

## Summary of Actions: 2024 National Congress of Student Members

### 2024 Resolutions

<b>Res. No.</b>	<b>Title and Resolved</b>	<b>Action of NCSM</b>	<b>Recommended Referrals</b>	<b>Final Actions</b>
<b>S101</b>	<b>Spanish Language Learning for Medical Students</b> <b>Substitute:</b> <i>RESOLVED, That the American Academy of Family Physicians support a model for medical students to learn medical Spanish by investigating the utility and efficacy of an online, self-guided opportunity.</i>	Substitute Adopted	Executive Vice President	Accept for information  The AAFP does not provide language education or training and is not in a position to review or recommend a particular set of training for medical students to consider. The AAFP does not have evidence to support that an online, self-guided opportunity to learn Spanish would improve patient outcomes. AAFP current policy supports the CLAS standards which recommend use of trained medical interpreters in clinical settings. To that end, the AAFP would recommend all clinicians and students use trained medical interpreters when caring for a patient who identifies Spanish as their primary language of choice.
<b>S102</b>	<b>Adopting SAMHSA and the American Academy of Pediatrics Policy on Adolescent Substance Use Treatment</b> <b>Substitute:</b> <i>RESOLVED, That the American Academy of Family Physicians consider including in the policy on Substance Use Disorder a section on Adolescent Substance Use based on the Substance Abuse and Mental Health Services Administration and the American Academy of Pediatrics current policy on adolescent substance use treatment in a primary care setting.</i>	Substitute Adopted	Commission on Health of the Public and Science	Accept for implementation  The AAFP's Substance Use Disorders policy statement is in the process of being updated and will include a section on adolescent substance use treatment.
<b>S103</b>	<b>Direct Primary Care</b> <i>RESOLVED, That the American Academy of Family Physicians work with legislators and relevant stakeholders to support legislation that enhances access to Direct</i>	Reaffirmed as current policy	N/A	N/A

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	<p><i>Primary Care (DPC) for vulnerable populations, and be it further</i></p> <p><i>RESOLVED, That the American Academy of Family Physicians support the Medicaid Primary Care Enhancement Act (H.R. 3836) and Primary Care Enhancement Act (H.R. 3029, S. 628).</i></p>			
<b>S104</b>	<p><b>Regulation of False and Misleading Prescription Drug Advertising</b></p> <p><i>RESOLVED, That the American Academy of Family Physicians advocate for the scope of the Food and Drug Administration regulation of prescription drug advertising to now include all entities interested in promoting prescription drugs.</i></p>	Not Adopted	N/A	N/A
<b>S105</b>	<p><b>Addressing Increased Cardiovascular Risk in Individuals with South Asian Ancestry</b></p> <p><i>RESOLVED, That the American Academy of Family Physicians develop patient-facing educational materials and guidelines about the elevated risk of heart disease in individuals with South Asian ancestry, and be it further</i></p> <p><i>RESOLVED, That the American Academy of Family Physicians develop in-person and free virtual continuing medical education materials to educate physicians on the disparities of heart disease in individuals with South Asian ancestry, and be it further</i></p> <p><i>RESOLVED, That the American Academy of Family Physicians further support research and community initiatives to help reduce this health disparity in the South Asian community, and be it further</i></p> <p><i>RESOLVED, That the American Academy of Family Physicians support increased efforts in the disaggregation of racial and ethnic data in health outcomes data collection and reporting for South Asian communities.</i></p>	Adopted	<p>1<sup>st</sup>, 3<sup>rd</sup>, and 4<sup>th</sup> Resolved Clauses – Commission on Health of the Public and Science</p> <p>2<sup>nd</sup> Resolved Clause – Commission on Continuing Professional Development</p>	<p>1<sup>st</sup> Resolved Clause – Accept for information</p> <p>Language in the 1<sup>st</sup> Resolved Clause was broad and open to interpretation.</p> <p>3<sup>rd</sup>, and 4<sup>th</sup> Resolved Clauses – Accept as current policy</p> <p>Although the AAFP has no resources specifically focused on individuals with South Asian ancestry, it actively prioritizes reducing health disparities for historically marginalized and under-resourced communities, which implicitly includes South Asian communities as part of broader health equity efforts. The AAFP has existing policy supporting the collection and reporting of data based on race, ethnicity, sexual orientation, and gender identity. This includes comprehensive indicators of race and ethnicity, beyond the five broad racial groups and two ethnicities (Hispanic/Not Hispanic) to</p>



