



2018 Report of the Reference Committee on Organization & Finance

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

1 **The Reference Committee on Organization & Finance has considered each of the items**
2 **referred to it and submits the following report. The committee’s recommendations on each**
3 **item will be submitted as a consent calendar and voted on in one vote. Any item or items**
4 **may be extracted for debate.**

5
6 **ITEM NO. 1: RESOLUTION NO. 4001: EMPOWERING FAMILY PHYSICIANS TO PROVIDE**
7 **CARE FOR THE GROWING LATINX POPULATION**
8

9 RESOLVED, That the American Academy of Family Physicians provide non-Latinx
10 physicians training in culturally competent care specific to the Latinx population, including
11 social determinants of health as barriers to care, and be it further
12

13 RESOLVED, That the American Academy of Family Physicians include in the strategic plan
14 moving forward to address the needs of non-Latinx physicians to effectively care for the
15 Spanish-speaking and/or Latinx populations, and be it further
16

17 RESOLVED, That the American Academy of Family Physicians provide non-Latinx and
18 non-Spanish-speaking physicians Medical-Spanish training in the form of CME
19 programming, and be it further
20

21 RESOLVED, That the American Academy of Family Physicians provide education materials
22 on familydoctor.org in Spanish, and be it further
23

24 RESOLVED, That the American Academy of Family Physicians collaborate with
25 organizations such as the Latino Medical Student Association and the National Hispanic
26 Medical Association to create a strategic plan to increase the number of Latinx physicians
27 into the family medicine workforce, and be it further
28

29 RESOLVED, That the American Academy of Family Physicians be aware of and support
30 the ethical treatment of undocumented patients in the community (e.g. Census, ICE Raids).
31

32 Testimony was provided in support of the resolution. With few providers within the growing Latinx
33 population, there is concern about the ability of meeting these patients’ needs. Testimony centered
34 around ways the American Academy of Family Physicians (AAFP) can support members such as
35 increasing the pipeline of Latinx in the specialty, Spanish language patient resources, and the
36 importance of providing care regardless of documentation.
37

38 The reference committee acknowledges and supports the need for cultural competent care training
39 for the Latinx population. Staff shared with the reference committee that the AAFP strategic plan

1 includes building collaborative relationships with other associations including the Latino Medical
2 Student Association to raise awareness of family medicine. It was also shared that Spanish content
3 is currently available on familydoctor.org. The reference committee discussed the resolved clause
4 requesting AAFP support for the ethical treatment of undocumented patients in the community.
5 They believed that the resolved clause was too broad and needed further clarification so
6 recommended it be removed. As such, the reference committee offers a substitute resolution that
7 only addresses the outstanding concern for needed resources.

8
9 **RECOMMENDATION: The reference committee recommends that Substitute Resolution No.**
10 **4001, which reads as follows, be adopted in lieu of Resolution 4001:**

11
12 **RESOLVED, That the American Academy of Family Physicians investigate physician**
13 **training in culturally competent care specific to the Latinx population, including**
14 **social determinants of health as barriers to care, and Medical-Spanish training in the**
15 **form of CME programming to effectively care for the Spanish-speaking and/or Latinx**
16 **populations.**

17
18 **ITEM NO. 2: RESOLUTION NO. 4002: TERM LIMIT GUIDANCE FOR AMERICAN ACADEMY**
19 **OF FAMILY PHYSICIANS CONGRESS OF DELEGATES**

20
21 RESOLVED, That the American Academy of Family Physicians develop a standard that
22 each state must abide to term limits for delegates and alternates to improve the diversity
23 and inclusion in the decision-making body of the organization.

