



2023 Agenda for the Reference Committee on Health of the Public & Science

National Conference of Constituency Leaders

<u>Item No.</u>	<u>Resolution Title</u>
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3. Resolution No. 3003	The Role of Family Physicians in Responding to Mental Health Crisis
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RESOLUTION NO. 3001

Requiring Nasal Naloxone in All In-Flight Emergency Medical Kits

Introduced by: Emily Baumert, MD, General Registrant
Grant Studebaker, MD, IMG
Justin Turner, MD, New Physician
Nicole Landry Moreno, MD, New Physician
Alex Wade, MD, New Physician
Nicholas LeFevre, MD, New Physician
Benjamin Ihms, DO, New Physician
Tabatha Davis, MD, New Physician

WHEREAS, The opioid and polysubstance overdose rates have continued to climb in the United States of America, and

WHEREAS, nasal naloxone is a safe and effective treatment for reversal of opioid overdose and is now available over-the-counter, and

WHEREAS, nasal naloxone is already part of the emergency medical kits of public spaces such as prisons, schools, and community-based programs, and

WHEREAS, nasal naloxone is not currently included in the list of Federal Aviation Administration (FAA) required medications for in-flight emergency medical kits, and

WHEREAS, not all airline companies are currently carrying nasal naloxone in in-flight emergency medical kits, and

WHEREAS, Section 307 public law 115-254, the FAA Reauthorization Act of 2018, mandated a review of the contents of emergency medical kits on airplanes within 1 year, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians write a letter to the Federal Aviation Administration advocating for the inclusion of nasal naloxone as a required medication in all in-flight emergency medical kits.

RESOLUTION NO. 3002

Racism Is a Social Determinant of Health

Introduced by: Octavia Amaechi, MD, Minority
Kento Sonoda, MD, IMG
Sarah Gerrish, MD, Minority
L. Latey Bradford, MD, PHD, New Physician
Chrystal Pristell, DO, General Registrant

WHEREAS, Racism is a socio-political construct and used incorrectly as a proxy for biology and ancestry and country of origin, and

WHEREAS, race is often pathologized ignoring the impact of racism and bias on the overall wellbeing of individual and communities, and

WHEREAS, racism continues to make race relevant across societal sectors, including in healthcare where disparities perpetuate morbidity and mortality of minoritized individuals and communities, and

WHEREAS, all forms of racism, including structural racism, negatively impact the wellbeing and progress of individuals and communities, and

WHEREAS, social determinants of health, including racism, have a larger role in the overall wellbeing of individuals and communities than the totality of interventions within the structure of healthcare, and

WHEREAS, The Center for Disease Control and Prevention includes racism as one of the forces or systems that contributes to social determinants of health, and

WHEREAS, controlling for other social determinants of health, racism and bias across societal sectors contribute to increased morbidity and mortality of black individuals and communities, and

WHEREAS, endeavors to address social determinants of health may ignore the history and current influence of racism and bias and their potential to negatively impact the wellbeing of communities, and

WHEREAS, current American Academy of Family Physicians (AAFP) policies, educational materials and discussions on social determinants of health, health equity and implicit bias often do not include racism as a cause and driver of health and social inequities, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians (AAFP) endeavor to specifically name racism in policies, educational material and discussions as a historical and current day cause and driver of social determinants of health, and be it further

RESOLVED, The American Academy of Family Physicians (AAFP) endeavor to include anti-racist material and training in policies, educational material and discussions of social determinants of health, health equity and implicit bias.

