Nationally and globally, health will continue to be one of the most important policy issues for the 2024 US election. Information about these health issues is critical for decision-making and to answer pressing public and global health questions affecting the US and the world. US elections are not only domestic; they affect world politics, economies, security, welfare, and health.

Over the last few years, a number of new issues have captured political and public attention. For example, recent health-related misinformation, coupled with uncertainty during the COVID-19 pandemic, has heightened the need for high-quality, objective evidence. In the US, clinicians, policymakers, and the public have continued to deliberate about many long-standing policy issues, including the costs of health care and prescription drugs; health disparities and racial, ethnic, and gender inequities; the opioid epidemic; Medicaid and the Affordable Care Act; access to abortion and reproductive services; and clinician workforce and well-being. Controversies have also arisen over previously established standards like vaccinations and drug approvals. Worldwide, attention has been drawn to health and humanitarian emergencies and related political ramifications, such as equitable responses to the COVID-19 pandemic and effective networks and systems needed to detect and respond to new infectious diseases, the war in Ukraine, refugee crises, health effects of climate change, and drought and food insecurity in the horn of Africa.

The increasing interconnectedness of science and society requires that we consider the effects of research and policy across a range of disciplines both in and outside medicine and within the US and worldwide. For example, maternal mortality continues at unacceptably high rates in the US and in many low- and middle-income countries; national immigration policies that affect the health of adults have spillover effects on children’s health; US Medicaid and other nations’ policies on access to care for children affects long-term educational and employment outcomes into adulthood; policies on LGBTQ rights have implications for mental health and medical and surgical care; and firearm regulations affect outcomes in the medical, surgical, and mental health arenas across populations. The economy, always a priority for voters, has effects on mental health as well as the ability to afford health care and meet other essential needs like education, housing, sanitation, food, and water that are social drivers of health. Moreover, stagnated investments in health, health care, and health care systems worldwide portend a failure to meet health-related Sustainable Development Goals.

Across this range of disciplines, populations, and health outcomes are policies that contribute to or mitigate pervasive health disparities.

JAMA and the 10 participating JAMA Network journals, including JAMA Internal Medicine, are issuing this Call for Papers to solicit rigorous empirical research on election-year health and health care issues and policies across the populations and medical specialties represented by the journals. Of greatest interest are studies of health outcomes and policies that will influence debates, news stories, candidate platforms, and public discourse in the run-up to the election, as well as important topics overlooked by the campaigns. A goal is to provide actionable evidence for candidates, voters, policymakers, and US and international influencers and to identify effective and ineffective solutions to health-related problems. Just as we ask candidates to propose solutions rather than merely criticizing the status quo, we hope to receive reports of studies that test and evaluate existing or proposed strategies and interventions rather than simply describing existing problems that need to be solved. We expect authors to apply scientific objectivity and rigor to their manuscript submissions, taking into account methodologic standards for strong empirical studies. We also invite scholarly Viewpoints that address election-year related topics of public and global health, research, discovery, prevention, ethics, health policy, or health law.

Manuscripts submitted to participating JAMA Network journals will undergo the journal’s usual peer review process and will be accepted and published on a rolling basis. Research manuscripts may be accepted from now until June 1, 2024, to allow time for consideration for publication before the election in November 2024. Authors should consult the Instructions for Authors for guidelines on manuscript preparation and submission and should indicate in the submission cover letter that the manuscript should be considered under the “Health and the 2024 US Election” theme. Published articles will be amplified with invited opinion from influential thought leaders as well as audio discussions. After publication, all articles and related content will be disseminated widely in the months and weeks prior to November 2024 via the JAMA Network’s news and social media outreach to make findings more readily available to candidates, voters, policymakers, and readers throughout the world.

Rigorous solution-oriented evidence is vital to inform the development of effective health care and public health policies. Effective communication of this evidence is also critical for countering misinformation. The COVID-19 pandemic dem-
onstrated that how science is communicated has pivotal implications for policy, public opinion, and trust in health care. Medical journals have a duty to uphold scientific standards and effectively convey evidence to clinicians, policymakers, and the public. The JAMA Network is committed to this responsibility to provide evidence to inform the positions of candidates across the political spectrum and make this evidence salient for US voters and international influencers so they can press candidates for effective solutions and make informed decisions associated with this election.

**REFERENCES**
