



2025 Agenda for the Reference Committee on Organization and Finance

National Conference of Constituency Leaders

Item No.

1. Resolution No. 4001: Expanding American Academy of Family Physicians Membership Benefits and Access for Medical School Graduates with Interest in Family Medicine
2. Resolution No. 4002: Prioritizing International Medical Graduate Membership Resources
3. Resolution No. 4003: Securing American Academy of Family Physicians International Medical Graduate Member Data
4. Resolution No. 4004: Investigating Existing Health Impacts of Inequitable Access to Legal Services
5. Resolution No. 4005: Gender Pronouns in Health Care Documentation
6. Resolution No. 4006: Stand By Diversity, Equity and Inclusion
7. Resolution No. 4007: Combating Medical Misinformation and Disinformation in the Digital Era
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9. Resolution No. 4009: Menopause Workplace Accommodations

RESOLUTION NO. 4001

Expanding American Academy of Family Physicians Membership Benefits and Access for Medical School Graduates with Interest in Family Medicine

Introduced by: Adedamola Ayodele Omole, MD, IMG
 Natalie Wietfeldt, MD, IMG
 Sheree Sharpe, MD, IMG
 Jesiel Lombay, MD, IMG
 Dorcas Omari, MD, General Registrant
 Blessing Enudu, MD, IMG
 Co Ho, MD, IMG

WHEREAS, There is a national shortage of family physicians in America, and

WHEREAS, International Medical Graduates (IMG) provide a significant portion of the family physician work force, often in underserved areas of the United States (US), and

WHEREAS, annually, approximately 6,000 IMG residency applicants that are fully competent go unmatched, and

WHEREAS, there is a lack of resources for IMG students and graduates to network with US residency programs to improve their chances of getting an interview, and

WHEREAS, many IMG and globally trained physicians only become aware of the American Academy of Family Physicians (AAFP) and the opportunities within family medicine after arriving in the US, and

WHEREAS, extending AAFP membership including access to conferences, educational materials, mentorship programs, career guidance, and networking opportunities would facilitate critical support and orientation to both IMG and US medical graduates exploring family medicine, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians grant membership to medical student graduates with interest in family medicine, including International Medical Graduates not yet enrolled in United States residency programs, and be it further

RESOLVED, That the American Academy of Family Physicians (AAFP) extend the free student membership to pre-residency trained medical student graduates beyond two years, allowing access to all AAFP resources to navigate a successful family medicine residency match.

RESOLUTION NO. 4002

Prioritizing International Medical Graduate Membership Resources

Introduced by: Bindusri Paruchuri, MD, IMG
Anna Farhat, MD, IMG
Adnaan Edun, MD, IMG
Crystal Marquez, MD, IMG

WHEREAS, Currently International Medical Graduates (IMG) are 20% of the total American Academy of Family Physicians (AAFP) membership, and

WHEREAS, 31% of international medical graduates were matched into family medicine residency programs in 2025, and

WHEREAS, IMG residents can miss their opportunity to stay and contribute to addressing the primary care physician shortage in the United States, and

WHEREAS, the AAFP has an IMG resource page on aafp.org, however, it is cumbersome to locate and is limited only to medical student applicants with limited information specific to IMGs, now, therefore, be it,

RESOLVED, That the American Academy of Family Physicians (AAFP) create an opt-in checkbox on both new and renewal membership forms for all members to self-identify as IMGs on their individual AAFP profiles, and be it further

RESOLVED, That the American Academy of Family Physicians create increased visibility on the website for content specific to International Medical Graduates so as not to be limited only to medical students, and be it further

RESOLVED, That the American Academy of Family Physicians use this opt-in information to connect interested members with relevant International Medical Graduate-specific resources, networking opportunities, mentorship, and timely updates regarding medical school application processes, residency application processes, visa sponsorships, J-1 waivers, and employment pathways.

RESOLUTION NO. 4003

Securing American Academy of Family Physicians International Medical Graduate Member Data

Introduced by: Adnaan Edun, MD, IMG
David Tran, MD, LGBTQ+
Bright Zhou, MD, New Physician
Shruti Javali, MD, IMG
Peony Khoo, MD, Women

WHEREAS, International Medical Graduates consist of nearly 24.5% of the family medicine workforce as of 2022, and

WHEREAS, the federal government is shifting its immigration policy towards deportation, delaying green card processing, and revoking green cards, work visas, and student visas, and

WHEREAS, the Department of Homeland Security has revoked its policy regarding enforcement in sensitive areas including health care facilities, places of worship, disaster response centers, and social service centers, and

WHEREAS, United States Customs and Immigration Enforcement can now go where people access health care, education, justice, and prayer, and

WHEREAS, the American Academy of Family Physicians collects data regarding its members' demographics, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians securely encrypt its member data, including any data pertaining to its members' immigration status, and be it further

RESOLVED, That the American Academy of Family Physicians not disclose its member data to any law enforcement agency without a legal court order, court-ordered warrant, or subpoena.