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				<p>capture information on groups that may be disproportionately affected by their socioeconomic status, health, and other disparities. The AAFP also supports collecting data on race and ethnicity that includes specific ethnic groups within each race based upon broader similarities such as country/continent of origin, language, and religious background.</p> <p>2<sup>nd</sup> Resolved Clause – Accept for information</p> <p>While the Commission on Continuing Professional Development (COC PD) agreed with the value of such education and that more can be done to address social determinants of health (SDOH) in particular to certain population groups, the stipulations that such education be in-person and free would constrain the AAFP's decision-making abilities in how to best reach a wide audience while considering the organization's priorities.</p> <p>COC PD would hope that the AAFP consider education on this topic, among other SDOH educational materials, will be analyzed and considered in future education as they see best fit to develop.</p>
<b>S106</b>	<b>Addition of Voter Registration Reminder to AAFP Registration for New Members and Current Members Transitioning to Residency or Active Physician</b>	Adopted	EVP	<p>Accept as current policy</p> <p>The AAFP currently partners with Vot-ER,</p>

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	<p><i>RESOLVED, That the American Academy of Family Physicians will utilize already existing nonpartisan voter registration resources in communications to direct new and/or transitioning members to register to vote or to update their voter registration, and be it further</i></p> <p><i>RESOLVED, That the American Academy of Family Physicians will include a link to update or register to vote in the annual communication to new residents.</i></p>			<p>which elevates the connections between voting and health. <b>Vot-ER</b> has built out a campaign around voter education and awareness, with the goal of driving more physicians toward greater civic engagement and creating opportunities for clinicians to be a conduit to patients who are interested in civic engagement. The AAFP, along with the AMA and several other organizations in the house of medicine, have partnered with <b>Vot-ER</b>.</p> <p><b>Vot-ER</b> has created resources to help promote voter education and registration efforts. These resources have been shared with members and chapters.</p>
<b>S107</b>	<p><b>The AAFP Supports the Individual Choice of Patients to Seek Gender Affirming Care</b> <u><b>Substitute:</b></u> <i>RESOLVED, That the American Academy of Family Physicians stands with the LGBTQIA+ community and affirms individual choice to pursue gender affirming care without interference from government bodies, and be it further</i></p> <p><i>RESOLVED, That the American Academy of Family Physicians maintains that providers who do not feel comfortable providing gender affirming care have an ethical responsibility to refer patients seeking gender affirming treatment to another provider, in order to receive adequate and equitable care, and be it further</i></p> <p><i>RESOLVED That the American Academy of Family Physicians continues to support access to gender affirming care as a patient right, and be it further</i></p>	Substitute Adopted	<p>1<sup>st</sup>, 2<sup>nd</sup>, and 4<sup>th</sup> Resolved Clauses – Reaffirmed as current policy</p> <p>3<sup>rd</sup> Resolved Clause – Commission on Health of the Public and Science</p>	<p>1<sup>st</sup>, 2<sup>nd</sup>, and 4<sup>th</sup> Resolved Clauses – N/A</p> <p>3<sup>rd</sup> Resolved Clause – Accept as current policy</p> <p>The AAFP has existing policy, <b>Care for the Transgender and Gender Nonbinary Patient</b>, that acknowledges that gender-affirming health care is part of comprehensive primary care. It also supports gender-affirming care as an evidence-informed intervention that can promote health equity for gender-diverse individuals. The policy was revised in 2024 to support an informed consent model rather than a diagnostic model as the preferred approach to</p>