RESOLUTION NO. 3003

The Role of Family Physicians in Responding to Mental Health Crisis

Introduced by: Andrea Haynes, MD, New Physician
 Aisha Harris, MD, New Physician
 Prachi Priyam, MD, MPH, New Physician
 Jiana Menendez, MD, MPH, New Physician
 Macy McNair, MD, New Physician

WHEREAS, The American Academy of Family Physicians recognizes the current ongoing mental health crisis, which includes people with a serious mental illness being arrested approximately two million times each year as well as the disproportionate impact of police violence on BIPOC individuals with mental illness, and

WHEREAS, the percentage of unmet mental health needs continues to trend up and family physicians are often the first-line providers of mental health care, and

WHEREAS, meeting people's material needs, de-escalation, and building community safety empowers communities and individuals in times of need, and

WHEREAS, experiences of coerced care, criminalization due to psychiatric illness, and threatened incarceration deter people from seeking medical and psychiatric care and also damage therapeutic relationships, and

WHEREAS, multiple cities and counties have successfully implemented mental health crisis intervention programs that have reduced criminalization of and violence against people experiencing a crisis, including the STAR program in Denver and the A3 Miles Hall Crisis Call Center in Contra Costa County, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians create a policy statement and advocate for community-led mental health crisis intervention teams, that include family physicians, in place of police-led responses, and be it further

RESOLVED, That the American Academy of Family Physicians create continuing medical education content that introduces family physicians to the skills required to support and protect patients experiencing mental health crisis, which includes training in verbal de-escalation skills and learning how to prioritize patient physical safety, and be it further

RESOLVED, That the American Academy of Family Physicians develop a mental health crisis intervention team toolkit for family physicians to initiate and create multidisciplinary mental health crisis behavioral health teams in their communities and in practice settings.

RESOLUTION NO. 3004

The Lacking Evidence of Parental Alienation as a Diagnosis and Adverse and Fatal Outcomes for Families

Introduced by: Sharon Carswell, MD, Women
Natalie Kong, MD, Women

WHEREAS, Diagnostic and Statistical Manual of Mental Disorders (DSM) has never included parental alienation as a diagnosis due to the lack of evidence-based science to support the theory, and

WHEREAS, with erroneous parental alienation claims by an abusive parent, custody is awarded to the abusive parent 50% of the time, and

WHEREAS, V995.51 "Child psychological abuse" should not be used for claims of parental alienation syndrome, parental alienation (without the syndrome) or resist-refuse dynamics due to the lacking science, and

WHEREAS, parental alienation is directed against the female parent creating gender disparity and resulting in fewer legal recourses, and

WHEREAS, family physicians are often caught up in family violence cases and are ill-equipped or lacking foundational knowledge about the issue which can place the victims and children in harmful situations leading to adverse childhood events and child murders, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians issue a position paper on the issue of parental alienation by any name being junk science and deleterious, as well as provide more resources on how to support families amidst custody litigation and/or family violence.

RESOLUTION NO. 3005

Expanding Obesity Medicine Education

Introduced by: Natalie Trujillo-Aguirre, MD, Minority
 Naseem LaBue, MD, Minority
 Bharat Joshi, MD, Minority
 Cynthia Chen-Joea , DO, MPH, Women
 Po-Yin Samuel Huang, MD, Minority
 Bernard Richard, MD, LGBTQ+
 Jessica Garcia, DO, Minority

WHEREAS, The American Academy of Family Physicians (AAFP) has existing policy to promote screening of patients with obesity and clinical guidance for practicing physicians, and

WHEREAS, a large number of patients continue to face obesity, which disproportionately affects those of minority populations as shown by 2021 data from the Centers for Disease Control and Prevention in which obesity rates were higher in Blacks (non-Hispanics) at 49.9%, Hispanics at 45.6% and with a higher prevalence in rural areas, and

WHEREAS, food insecure adults had 32% increased odds of being obese compared to food secure adults, increasing the overall negative health consequences such as hypertension, stroke, diabetes, cancer and premature death, now therefore, be it

RESOLVED, that the American Academy of Family Physicians advocate for inclusion and awareness of obesity as a chronic condition in medical education as well as addressing weight bias and stigma impacting health, and be it further

RESOLVED, That the American Academy of Family Physicians establish partnerships with interested entities to create preventive pantries to meet the food insecurity needs faced by patients dealing with chronic conditions stemming from obesity, and be it further

RESOLVED, That the American Academy of Family Physicians create programs that promote cultural sensitivity in treating patients with obesity facing racial and ethnic disparities.

