

2022 Agenda for the Reference Committee on Organization and Finance

National Conference of Constituency Leaders

| Item No. | Resolution Title |
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| 1. Resolution No. 4001 | Developing Anti-racism Physician Training for all American Academy of Family Physician Members - A call for Racial |
| 2. Resolution No. 4002 | Reduce The Threat of Scope Creep by Non-Physicians on Family Medicine Physicians |
| 3. Resolution No. 4003 | Pay Parity for Women |
| 4. Resolution No. 4004 | Constituency For Physicians with Disabilities |
| 5. Resolution No. 4005 | Global Health as a Continued Priority for AAFP |
| 6. Resolution No. 4006 | NCCL Black Male Longitudinal Mentorship Program |



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Resolution No. 4001

2022 National Conference of Constituency Leaders — Sheraton Kansas City Hotel at Crown Center

1 Developing Anti-racism Physician Training for all American Academy of Family Physician 2 Members - A call for Racial Affinity Groups 3 4 Submitted by: Tiffany Ho, MD, MPH, LGBTQ+ 5 Sarah Gerrish, MD, Minority 6 Martina Kamaka, MD, Minority 7 LaTasha Perkins, MD, Minority 8 Cedric Barnes, DO, Minority 9 10 11 WHEREAS. The Institute of Medicine concluded that implicit negative racial attitudes and 12 stereotypes contribute to poorer health outcomes for patients of color, and 13 14 WHEREAS, reducing racial health inequities requires introspective of implicit biases, privilege, 15 and behaviors that perpetuate systemic racism, and 16 17 WHEREAS, anti-racism training is a tool to advance racial equity and racial justice by providing 18 opportunities to identify systemic and institutional racism and develop strategies to dismantle 19 racism, and 20 21 WHEREAS, the American Academy of Family Physicians (AAFP) has a policy titled "Institutional 22 Racism in the Health Care System", and 23 24 WHEREAS, there is an existing policy adopted in 2019 that requires all elected officials to 25 undergo implicit bias and diversity, equity, inclusion (DEI) training, and 26 27 WHEREAS, the AAFP EveryONE Project has developed an Implicit Bias Training guide which 28 only touches upon one component of developing an anti-racist physician, and 29 30 WHEREAS, the AAFP has developed the internal curriculum "Bridging the Gap by Breaking the 31 Barriers: The Systemic Racism and Health Equity Curriculum" developed by the Health Equity 32 Fellowship, which is targeted to students and residents but not to faculty, and 33 34 WHEREAS, the Society of Teachers of Family Medicine (STFM) has implemented a 20-month 35 long Anti-racism Learning Collaborative to provide faculty development to implement projects 36 across the nation to reduce racism in various institutions, some of which includes implementing 37 a longitudinal anti-racism curriculum, and 38 39 WHEREAS, racial affinity groups or racial affinity caucusing is a tool to explore racism and 40 privilege in smaller self-identified groups, and

WHEREAS, it is a necessary component of becoming an anti-racist physician and should be supplemented with any existing anti-racism training/curriculum, and

WHEREAS, this allows people of color to have a dedicated protected space to heal from current and historical trauma, discrimination and biases that are experienced daily and intergenerationally, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians (AAFP) develop and implement a longitudinal anti-racism training for chapter staff and chapter delegates by utilizing existing curriculum developed by AAFP Health Equity Fellowship with the goal of empowering chapter staff/delegates to teach their state physicians on how to implement this at a local level (train the trainer model), and be it further

RESOLVED, That the American Academy of Family Physicians (AAFP) expand its existing antiracism curricula by incorporating the findings from the Robert Graham Center's ongoing evaluation of the Society of Teacher of Family Medicine's (STFM) Anti-racism Learning Collaborative to develop and implement longitudinal trainings in asynchronous, interactive formats (i.e., webinar, on-demand, in-person etc) for continuing medical education (CME) at conferences including Family Medicine Expierence (FMX), Annual Constituency Leader Forum (ACLF)/ National Conference of Constituency Leaders (NCCL) to be available for the AAFP membership at-large, and be it further

RESOLVED, That the American Academy of Family Physicians develop and provide shared resources as well as training to facilitate racial affinity groups in conjunction with anti-racism training, and be it further

RESOLVED, That the American Academy of Family Physicians (AAFP) offer protected time and spaces at any AAFP-sponsored event to host racial affinity groups to build upon anti-racism training while providing a space to reflect, recharge, and heal.