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	<i>RESOLVED, That the American Academy of Family Physicians stands against gender discrimination in seeking quality health care.</i>			providing gender-affirming health care.
<b>S201</b>	<b>Social Media Use and Adult Mental Health</b> <i>RESOLVED, That the American Academy of Family Physicians update its curriculum guideline for family medicine residents titled, "Human Behavior and Mental Health," to recommend that family medicine residents are able to identify and assess risks and benefits of patients' social media use and the impact on adult mental health outcomes.</i>	Not Adopted	N/A	N/A
<b>S202</b>	<b>Supporting Pathways For Reproductive Healthcare Education</b> <i>RESOLVED, That American Academy of Family Physicians policy entitled "Reproductive Decisions, Training In" be amended by addition of the following clause: "The American Academy of Family Physicians supports pathways for medical students and family medicine residents to receive clinical training in medication and procedural abortions at other locations when access to abortion is restricted or illegal in a home institution," and be it further</i>  <i>RESOLVED, That the American Academy of Family Physicians make publicly available resources for medical trainees seeking clinical exposure to abortion provision in other states.</i>	Adopted	Commission on Education	Accept for implementation  The AAFP Policy "Reproductive Decisions, Training in" will be revised to include the language from the resolution.  The AAFP will provide links to organizations who maintain the lists of available training such as Training Early Abortion for Comprehensive Healthcare (TEACH), Reproductive Health Access Project, and the Midwest Access Project.
<b>S203</b>	<b>Increasing Accessibility to Diabetes Vision Screenings in Primary Care</b> <u>Substitute:</u> <i>RESOLVED, That the American Academy of Family Physicians support initiatives to reduce barriers to diabetes vision screening access.</i>	Substitute Adopted	Commission on Health of the Public and Science	Accept as current policy  The AAFP has a dedicated comprehensive clinical guidance page on diabetes care and management. The AAFP also supports the Guiding Principles for the Care of People With or at Risk for Diabetes from the National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK), which includes specific recommendations for preventing or slowing the progression of



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				<p>diabetic retinopathy, including regular vision screening. The AAFP continues to promote measure harmonization across programs and payers, including diabetes-specific measures like primary care eye exams as a core part of comprehensive diabetes care.</p> <p>Diabetic retinopathy and the importance of regular vision screening for patients with diabetes is regularly addressed in available AAFP CME courses. Advances in the use of artificial intelligence (AI) to analyze retinal images to support primary care practices providing diabetic retinopathy screenings have also been published in AAFP journals and discussed in continuing medical education activities. These technologies would significantly decrease barriers as screening with patients no longer having to be referred out to a subspecialty office for additional screening.</p>
<b>S204</b>	<b>Medicare Advantage: Risky for Family Physicians and All Seniors</b> <b>Substitute:</b> <i>RESOLVED, That the American Academy of Family Physicians implement an educational program to explain Medicare Advantage versus traditional Medicare.</i>	Substitute Adopted	Commission on Quality & Practice	<p>Accept as current policy</p> <p>After further review and research, the Commission on Quality and Practice believed the resolution is adequately addressed with the current resources.</p>
<b>S205</b>	<b>Expanding SNAP Eligibility to Medical Students</b> <b>Substitute:</b> <i>RESOLVED, That the American Academy of Family Physicians actively petition the United States Department of Agriculture Food and Nutrition Service to expand</i>	Substitute Adopted	Commission on Federal and State Policy	<p>Accept for information</p> <p>The Commission on Federal and State Policy reviewed relevant AAFP policy and advocacy efforts, noting that the</p>

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	<i>Supplemental Nutrition Assistance Program eligibility criteria to include medical students.</i>			AAFP does not have policy that supports advocating to the United States Department of Agriculture for eligibility changes to the Supplemental Nutrition Assistance Program (SNAP). However, the AAFP does currently support legislation that would notify college students who are eligible to participate in SNAP of their potential eligibility with the intention of closing the gap between those who are able to participate in the program and those who receive benefits. Given the lack of policy to implement the resolution as written and that current advocacy efforts may potentially address the resolution's original intent, the resolution was accepted for information.
<b>S206</b>	<b>Family Doctors Walking the Walk: Removing Ultra-Processed Products from Academy Events</b> <b>Substitute:</b> <i>RESOLVED, That the American Academy of Family Physicians (AAFP) remove ultra-processed foods and beverages (classified as a 4 on the NOVA scale) from AAFP-provided foods for conferences.</i>	Not Adopted	N/A	N/A
<b>S207</b>	<b>Standardized Placement of AED Devices in Public Spaces</b> <b>Substitute:</b> <i>RESOLVED, That the American Academy of Family Physicians support the implementation of standardized placement guidelines for Automated External Defibrillators (AEDs) in all public buildings and spaces to ensure consistent and rapid access during emergencies, and be it further</i>  <i>RESOLVED, That the American Academy of Family Physicians collaborate with interested parties to develop and promote</i>	Substitute Adopted	Commission on Health of the Public and Science	Accept for information  While some AAFP policies and resources reference the necessity of access to AEDs in various public spaces, the AAFP does not currently have a standalone policy on the standardized placement of AEDs in public spaces. The AAFP policy on Athletic Trainers for High School Athletes encourages schools to