RESOLUTION NO. 3006

Expanding Medicaid Coverage to Include Diapers

Introduced by: Andrea Haynes, MD, New Physician
 Macy McNair, MD, New Physician

WHEREAS, The Women, Infants, and Children (WIC) supplemental food provides nutrition to pregnant persons and their infants and children up to five years of age, and

WHEREAS, some states have expanded Medicaid coverage postpartum 12 months to provide continued medical access and insurance, and

WHEREAS, according to National Diaper Bank, one in three families struggle with diaper needs, and

WHEREAS, most childcare centers require parents to provide a day's supply of diapers; without adequate diaper supply, parents are not able to have childcare, and

WHEREAS, one in three mothers in the United States (36%) report cutting back on basic essential needs like food, utilities, and childcare in order to afford diapers for their children, and

WHEREAS, diapers cannot be obtained through government assisted programs, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians recognize diapers as a basic childcare need, and be it further

RESOLVED, That the American Academy of Family Physicians actively advocate and lobby for Medicaid coverage to cover the cost of diapers, and be it further

RESOLVED, that the American Academy of Family Physicians collaborate and support community-based organizations and diaper assistance programs to close the diaper need gap.

RESOLUTION NO. 3007

Promoting Awareness and Training on Disabilities in Family Medicine

Introduced by: Frank Animikwam, MD, Minority
Cybill Oragwu, MD, New Physician
Robi Mitchell, MD, Minority
Stacy Jefferson, MD, Minority
Carmen Echols, MD, Minority
Denise Octaviani, DO, Minority

WHEREAS, One in five Americans has a disability, and

WHEREAS, this includes non-apparent disabilities, such as mental health disabilities, and

WHEREAS, the American Disabilities Act (ADA) requires states to institute Statewide Independent Living Councils (SILC), which are state governor appointed boards, that promote and advocate for people with disabilities in said state, and

WHEREAS, the SILC collaborate with Centers for Independent Living (CIL) which provide direct services to people with disabilities and their families, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians acknowledge and encourage chapters to explore partnerships with Statewide Independent Living Councils, and be it further

RESOLVED, That the American Academy of Family Physicians create a toolkit on incorporating best care practices for those with disabilities, utilizing the expertise from those from the disability community, into standards of care for all family medicine physicians.

RESOLUTION NO. 3008

Family Planning in the Neighborhood Navigator-Navigating Against Disinformation

Introduced by: Hannah Rosenfield, MD, Women
Chelsea Faso, MD, Women

WHEREAS, Peer research institutes and medical organizations, crisis pregnancy centers (CPC) are “organizations that provide counseling and other prenatal services from an anti-abortion perspective”, and

WHEREAS, 92% of CPCs have no medical professionals on staff, 87% provide false and misleading medical information, 76% do not disclose that they are not medical facilities, 48% advise women seeking family planning services that are not common methods of birth control, 30-46% incorrectly claimed abortion was linked to infertility, and 26% incorrectly told patients that abortion leads to breast cancer, and

WHEREAS, research has shown CPCs directly target and intercept young, low health literacy, and low income patients in their locations and advertisements for free services using state and federal funds, and

WHEREAS, the EveryONE Project aims to advance health equity in every community, with the Neighborhood Navigator tool to identify patients’ social needs in order to improve social determinants of health through evidence based practices, and

WHEREAS, the *American Medical Academy Journal of Ethics*, American Academy of Obstetricians and Gynecologists, American Public Health Association, Society for Adolescent Health and Medicine, the North American Society for Pediatric and Adolescent Gynecology all have issued statements and policies citing the unethical and dangerous barriers to care CPCs produce, and

WHEREAS, the American Academy of Family Physicians (AAFP) urge federal, state, and local governments to support only the programs that provide medically accurate information to women facing unintended pregnancies and to enforce existing consumer protection, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians remove and prevent the addition of all crisis pregnancy centers from the Neighborhood Navigator search tool, and be it further

RESOLVED, That the American Academy of Family Physicians add the category of abortion to the topics under “Medical Care”, which can link to existing vetted databases including abortionfinder.org, inedana.org, and plancpills.org.