

NCCL History

National Conference of Constituency Leaders

The NCCL was first convened in August 1990 as the National Conference of Women, Minority, and New Physicians (NCWMNP). The conference was conceived in late 1989 as a means of enhancing the 1990s as a "Decade of Transition," during which the AAFP will strive to more effectively integrate the perspectives and concerns of Academy members from these important constituencies, to the benefit of an increasingly diverse membership and patient population. The initial objectives of the NCCL were outlined as follows:

- To provide an opportunity for Women, Minority, New Physicians, International Medical Graduates (IMG) and other emerging constituencies to become more familiar with AAFP programs, exchange information, share experiences and develop basic leadership skills, and to encourage participation in the AAFP governance structure at both the local and national levels.
- 2. To provide an opportunity for these groups to identify issues of particular concern to family physicians and to make specific recommendations to the AAFP's Board of Directors and Congress of Delegates.
- 3. To provide a forum whereby the Board of Directors may be better informed as to the concerns of the constituency groups and discuss with them priorities for AAFP activities.

In 1993, the AAFP Congress of Delegates approved a Bylaws amendment which seated two Delegates and two Alternate Delegates each from the constituencies of Women, Minority, and New Physicians. Designees for the Delegate and Alternate Delegate positions had been elected by the 1993 NCSC, pending action of the Congress of Delegates on the Bylaws change.

As of the 1994 NCSC, an additional objective was:

4. To allow each constituency group with the exception of International Medical Graduates (IMG), to elect two Alternate Delegates, who would serve one year in that capacity before succeeding to the position of Delegate in the following Congress of Delegates.

As of the 1995 NCSC, an additional objective was:

5. To allow all New Physicians present (no matter which constituency they are in attendance to represent) to elect a Delegate and Alternate Delegate to the AMA's Young Physicians Section (AMA-YPS).

As of the 2000 NCSC, an additional objective was:

6. To allow International Medical Graduates (IMG) equal representation with a forum at the NCSC.

As of the 2001 NCSC, an additional objective was:

7. To allow Gay, Lesbian, Bisexual and Transgender (GLBT) equal representation with a forum at the NCSC. To allow International Medical Graduates (IMG) to elect Alternate Delegates who would serve one year in that capacity before succeeding to the position of Delegate in the following Congress of Delegates.

As of the 2002 NCSC, an additional objective was:

8. To allow election of the New Physician Board Candidate at the NCSC.

As of the 2005 NCSC, and at the 2005 NCSC only, an additional objective was:

9. To allow six Delegates and six Alternate Delegates to be elected and seated at the Congress of Delegates as Special Constituency seats.

As of the 2006 NCSC, an additional objective was:

10. To allow six Alternate Delegates to be elected and seated at the Congress of Delegates as Special Constituency seats, who would serve one year in that capacity before succeeding to the position of Delegate in the following Congress of Delegates.

As of the 2008 NCSC, Objective No. 5 was amended based on action by the AMA:

11. To allow all New Physicians present (no matter which constituency they are in attendance to represent) to elect two Delegates to the AMA's Young Physicians Section (AMA-YPS).

As of the 2012 NCSC, an additional objective was:

12. To allow Chapter Delegates from each of the five constituencies to elect an NCSC Convener to serve at the following year's NCSC.

As of 2015:

- 13. The meeting name is changed to the National Conference of Constituency Leaders (NCCL).
- 14. The Special Constituency seats at the Congress of Delegates are changed to Member Constituency seats.

As of 2016:

15. The Gay, Lesbian, Bisexual, and Transgender (GLBT) member constituency was renamed the Lesbian, Gay, Bisexual, and Transgender (LGBT) member constituency.

Member Constituencies Representation in AAFP Leadership:

2009 – Out of 225 Delegates and Alternate Delegates at the 2009 Congress of Delegates, 71 (44 female, 27 male) had participated in NCSC (31.6%). Out of 204 AAFP commission members, 58 had participated in NCSC (28%).

2012 – Out of 228 Delegates and Alternate Delegates at the 2012 Congress of Delegates, 42 (23 female, 19 male) had participated in NCSC (18.4%). Out of 87 AAFP commission members, 40 had participated in NCSC (46%). Out of 419 identified chapter leaders, 103 had participated in NCSC (25%). Of the AAFP Board members (102 in total), dating back to 1999, 14 (13.7%) had participated in NCSC.

2014 – Out of 223 Delegates and Alternate Delegates, 82 (49 female, 32 male, 1 unknown) had participated in NCSC (36.8%). Out of 101 AAFP commission members, 50 had participated in NCSC (50%). Out of 412 identified chapter leaders, 98 had participated in NCSC (23.8%). Of the AAFP Board members (109 in total), dating back to 1999, 16 (14.7%) had participated in NCSC.

2015 – Out of 229 Delegates and Alternate Delegates, 59 (34 female, 25 male) had participated in NCSC (25.8%). Out of 123 AAFP commission members, 37 had participated in NCSC (30.1%). Out of 477 identified chapter leaders, 94 had participated in NCSC (19.7%). Of the AAFP Board members (111 in total), dating back to 1999, 18 (16.2%) had participated in NCSC/NCCL.

2016 – Out of 229 Delegates and Alternate Delegates, 61 (38 female, 23 male) had participated in NCCL (26.6%). Out of 139 AAFP commission members, 46 had participated in NCCL (33.1%). Out of 418 identified

chapter leaders, 103 had participated in NCCL (24.6%). Of the AAFP Board members (112 in total), dating back to 1999, 35 (31.3%) had participated in NCCL.

*Our knowledge of the number of identified chapter leaders in our membership database was higher in 2015 than in previous years. Chapters report this data to the AAFP annually.