Guest editorial

On paper

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Starting in 2025, readers who receive *CMAJ* in print will see a reduction in the frequency of its delivery. *CMAJ* will be mailed out 6 times a year, in January, March, May, July, September, and November (*JAMC* will continue to be mailed out 6 times a year, in February, April, June, August, October, and December). This will reduce the CMAJ Group's use of paper and postal services by 40%.

This is not the first step *CMAJ* has taken toward reducing our usage of paper and postage over the years. When the first fully digital version of *CMAJ* was launched, 26 thick print issues of the journal were mailed out to members of the Canadian Medical Association (CMA) each year. Print issues were reduced to 18 per year in 2015, 12 in 2017, and 10 in 2021. This change reduced not only the amount of paper we used, but also our reliance on mail services, which contributes substantially to carbon emissions.

A survey of *CMAJ*'s print readers — conducted from December 2022 to July 2024 — found that 83% of respondents read every single print issue. Many respondents said they would never read *CMAJ* in digital form. Several readers took the time to tell us why they preferred to read *CMAJ* in print.

"We spend so much of our days looking at screens that it is a pleasure to be able to hold a print copy of the *CMAJ* and read it with a warming and stimulating cup of coffee."

"I love seeing the print issue arrive through the post. It is like a familiar friend come for another visit."

"I like getting a print version. I spend way too much time looking at screens and with a print version, it is easy to access to read, re-read, then tear out any particularly relevant articles for quick reference."

I have worked in the publishing arm of *CMAJ* for the last 22 years of my career and have no desire to take the journal away from its loyal readers. Part of my current job as CMAJ Group's publisher is to practise fiscal responsibility, something that is especially challenging as the costs of everything are rising. *CMAJ*'s print issue is the primary source of revenue for the journal through advertising. Any reduction to the number of issues comes with a cost to its owner, the CMA.

At the same time, we can't ignore what Lady Environment is telling — yelling — at us. The CMA has made a commitment to support a net-zero health care system, and CMAJ Group would like to support this initiative. Health systems comprise vastly more than a collection of institutions that provide services.¹ They are built by people, resources, policy-makers, and planners, as well as the robust and reliable information that drives decisions, building, spending, training, procurement, and services. Those in the business of providing information must do their part, too.

I and all staff who work on *CMAJ* are thankful that the CMA is willing to cover the cost of this change to the frequency of *CMAJ*'s print issue. We hope that readers who enjoy holding a paper *CMAJ* in their hands will consider engaging with the digital version of the journal in the future. The digital version is the definitive version. Many articles are not published in the print version (at all or in their entirety). Readers are also encouraged to engage with *CMAJ* on our social media channels or via our biweekly podcast. Or, if we can engage our readership in another way that we have yet to explore, we would be happy to hear about it. Send your suggestions via email to cmajgroup@cmaj.ca.

Reference

 The WHO health system framework. In: Everybody's Business: Strengthening Healthy Systems to Improve Health Outcomes — WHO's framework for action. Geneva: World Health Organization; 2007:13. Available: https://iris.who.int/ bitstream/handle/10665/43918/9789241596077_eng.pdf?sequence=1 (accessed 2024 Dec. 6).

Competing interests: www.cmaj.ca/staff

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