24
25 The reference committee heard overwhelming testimony in support of this resolution. Individuals
26 expressed the need for more diversity in these leadership positions, be it gender, race, thought
27 and/or experience and believe that without a standard term limit across all chapters, the Congress
28 of Delegates is not representative of the general membership and aspiring leaders are being held
29 back. Individuals recognized that it does take time to develop leaders and get important work done
30 but having long term limits can create stagnant leadership in chapters and prevent participation.
31 One individual was in support of capping concurrent term limits but allowing individuals to come
32 back and fill these roles at a later time. Another individual challenged why some chapters are
33 having issues increasing diversity in leadership positions and indicated there can be many reasons
34 attributing to this. She cautioned that chapters should not lose their ability to address these issues
35 and how to manage their leadership pipeline. The reference committee understands the concerns
36 expressed and is supportive of changes that would help increase the diversity and encourage more
37 participation in leadership roles. The reference committee believes the current bylaws, which state,
38 "Two delegates and two alternates from each chartered chapter who shall be elected for terms of
39 two years or until their respective successors are elected" provides an adequate framework that
40 relies on an election process for the length of someone's tenure, yet flexible enough for chapters to
41 manage circumstances that may arise.

42
43 **RECOMMENDATION: The reference committee recommends that Resolution No. 4002 not**
44 **be adopted.**

45
46 **ITEM NO. 3: RESOLUTION NO. 4003: NORMALIZING GENDER IDENTITY LANGUAGE**
47 **THROUGH AAFP REGISTRATION**

48
49 RESOLVED, That the American Academy of Family Physicians (AAFP) allow registrants for
50 all AAFP-sponsored events and conferences to select their own preferred pronouns of
51 address to be visible on registrant badges.

1 The reference committee heard testimony in favor of allowing registrants of AAFP events to select
2 their preferred pronouns. Individuals indicated positive reaction from patients when preferred
3 pronouns were implemented in patient care settings. The reference committee agrees the AAFP
4 can be a leader by implementing this change and demonstrating that as an organization it is not
5 talking about the issue but putting it into practice.

6
7 **RECOMMENDATION: The reference committee recommends that Resolution No. 4003 be**
8 **adopted.**

9
10 **ITEM NO. 4: RESOLUTION NO. 4004: AAFP BOARD OF DIRECTORS PUBLIC MEMBER**

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12 RESOLVED, That the American Academy of Family Physicians (AAFP) add a public
13 member to the AAFP Board of Directors by January 1, 2020.

14
15 The reference committee heard testimony in support of the resolution. The author of the resolution
16 indicated that after hearing the voice of the patient on another board, her paradigm shifted and it is
17 difficult not having that perspective. She also emphasized that while the AAFP is for family
18 physicians, we cannot support family physicians without their patients. The author recognizes there
19 are many criteria and responsibilities as a board member of the AAFP but believes there are many
20 sources that can provide someone to adequately fulfill those duties. Additional testimony provided
21 indicated there is already this kind of precedence set with other medical association boards. The
22 reference committee agrees with the value of having this kind of individual on the Board but also
23 recognizes it may be challenging to obtain a public member onto the Board by January 1, 2020
24 considering the subsequent steps needed to codify this request. As such, the reference committee
25 recommends extending the timeframe to have this role filled and is therefore recommending
26 substitute language.

27
28 **RECOMMENDATION: The reference committee recommends that Substitute Resolution No.**
29 **4004, which reads as follows, be adopted in lieu of Resolution 4004:**

30
31 **RESOLVED, That the American Academy of Family Physicians (AAFP) add a public**
32 **member to the AAFP Board of Directors by January 1, 2021, and be it further**

33
34 **RESOLVED, That Substitute Resolution No. 4004 titled "AAFP Board of Directors**
35 **Public Member" be referred to the Congress of Delegates.**

36
37 **ITEM NO. 5: RESOLUTION NO. 4005: UPDATE ONLINE LANGUAGE AND RESOURCES**
38 **REGARDING SEXUALITY AND SEXUAL MINORITIES**

39
40 RESOLVED, That www.familydoctor.org retitle the article "Homosexuality: Facts for Teens"
41 to "Sexuality: Facts for Teens" to recognize the spectrum of sexuality issues for adolescent
42 patients and not single out homosexuality, and be it further

43
44 RESOLVED, That the language used in www.familydoctor.org article currently titled
45 "Homosexuality: Facts for Teens" be re-evaluated to incorporate more inclusive and
46 positive language, and be it further

47
48 RESOLVED, That the American Academy of Family Physicians update and add to online
49 resources available on www.familydoctor.org to include Lesbian, Gay, Bisexual,
50 Transgender family and community support resources as found on www.hrc.org, and be it
51 further

1 RESOLVED, That the American Academy of Family Physicians (AAFP) update and add to
2 online resources available on AAFP's website of patient resources to make them
3 concordant with Lesbian, Gay, Bisexual, Transgender patient resources on
4 www.familydoctor.org.

