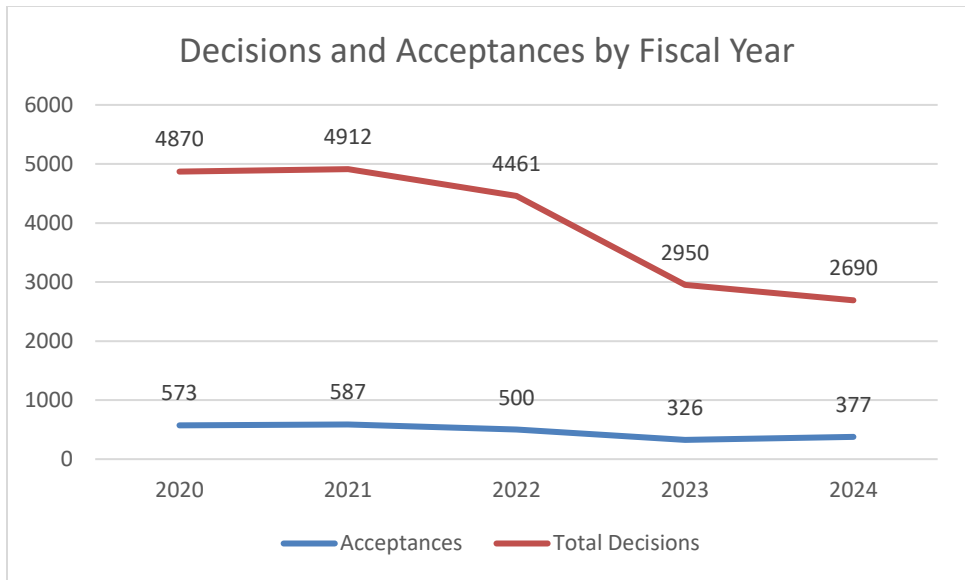


Figure 2—Journal Acceptances and Decisions, by fiscal year: 2020–2024.

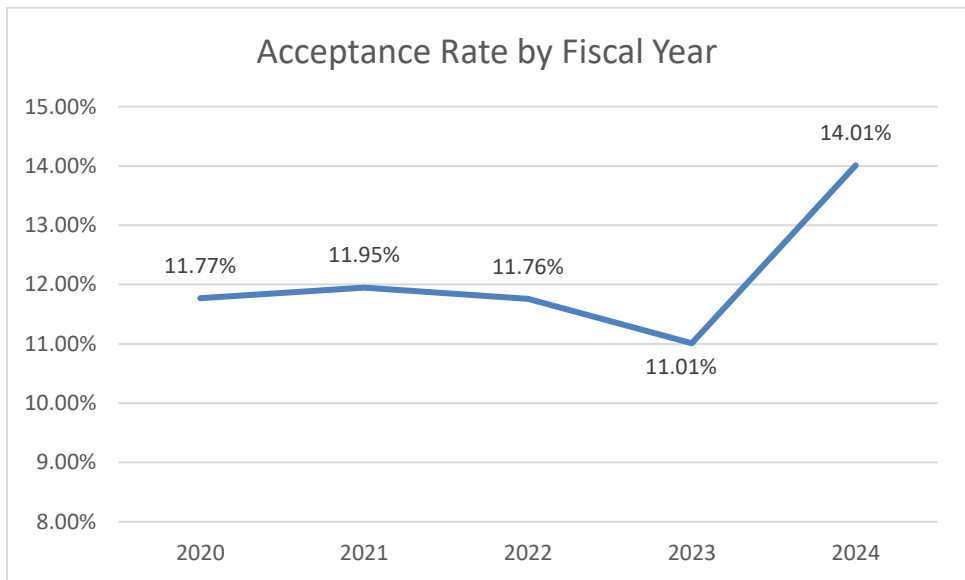


Figure 3—Acceptance rate, by fiscal year: 2020–2024.



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The time it takes a paper to move from submission to review increased to 37.3 days in FY2024 as compared to 24.0 days in FY2023. The increased time to peer review reflects continued difficulty finding peer reviewers within the initial series of invitations. Peer reviewers continue to be selective about the assignments they choose to review, and it is increasingly taken 2-3 rounds of searching secure the required number of peer review recommendations to make decisions on papers. Figure 4 shows our 5-year performance.