Resolution No. 4002

2022 National Conference of Constituency Leaders — Sheraton Kansas City Hotel at Crown Center

| 1 | Reduce The Threat of Scope Creep by Non-Physicians on Family Medicine Physicians |
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| 3 | Submitted by: Alison Peterson, MD, IMG |
| 4 | Vinay Bhooma, MD, IMG |
| 5 | Yoojin Park, MD, IMG |
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| 7 | WHEREAS, The advancement of the scope of practice of non-physician providers threatens the |
| 8 | existence of the family medicine physicians, and |
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| 10 | WHEREAS, the American Academy of Family Physicians advocates for family physicians, now, |
| 11 | therefore, be it |
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| 13 | RESOLVED, That the American Academy of Family Physicians develop an advertising campaign |
| 14 | highlighting that family medicine physicians provide a higher evidence-based standard of care than |
| 15 | non-physician providers. |
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Resolution No. 4003

2022 National Conference of Constituency Leaders — Sheraton Kansas City Hotel at Crown Center

| 1 2 | Pay Parity for Women |
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| 3 4 5 6 7 | Submitted by: Marti Taba, MD, Women Barbara Miller, MD, Women Marcia Parris, MD, Women Kari Halvorson, MD, Women |
| 8 9 10 | WHEREAS, Women identify the lack of equal pay in the workplace and the persistence of the gender wage gap as top concerns, and |
| 11 12 13 | WHEREAS, women physicians make approximately 25% less than men of all races and ethnicities according to Association of American Medical Colleges, and |
| 14 15 16 | WHEREAS, that the American Academy of Family Physicians policy from 2018 supports transparency and equity of physician compensation, and |
| 17 18 19 20 | WHEREAS, data from Harvard Kennedy School shows that women negotiate for lower compensation than men in the absence of clear industry standards but negotiate for equal salaries when standard salary information was available, now, therefore, be it |
| 21 22 23 24 25 | RESOLVED, That the American Academy of Family Physicians advocate for Commission on Membership and Member Services to be transparent in sharing the salary and compensation information by physician gender, years of experience, geography, hours of work, and scope of work that participants in Medicare and Medicaid are mandated to provide, and be it further |

RESOLVED, That this data be available to physicians across the country.



Resolution No. 4004

2022 National Conference of Constituency Leaders — Sheraton Kansas City Hotel at Crown Center

| 1 | Constituency For Physicians With Disabilities |
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| 2 | |
| 3 | Submitted by: Joel Valcarcel, MD, FAAFP, IMG |
| 4 | Anna Sliwowska, MD, Women |
| 5 | Lily Kosminsky, MD, General Registrant |
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| 7 | WHEREAS, The American with Disabilities Act estimates that 26% of adults in the United States |
| 8 | have a disability, and |
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| 10 | WHEREAS, physicians with disabilities likely account for a similar portion of the physicians in the |
| 11 | United States, but only 3% of physicians self-identify as having a disability, and |
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| 13 | WHEREAS, physicians with disabilities are an underrepresented population, now, therefore, be it |
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| 15 | RESOLVED, That the American Academy of Family Physicians investigate the need for a |
| 16 | constituency to represent physicians with disabilities. |