RESOLUTION NO. 4004

Investigating Existing Health Impacts of Inequitable Access to Legal Services

Introduced by: Adnaan Edun, MD, IMG
 Matthew Mayeda, DO, MPH, General Registrant
 Prachi Thapar, DO, New Physician

WHEREAS, The vision of the American Academy of Family Physicians (AAFP) is to transform health care to achieve optimal health for everyone, and

WHEREAS, the AAFP policy on health equity recommends a comprehensive approach to defining health, and

WHEREAS, the AAFP position paper titled "Advancing Health Equity by Addressing the Social Determinants of Health in Family Medicine" discusses the damaging health effects of "chronic stress," and

WHEREAS, the AAFP has completed research, published detailed health consequences, and supported public policies that address inequities that cause chronic stress, including disparities in healthcare access, food insecurity, education, and housing, and

WHEREAS, vulnerable populations are less likely to receive legal assistance, and

WHEREAS, experiencing unresolved legal issues in areas such as housing, public benefits, employment, education, immigration, child custody, domestic violence, and disability discrimination can contribute to greater health inequalities, and

WHEREAS, the AAFP has not published research on the potential health impact of disparities in accessing legal services, and

WHEREAS, disparities in access to legal services could lead to an inequitable distribution of chronic stress and poorer health outcomes, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians investigate existing research on the health impacts of inequitable access to legal services, and be it further

RESOLVED, That the American Academy of Family Physicians adopt a policy or position paper on the health impacts of inequitable access to legal services.

RESOLUTION NO. 4005

Gender Pronouns in Health Care Documentation

Introduced by: Kyle Kurzet, MD, MS, LGBTQ+
 Diana Howard, MD AAHIVS, LGBTQ+
 David Tran, MD, General Registrant

WHEREAS, The federal government, by Executive Order, comprehends gender as binary, designated as “male” or “female” (The White House, “Defending Women from Gender Ideology Extremism and Restoring Biological Truth to the Federal Government,” January 20, 2025), and

WHEREAS, the aforementioned Executive Order, declares the “Secretaries of State and Homeland Security, and the Director of the Office of Personnel Management, shall implement changes to require that government-issued identification documents, including passports, visas, and Global Entry cards, accurately reflect the holder’s sex” as exclusively female or male (The White House, “Defending Women from Gender Ideology Extremism and Restoring Biological Truth to the Federal Government,” January 20, 2025), and

WHEREAS, the American Academy of Family Physician’s (AAFP) policy states, “Transgender and gender nonbinary people often face social and economic marginalization, and experience a variety of barriers to healthcare, including overt discrimination, inadequate health insurance coverage, legislative interference in the physician-patient relationship, and poor physician knowledge of appropriate treatment. The AAFP supports gender-affirming care as an evidence-informed intervention that can promote health equity for gender-diverse individuals, although wider sociopolitical efforts are necessary to further mitigate these barriers and advance equity.” (AAFP Policy, "Care for the Transgender and Gender Nonbinary Patient"), and

WHEREAS, health care institutions, organizations, and entities may be pressured by payors to change a patient’s gender in the medical record without their consent, and

WHEREAS, the Executive Order conflicts with AAFP policy, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians issue a statement encouraging health care entities to continue current practices which allow patients to self-identify their gender identity in the medical record.

RESOLUTION NO. 4006

Stand By Diversity, Equity and Inclusion

Introduced by: Brian Carolan, DO, LGBTQ+
 Andrew Goodman, MD, LGBTQ+
 Juan Carlos Venis, MD, LGBTQ+

WHEREAS, The current American Academy of Family Physicians (AAFP) policy cites dedication to diversity, equity, and inclusion (DEI) in various policies, including but not limited to: “Discrimination, Patient,” “Discrimination, Physician,” “Diversity in the Workforce,” “Care for the Transgender and Gender Nonbinary Patient,” “Medical School, Underrepresentation in Medicine,” “Equal Representation of Women in Family Medicine,” and

WHEREAS, recent executive actions conflict with the AAFP’s position regarding the importance of diversity, equity, and inclusion; such actions include, but are not limited to: Ending Radical and Wasteful Government DEI Programs and Preferencing, Defending Women from Gender Ideology Extremism and Restoring Biological Truth to the Federal Government, Ending Illegal Discrimination and Restoring Merit-Based Opportunity, Protecting Children from Chemical and Surgical Mutilation, and Restoring Equality of Opportunity and Meritocracy, and

WHEREAS, the current political climate may dissuade organizations, such as the AAFP, from maintaining strong positions on DEI, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians reaffirm commitment to diversity, equity, and inclusion in education, physician workforce, medical practice, health policy, and patient care, and be it further

RESOLVED, That the American Academy of Family Physicians (AAFP) release statements that reaffirm the AAFP’s dedication to diversity, equity, and inclusion to both membership and the general public.

