We are delighted to welcome you to the first issue of BMJ Sexual & Reproductive Health (BMJ SRH), the successor to the Journal of Family Planning and Reproductive Healthcare. As well as being a snappier and, we hope, easier to remember name, our new title reflects our intention to develop as an inclusive and scholarly voice for sexual health and wellbeing worldwide. The new name also reflects a change to shared ownership of the journal by two leading organisations: the Faculty of Sexual & Reproductive Healthcare of the Royal College of Obstetricians and Gynaecologists (FSRH) and BMJ Publishing.

BMJ SRH has grown from strong roots in UK sexual and reproductive health, a multiprofessional community with a tradition of delivering sexual healthcare in community-based, patient-centred ways that respect social context and complexity. The FSRH, its leading training organisation, is a clear, scientifically-informed voice in an often-politicised area of healthcare, publishing evidence-based guidelines and high-quality, practice-shaping information. We are proud of this heritage. Our new co-ownership with BMJ Publishing, with its worldwide reputation for rigorous, accessible content that changes practice and influences debate on health, signals our commitment to both scientific excellence and international reach.

What will change? Behind the new name and business model, we have been reshaping both our editorial team and the journal’s content. We hope that readers will notice more commissioned articles on important clinical and political topics, and more practice-focused evidence in guidelines and in other condensed forms. We are also working to increase the international relevance of our articles, both in selection and presentation, and in particular to encourage broader European representation in our international authorship.

To help us achieve this objective, we are appointing inspirational international members both to our Editorial Board – the dedicated group of experts who work hard issue by issue to help us deliver high-quality content – and to our Editorial Advisory Board – the group of internationally-recognised experts who are available to provide us with a wider and wise perspective on our content. We also welcome our new social media editor, who is already working to rejuvenate our blog and revitalise our social media presence, and in the near future we will appoint a patient editor.

In terms of the journal’s tone and flavour, we hope that you will notice, in addition to empirical data to inform practice, our interest in reflective writing to help shape our thinking. Examples include articles that consider the practitioner as an essential element in the healthcare encounter, or which acknowledge the subjective and relational as well as the objective and technical factors that contribute to efficacy. We hope, too, that our commitment to including patient perspectives will become increasingly visible – an example is in this issue.

We continue to welcome all rigorous and thought-provoking submissions on sexual health in all its contexts: biological, psychological, social, ethical and political. We hope that many of you will write for us, or respond to what others have written. Above all, we hope you will enjoy the new journal.

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Vulnerable groups often take the burden of STIs and have the worse sexual health outcomes. The 13th Annual conference of the societies (BASHH and FSRH) brings together experts to explore challenges and clinical issues for all of our patients.

www.fsrh.org/fsrh-bashh2018

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1 Kasliwal A, Hatfield J. Conscientious objection in sexual and reproductive health - a guideline that respects diverse views but emphasises patients’ rights. J Fam Plann Reprod Health Care 2018;44:5–6.