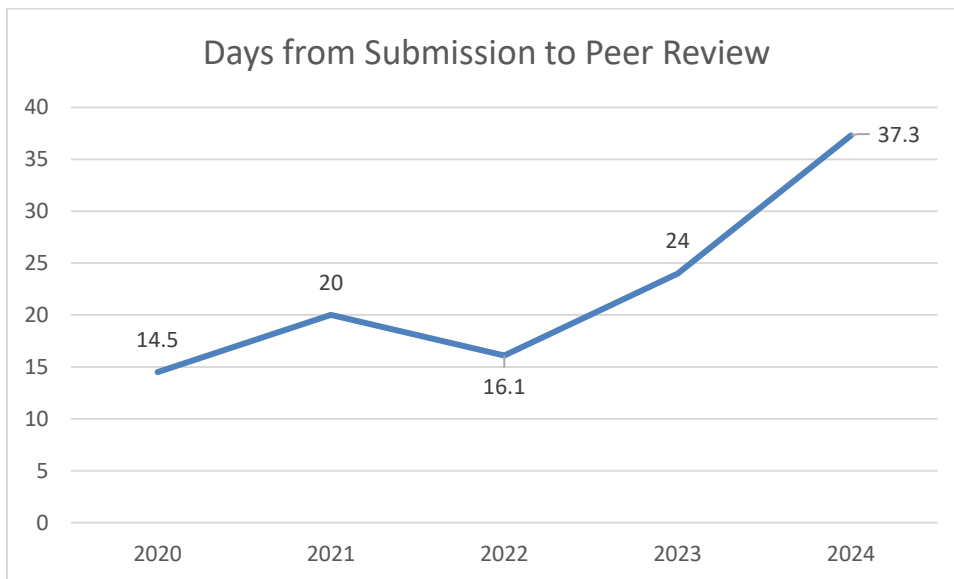


Figure 4—Number of days from submission to assignment for peer review, by fiscal year: 2020–2024.

Because peer review is taking longer, time to publication continues to take marginally longer compared to previous years. We also undertook a triple masked experiment for September 2023 to March 2024 to determine where biases might exist within the submission, peer review, and formal evaluation process. To maintain the integrity of the experiment, peer review was handled outside of our normal systems, and the initial change led to delays for papers submitted at the beginning of the submission period. Despite these two situations, most papers were accepted within a median of 1.4 months in FY2024 vs 1.53 months in FY2023, and research papers that undergo peer review took a median time of 5.3 months and 2 rounds of peer review before being accepted. Rejected papers were typically rejected within 8.9 days of submission. Our 5-year performance appears in Figure 5. Finally, time from submission to online publication also decreased to 4.0 months in FY2024 as compared to 4.4 months in FY2023. Figure 6 shows our 5-year performance.



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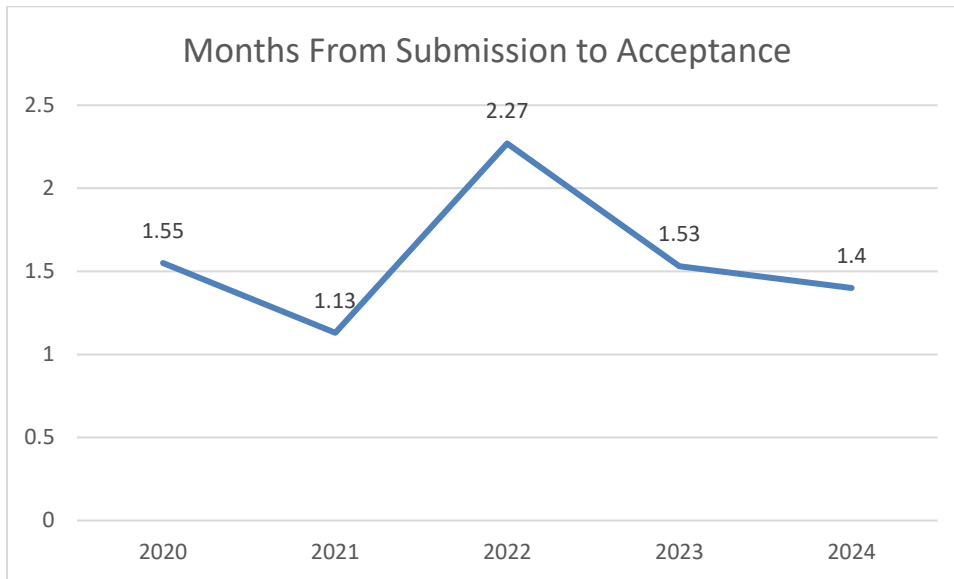


Figure 5—Number of months from submission to acceptance, by fiscal year: 2020–2024.