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Resolution No. 4005

2022 National Conference of Constituency Leaders — Sheraton Kansas City Hotel at Crown Center

1 Global Health as a Continued Priority for AAFP 2 Submitted by: Benjamin Silverberg, MD, FAAFP, LGBTQ+ 4 Christina Kelly, MD, LGBTQ+ 5 6 Kyle Kurzet, MD, MS, FAAFP, LGBTQ+ Rachel Franklin, MD, Women 7 Vijaya Arun Kumar, MD, IMG 8 Sabesan Karuppiah, MD, IMG 9 10 WHEREAS, The American Academy of Family Physicians (AAFP) Global Health Summit's (GHS) 11 attendance has increased over the years to over 300 individuals at its last in-person meeting in 12 2019, which is reflective of the increasing interest in global and underserved health among 13 members, and 14 15 WHEREAS, according to the 2020 Association of American Medical Colleges (AAMC) medical 16 student questionnaire, 33% of matriculating medical students had international volunteer 17 experience and 22% of graduating medical students participated in a global health experience 18 while 36.7% plan to primarily work in underserved areas, and 19 20 WHEREAS, this global health interest persists after graduation with 66% of newly graduating 21 physicians planning to participate in global health, with students selecting residency programs 22 based on availability of global health opportunities (about 75% of family medicine residency 23 programs offer global health opportunities), and 24 25 WHEREAS, the GHS is a true summit attracting and inspiring students, faculty and AAFP 26 members with the interest to connect with communities around the world, from global at home to 27 global abroad, a network and incubator of an understanding of global inequities that goes beyond 28 the acquisition of Continuing Medical Education credit, and 29 30 WHEREAS, the GHS has usually been budget-neutral to the AAFP with registration revenue and 31 AAFP Foundation support and the Global Health Advisory Committee is committed annually to 32 trying to achieve this financial goal, and 33 34 WHEREAS, the GHS has been canceled in 2022 and reduced from a 2.5 day conference to a half 35 day pre-conference at FMX requiring full registration fees, and 36 37 WHEREAS, issues raised at GHS, such as reproductive justice, access to comprehensive, 38 appropriate, and sustainable healthcare for sex, gender, and sexual orientation minorities, and 39 international medical graduates who desire to provide care in international locations, are not 40 addressed at other educational and networking opportunities, now, therefore, be it

- RESOLVED, That the American Academy of Family Physicians reinstate the annual Global Health Summit with Center for Global Health Initiatives oversight and planning beginning in 2023, and be
- 44 it further45
- RESOLVED, That the Global Health Summit be a dedicated summit lasting at least one day and
- 47 not in direct competition with other AAFP educational opportunities and be focused on the
- 48 educational and networking global health needs for member constituencies.

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Resolution No. 4006

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1 NCCL Black Male Longitudinal Mentorship Program 2 3 Submitted by: Benjamin Simmons, MD, Minority 4 Lionel McIntosh, MD, Minority 5 Cedric Barnes, DO, Minority 6 LaTasha Seliby Perkins, MD, Minority 7 8 WHEREAS, According to the Association of American Medical Colleges black men make up 9 less than 3% of physicians. In 1978, black male medical students accounted for 3.1% of the 10 national medical student body; however, as of 2019, they accounted for 2.9%, and 11 12 WHEREAS, the American Academy of Family Physicians (AAFP) has historically participated in 13 community service in Kansas City local organizations during the Annual Chapter Leader Forum 14 and National Conference of Constituency Leaders, and 15 16 WHEREAS, the AAFP currently has a partnership with the Future Health Professionals (HOSA) 17 organization being piloted with state chapters, now, therfore, be it 18 19 RESOLVED, That the American Academy of Family Physicians during the Annual Chapter 20 Leader Forum and National Conference of Constituency Leaders work with the Kansas City 21 Boys and Girls Club, Scouts BSA Health Explorer Program, YMCA, churches, and other civic 22 organizations and host a preconference longitudinal mentoring program prioritizing grade school 23 black male students, and be it further 24 25 RESOLVED, That the American Academy of Family Physicians identify and partner with 26 organizations such as The National Medical Association or Black Men in White Coats that have 27 existing programming for underrepresented minorities pipeline programs to create the onsite 28 program, and be it further 29 30 RESOLVED, That the American Academy of Family Physicians through its Robert Graham 31 Center pursue ongoing evaluation of the program and its participants to determine the success 32 and efficacy of the mentorship program, and be it further 33 34 RESOLVED. That the American Academy of Family Physicians, pursuant to the success of the 35 program, expand the initiative to include all grade school boys and girls expressing an interest in 36 the field of medicine.