

## Reflections

James J. James, MD, DrPH

As the year draws to a close it is time to think back and briefly summarize what has been a tumultuous but overall positive year for the journal and the society.

On the journal side, we continue to grow in terms of submissions and subscriptions both domestically and globally. This, of course, has dramatically increased our workload and has, at times, strained our editorial and peer review processes. This in turn has led to the realization that we need to take a hard look at our editorial structure and embrace the necessary change to continue to grow and meaningfully impact global health security. We have begun the necessary deliberations to move forward and we will see significant changes in the year ahead, to include the appointment of a new editor-in-chief. We will be actively soliciting candidates for all levels of editorial appointments and ask our readers input on both nominees and proposed structural changes.

Closely aligned with this restructuring process and necessitating its accomplishment is the conclusion of support from the National Center for Disaster Medicine and Public Health (NCDMPH) at the Uniformed Services University (USU), which has supported the Managing Editor position through October of this year. For long time readers of DMPHP you will recall that the then existent federal education and training interagency group voted to support this position soon after we left the AMA in 2013.

The original intent of the support was to see us through a transition period until we could be self-sustaining. This period extended to 5 years as society growth and resourcing has been much slower than projected. Unfortunately, the funding for the position could not be sustained and therefore we must go forward on our own; with your continued support and the improved financial condition of the journal, I am confident that we will thrive. In closing this phase of the journals evolution, I want to sincerely thank all of our federal partners for their support, with very special kudos to the National Center for housing and supporting DMPHP. Recognizing the fact that we would not have made it without their support we will continue to carry that DMPHP/USUHS logo on our cover.

Another exciting development that occurred last December was the Journal receiving its very first grant from Robert Wood Johnson to publish a special issue of the journal addressing the public health impact of the Serial Hurricanes of last year. This effort has been a resounding success; we hope to publish the majority of papers submitted in a special issue this coming February. Further, as a direct result of the work on this special issue, the society has partnered with the Puerto Rico Science, Technology and Research Trust to host a major conference in San Juan in 2019 titled "Caribbean strong." Detailed information on this meeting will be forthcoming and will include special consideration for DMPHP members. At that meeting we hope to convene a side meeting of a journal working group which will address the issues detailed in the second paragraph above, with special emphasis on global expansion.

Finally, we should briefly review our Annual Meeting, which was held between the 31st of October and 1st of November, in the Washinton, DC area. Although attendance did not reach expectations (mainly due to Halloween and other competing meetings), the presentations, headed by a keynote presentation by Robert Kadlec, MD, were, in a word, spectacular, and reflected the high quality we have come to expect of these events. As a follow-on from these presentations, at the urging of Dr. Skip Burkle and others, the Society for Disaster Medicine and Public Health voted to begin the process of official Society adoptions. Directly stemming from the meeting, we are currently in the process of adopting a Society position focused on a nuclear event. Although not yet finalized, the position will reflect the fact that, in a nuclear event, medical response capability will be overwhelmed. SDMPH supports education and training efforts to better prepare the civilian population since believe that a truly informed populace leads to significantly decreased mortality and morbidity, and most effectively increases medical capacity to deal with such an event. We should note that these conclusions were based on the data presented by subject matter experts, and the creation of such a position represents a real public health intervention that can save lives and decrease negative health impacts. We would invite any and all reader comments regarding this position.