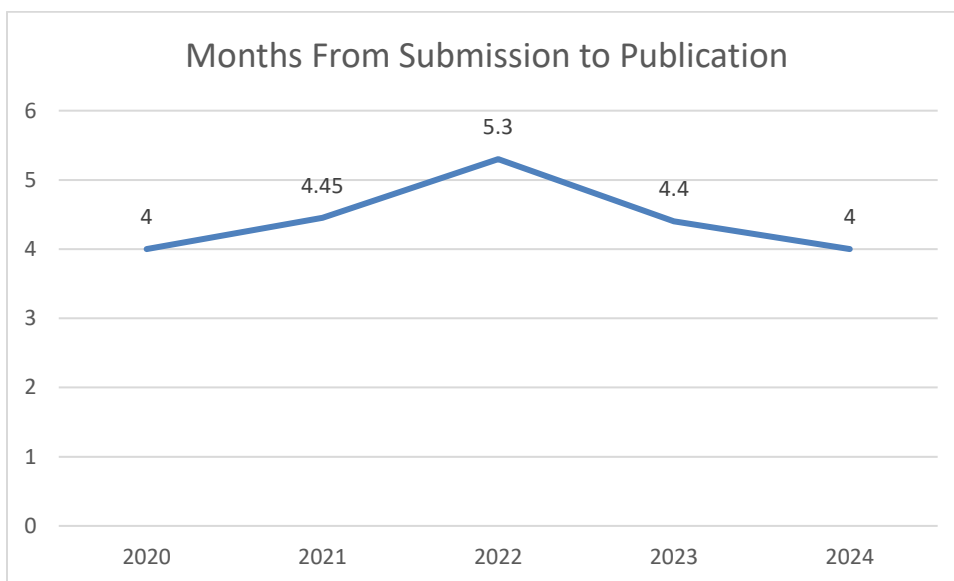


Figure 6—Number of months from submission to online publication, by fiscal year: 2020–2024.



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These rates reflect the continued commitment of the APHA staff and the *AJPH* editors and reviewers, who continually strive to position the *AJPH* as the premier public health journal in the world.

Topics Secured For External Funding

AJPH continues its commitment to ensure that science and research are intertwined throughout the publication of state-of-the-art manuscripts.

Topics that have been secured through external funding and published in FY2024 include:

- December 2023: Increasing Equitable Access to Family Nutrition Support (\$87,500)
- January 2024: Leveraging the Powers of Communities (\$93,300)
- February 2024: Health Worker Mental Health (\$107,487)
- March 2024: Social Context of Mental Health, Bereavement & Grief (\$75,000)
- May 2024: Improving Maternal Health Outcomes (\$131,500)
- May 2024: RAD x UP II: Community-Engaged Research (\$85,000)
- June 2024: Advancing Hispanic/Latino Research “Pa’lante” (\$45,000 [partial])

Total revenue from these projects is \$624,787.

In FY2025 we plan to produce funded issues on:

- Advancing Hispanic/Latino Research “Pa’lante” (July 2024; \$75,000 [partial])
- Addressing COVID-19 Health Disparities (September 2024; \$110,000)
- Cannabis Research and Surveillance (October 2024; \$90,000)
- Protecting Vulnerable Populations (November 2024; \$49,000)
- Black Women, HIV & Health Equity (March 2025; \$50,000)
- Health Equity Action Network: Combatting Health Disparities (May 2024; \$75,000)

Total revenue from these projects is \$449,000.



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Strategic Imperative V:

The Editorial Board is fully engaged and committed to journal success

In the last year, the *AJPH* Editorial Board has explored ways to facilitate promotion of the journal and ensure member engagement. The Board has focused on four areas: (1) number of board members serving as peer reviewers, (2) monthly promotion of journal material via social media, (3) engagement with APHA sections and members, and (4) advisement on ethical issues (e.g., plagiarism, scientific misconduct). The number of editorial board members serving as peer reviewers continues to increase year over year, and we have provided the Editor team with a list of board members, expertise, and areas of interest. Furthermore, engagement with *AJPH* material via social media has increased. To engage APHA sections to a greater extent, an editorial board subcommittee has been formed to develop a series of webinars based upon section and member feedback. The first webinar was conducted in the Fall of 2020 and addressed the peer review process. The second webinar was conducted in the Fall of 2021 and focused on how authors could promote content through social media. The 2022 webinar focused on practice-based publishing and was well attended. The 2024 webinar discussed artificial intelligence (AI) and how it can be applied to public health data. The Editorial Board ideally will continue to provide webinars twice a year moving forward.

In 2024, we established several working committees: Member outreach, Artificial intelligence, Companion journal (assessing whether we should develop one or more) and Strategic planning, along with the standing Ethics Committee.