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	<i>policies and systems to optimize the accessibility and usage of Automated External Defibrillators (AEDs).</i>			<p>provide an interscholastic sports program that enhances the well-being of student athletes, including readily accessible AEDs to all athletic venues. The 2024 update to the Opioid Use and Misuse position paper advocates for the co-location of naloxone where AEDs are also required. This paper is currently in process and will be published in 2025.</p> <p>The Commission on Health of the Public and Science noted a lack of actionable direction in the resolution, particularly regarding the phrase “implementation of standardized placement guidelines” as no standardized placement guidelines exist for public spaces, with exception of Federal guidelines tailored specifically to Federal facilities. The second resolved clause is similarly unclear about with whom the AAFP should partner, making it difficult to implement effectively.</p>
<b>S301</b>	<b>Advocacy for Medicare Expansion Nationwide</b> <i>RESOLVED, That the American Academy of Family Physicians will increase advocacy efforts at the national level, including lobbying efforts and letters to legislators in the affected states, to increase awareness of the ramifications of not expanding Medicaid nationwide.</i>	Reaffirmed as current policy	N/A	N/A
<b>S302</b>	<b>Expanding Family Medicine Exposure to Pre-Medical Students</b> <i>RESOLVED, That the American Academy of Family Physicians advocate for the expansion of the role of the Family Medicine Interest Group Network to include hosting an annual event to expose</i>	Not Adopted	N/A	N/A



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	<i>pre-medical undergraduate students early to the field of family medicine.</i>			
<b>S303</b>	<b>Supporting Rural Training for IMG</b> <b>Substitute:</b> <i>RESOLVED, That the American Academy of Family Physicians develop policy supporting access to federal and state loan forgiveness programs for foreign citizens, including broadening eligibility criteria for the National Health Service Corps loan forgiveness programs.</i>	Substitute Adopted	Commission on Federal and State Policy	Accept for information  The Commission on Federal and State Policy discussed how this resolution may benefit individuals who grew up in the United States but are not documented and wish to pursue careers in the medical field. It was noted that the resolution extends beyond International Medical Graduates (IMGs) to the general population of foreign citizens in the United States. Due to the breadth of the resolution, additional study would be required to understand the potential large-scale impact it would have and to guide the AAFP on important factors should new policy be created.
<b>S304</b>	<b>Combating the Health Risks Associated with Loneliness and Social Isolation</b> <b>Substitute:</b> <i>RESOLVED, That the American Academy of Family Physicians equip family physicians with further training options to address negative health impacts stemming from social isolation especially among vulnerable older adults, immigrants, lesbian, gay, bisexual, and transgender populations, minorities, and victims of elder abuse.</i>	Substitute Adopted	Commission on Health of the Public & Science	Accept for implementation  The Commission on Health of the Public & Science plans to implement the resolution by developing a position paper on this topic.
<b>S305</b>	<b>Reducing Barriers for First-Generation Medical Students</b> <i>RESOLVED, That the American Academy of Family Physicians recognize that the barriers to becoming a successful family physician do not end after matriculating to medical school, and are continuously evolving throughout medical school requiring continued support, and be it further</i>  <i>RESOLVED, That the American Academy of Family Physicians actively encourage</i>	Not Adopted	N/A	N/A

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	<p><i>family physicians to be involved with and mentor first-generation medical students throughout their time in medical school, and be it further</i></p> <p><i>RESOLVED, That the American Academy of Family Physicians study the barriers to success first-generation medical students face in their medical education and in applying to family medicine residencies.</i></p>			
<b>S306</b>	<p><b>Protecting Americans from Pesticides Substitute:</b></p> <p><i>RESOLVED, That the American Academy of Family Physicians develop and publish resources for family physicians to provide to patients for education, prevention and mitigation of pesticide exposure.</i></p>	Substitute Adopted	Commission on Health of the Public and Science	<p>Accept for implementation</p> <p>The AAFP will create patient education around this topic.</p>