RESOLUTION NO. 4007

Combating Medical Misinformation and Disinformation in the Digital Era

Introduced by: Jose Flores-Rodarte, MD, New Physician
 Yasir Abdul-Rahman, DO, New Physician

WHEREAS, Medical misinformation and disinformation contribute to vaccine hesitancy, decreased trust in healthcare professionals, and increased preventable illness and death, and

WHEREAS, social media platforms have become primary health information sources for the public, often amplifying false or misleading content faster and more broadly than accurate health information, and

WHEREAS, the spread of health-related disinformation disproportionately affects vulnerable populations, including communities with limited health literacy, further exacerbating health disparities, and

WHEREAS, family physicians are trusted voices in their communities and are well-positioned to serve as credible sources of evidence-based health information, and

WHEREAS, professional organizations have an opportunity and responsibility to model effective public communication and advocacy in digital spaces to protect public health, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians develop a policy statement that opposes medical disinformation and misinformation and create a task force to address the increasing prevalence of medical misinformation, and be it further

RESOLVED, That the American Academy of Family Physicians combat medical misinformation and disinformation through an active social media presence focused on sharing evidence-based health information, and be it further

RESOLVED, That the American Academy of Family Physicians support the development of member-accessible toolkits, patient-facing materials and digital resources to equip family physicians in addressing misinformation during patient care and community engagement.

RESOLUTION NO. 4008

Supporting Practices in Paid Parental and Family Leave

Introduced by: Catherine Chua, DO; CPE; FAAPL, Women
Megan Sakamoto-Chun, DO, MS, FAAFP, Women
Drema Hunt, DO, FAAFP, Women
Kento Sonoda, MD, FAAFP, IMG
Edy Gomes, MD, New Physician
Ashley Baldauf, DO, BIPOC

WHEREAS, The United States is one of only seven countries that do not offer paid maternity leave for mothers, and the only developed nation not to, and

WHEREAS, a quarter of mothers return to work within 10 days of giving birth, and

WHEREAS, in the United States, the Family Medical Leave Act does not apply to half of working women, as it does not cover small businesses or women who have worked less than 1,760 hours for their company, nor does it provide paid leave, and

WHEREAS, the current national policies place an unfair burden on eligible low-income families as well as ethnic minorities, and

WHEREAS, four out of five Americans support paid time off for new parents, and

WHEREAS, the cost of vacancy for an unstaffed healthcare position could average \$8000 per day, and if left unfilled for weeks or months, an open role can be prohibitively expensive, and

WHEREAS, the primary care workforce shortage is expected to continue expanding over the coming years, and

WHEREAS, prior resolutions at National Conference of Constituency Leaders and Congress of Delegates addressing the need for paid parental leave were accepted for information as an American Academy of Family Physicians policy on parental leave is in development, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians develop a policy on parental and/or family leave that lasts for at least 12 weeks and is separate from vacation and sick time for new parents, and be it further

RESOLVED, That the American Academy of Family Physicians explore existing relationships with locum tenens agencies to leverage collective bargaining to help physicians locate a provider to continue their daily work in practice, and be it further

RESOLVED, That the American Academy of Family Physicians explore the feasibility of providing temporary short-term disability style coverage for physicians that take parental or family leave.

RESOLUTION NO. 4009

Menopause Workplace Accommodations

Introduced by: Rebecca Johnson, MD, Women
Becca Stoll, DO, Women
Faiha Hill, MD, MPH, MS, Women
Kelly Thibert, DP, LGBTQ+
Erica Courtney, MD, LGBTQ+

WHEREAS, The American Academy of Family Physicians has clinical resources for managing menopause but does not have a policy on workplace accommodations, and

WHEREAS, one-half of the United States population will experience menopause, and

WHEREAS, The Menopause Society has a toolkit to help support employers and employees to discuss menopause, and

WHEREAS, the 2024 Menopause and the Workplace: Consensus Recommendations, include the development of anti-discrimination and accommodation policies, provision of comprehensive healthcare and mental health benefits for menopause-related care, adjustment of workplace environments to support employees experiencing menopause, and training of managers to foster a supportive and inclusive workplace culture, and

WHEREAS, due to menopausal symptoms, people who experience menopause are missing work resulting in a \$1.8 billion workday loss annually in the United States and a \$150 billion annual loss globally due to productivity losses, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians develop a policy in support of workplace accommodations for people experiencing menopause, and be it further

RESOLVED, That the American Academy of Family Physicians adopt and implement the workplace recommendations set forth by The Menopause Society in its 2024 Menopause and the Workplace: Consensus Recommendations, and be it further

RESOLVED, That the American Academy of Family Physicians evaluate and amend its internal employment policies to ensure that all staff experiencing menopause receive appropriate support, flexibility and access to resources necessary for their continued well-being and professional success.