Our focus this year has been on reviewing and updating policy for the journal program. Our motivation for revising the policy manual originally was to become eligible for full COPE membership. This board decided to join as a paying COPE member a few years ago; we can apply when our public-facing guidelines match up. We set up a working group to address this in 2023. It's a very long document, 20 sections. Our goal was to add AI content to the policy document, based on the work of the AI subcommittee.

To consider ideas for new companion journals, chair of that committee (Shawn Kniepp) undertook a thorough research project on what articles *AJPH* rejected (*by assessing a 5% sample of rejected articles from 2022-2023*) the committee enlisted students to help track down where the rejected articles were ultimately published. This would allow us to identify topic areas for new companion journal(s); good papers we had to reject might form the basis for identifying new journal topics.

We carefully followed the supplement topics as they were developed, and recommended



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new supplement topics, as follows:

1. War and Public Health
2. Research on Excessive Alcohol Intake
3. Tobacco Use Reduction and Cessation
4. Local Action on Climate Change/Built Environment
5. Gun Violence Policy and Prevention
6. Overdose Prevention and Public Health Practices
7. Water and Public Health
8. Physical Activity and Public Health
9. Transgender Health
10. Democracy and Public Health

In addition to updating the internal policies of the board itself, we also are adding in a new section on AI that is meant to establish guidelines for applying AI tools to research and submissions. Once finalized, an Editorial will be developed to announce the new policy.

Board members engaged actively with our student member this year, who brought us ideas from her studies at the American University of Beirut. We also introduced a new agenda topic this year: taking turns having members choose an article from a recent issue of AJPH to present to the board.

Finally, the Editorial Board continues to provide advice on journal activities and business directions. We've participated in calls with members of the Supplement Issue program to provide potential themes and topics of issues and connect developed themes with potential external funders.

The Editorial Board, through its standing subcommittee on strategic planning, continually monitors the progress on the strategic plan and is intending to adopt a new plan at the meeting in October, 2024. New plan here: <https://docs.google.com/document/d/1fhqIYvxDA6fmP3zosU-UNTm35wFbVJq2/edit>

The new plan calls for a sixth strategic imperative:

Strategic Imperative VI: The Journal is aware of the threats and benefits of modern technology, and establishes policies and mechanisms to monitor author and reviewer use of computer tools to ensure we are consistently maintaining highest integrity standards.

1. The Our journal's papers reflect sound science produced by humans who use technology appropriately and ethically.
 - A. AJPH editorial board and staff will we develop or adopt ways of identifying when artificial intelligence has been used by authors and reviewers, and of assessing appropriate use.



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From Alfredo Morabia:

From January 1, 2023, through October 12, 2023, we made final decisions on: **2,543** papers; extrapolated to 12 months, this would be approximately **3,390** expected final decisions in 2024, vs 3,223 in 2023; 5.6% of submitted research papers were accepted during this period in 2024.

From January 2024–September 2024, time to peer review invitation took 23.4 days vs 24.9 days for the same period in 2023. We continue to process manuscripts at a fast rate. Overall, time from submission to acceptance remains slightly elevated at 2.86 months vs 2.56 months in 2023, and submission to publication is taking 3.77 months vs 5.2 months in 2023.

We have published 6 supplements in 2023:

Supplement 3 2023: Increasing Equitable Access to Family Nutrition Support

Supplement 1 2024: Leveraging the Powers of Communities

Supplement 2 2024: Health Worker Mental Health (\$107,487)

Supplement 3 2024: Social Context of Mental Health, Bereavement & Grief (\$75,000)

Supplement 4 2024: Improving Maternal Health Outcomes (\$131,500)

Supplement 5 2024: RAD x UP II: Community-Engaged Research (\$85,000)

We have signed contracts for 6 upcoming supplements on “Advancing Hispanic/Latino Research ‘Pa’lante’”, “Addressing COVID-19 Health Disparities”, “Cannabis Research and Surveillance”, “Protecting Vulnerable Populations”, “Black Women, HIV & Health Equity”, and “Health Equity Action Network: Combatting Health Disparities”

Overall, feedback indicates that the journal has become more attractive for a large readership of practitioners, academics, and policymakers.



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SUMMARY

The Journal continues to increase its reach and impact toward advancing public health while reaffirming our commitment to editorial independence, and other core policies and ethical principles that are part of our core values and ways of moving forward to create a more just society and humanity.

The *AJPH* Editorial Board, the Editors and the Publisher are delighted to be part of the accomplishments of the Journal. We are a collaborative team that continues to advance the *AJPH*'s vision and mission using values of excellence in leadership, science and translation, policy and publication.