5
6 The reference committee heard testimony from the co-authors and others in support of the
7 resolution. There was appreciation for the resources available on the AAFP's website and
8 familydoctor.org regarding sexuality. However, individuals expressed the need for the content to be
9 more inclusive and supportive of the spectrum of sexuality and believed the content should be
10 updated. There was also testimony in favor of providing resources for family members who support
11 Lesbian, Gay, Bisexual, Transgender patients since they can be touchpoints for family physicians.
12 Lastly, testimony was provided in support of making it easier for physicians to access patient
13 resources when referencing materials on aafp.org without having to duplicate search efforts on
14 familydoctor.org. The reference committee is supportive of the spirit of the resolution and
15 recommend expanding the scope of the content that was originally asked to be updated.

16
17 **RECOMMENDATION: The reference committee recommends that Substitute Resolution No.**
18 **4005, which reads as follows, be adopted in lieu of Resolution 4005:**

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20 **RESOLVED, That any resource on familydoctor.org regarding sexuality be inclusive**
21 **and have positive language that represents the spectrum of sexuality, and be it**
22 **further**

23
24 **RESOLVED, That the American Academy of Family Physicians add Lesbian, Gay,**
25 **Bisexual, Transgender family and community support resources on familydoctor.org,**
26 **and be it further**

27
28 **RESOLVED, That the American Academy of Family Physicians (AAFP) update and**
29 **add to resources available on AAFP's website of patient resources to make them**
30 **concordant with Lesbian, Gay, Bisexual, Transgender patient resources on**
31 **familydoctor.org.**

32
33 **ITEM NO. 6: RESOLUTION NO. 4006: RURAL PHYSICIAN ENGAGEMENT**

34
35 RESOLVED, That the American Academy of Family Physicians survey members to identify
36 barriers to engagement for the purpose of reducing barriers and improving collaboration
37 among rural family physicians, and be it further

38
39 RESOLVED, That the American Academy of Family Physicians develop a toolkit for
40 chapters to partner with rural physician organizations within their states in order to increase
41 rural physician membership.

42
43 The reference committee heard testimony in support of the resolution that indicated rural
44 physicians are a vulnerable membership group for the AAFP. Many rural physicians feel isolated
45 and disengaged from the AAFP. The reference committee believes it is important to understand
46 the barriers rural physicians face that keeps them from engaging with the AAFP. An engagement
47 survey would not only identify the barriers but also create awareness of the Rural Health Member
48 Interest Group and aid in the development of resources.

49
50 **RECOMMENDATION: The reference committee recommends that Resolution No. 4006 be**
51 **adopted.**

52 **ITEM NO. 7: RESOLUTION NO. 4007: PHYSICIANS IN GOVERNMENT**

1
2 RESOLVED, That the American Academy of Family Physicians offer resources/educational
3 opportunities that would assist family physicians running for political office.
4

5 Testimony was provided in support of the resolution noting there are only 12 physicians running for
6 public office at the national government level. One author spoke of her need for resources as she
7 is running for office. It was noted, the American Medical Association Political Action Committee
8 (AMPAC) has resources for physicians; however, not all AAFP members are members of AMPAC.
9 The AAFP could use these resources as a model of what to provide members. The reference
10 committee supports family physicians interested in running for political office noting more family
11 physicians in leadership positions could have a positive impact on the specialty.
12

13 **RECOMMENDATION: The reference committee recommends that Resolution No. 4007 be**
14 **adopted.**
15

16 **I wish to thank those who appeared before the reference committee to give testimony and**
17 **the reference committee members for their invaluable assistance. I also wish to commend**
18 **the AAFP staff for their help in the preparation of this report.**
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21 Respectfully Submitted,
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26 _____
27 Gerald Banks, MD, MS – Chair

28 Rashida Downing, MD – Minority
29 Kristin Mack, DO – Women
30 Bonnie Walsh, MD – New Physician
31 Megan Vigil, MD – LGBT
32 Timothy Yu, MD – IMG