



# 2019 Consent Calendar for the Reference Committee on Advocacy

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

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

5  
6 **RECOMMENDATION: The Reference Committee on Advocacy recommends the following**  
7 **consent calendar for adoption:**

8  
9 **Item 1:** Not Adopt Resolution No. 1001 “Achieve FamMedPAC Free of Conflict of  
10 Interest/Transparency.”

11  
12 **Item 2:** Reaffirm Resolution No. 1002 “Promoting Safety in Schools.”

13  
14 **Item 3:** Adopt Resolution No. 1003 “Medical Student Debt Relief (Expanded)”.

15  
16 **Item 4:** Adopt Substitute Resolution No. 1004 “Paid Family Leave” in lieu of Resolution Nos. 1004  
17 and 1014.

18  
19 **Item 5:** Reaffirm Resolution No. 1005 “Support of a Sustainable Health Care System.”

20  
21 **Item 6:** Reaffirm Resolution No. 1006 “Health Care Coverage Should Equate to Health Care  
22 Access.”

23  
24 **Item 7:** Adopt Substitute Resolution No. 1007 “Affirming the Safety and Legality of Abortion” in lieu  
25 of Resolution No. 1007.

26  
27 **Item 8:** Adopt Substitute Resolution No. 1008 “Declaration of Public Health Emergencies for  
28 Refugee, Migrant and Asylum-Seeker Care” in lieu of Resolution No. 1008.

29  
30 **Item 9:** Adopt Resolution No. 1009 “Oppose Criminalization of Physicians Providing Abortion  
31 Care.”

32  
33 **Item 10:** Adopt Resolution No. 1010 “Fairness for Family Physicians of Non-Us Origin and Their  
34 Families.”

35  
36 **Item 11:** Adopt Substitute Resolution No. 1011 “Keep Legislators From Practicing Medicine  
37 Without a License” in lieu of Resolution No. 1011.

38  
39 **Item 12:** Not Adopt Resolution No. 1012 “Single Payer as the System That Provides Equity and  
40 Health Care As A Human Right.”  
41

42 **Item 13:** Adopt Substitute Resolution No. 1013 “Support Breastfeeding Mothers in the Workplace”  
43 in lieu of Resolution No. 1013.

44  
45 **Item 14:** Adopt Substitute Resolution No. 1015 “Resolution to Prevent Nuclear War” in lieu of  
46 Resolution No. 1015.

47



# 2019 Report of the Reference Committee on Advocacy

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

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

5  
6 **ITEM NO. 1: RESOLUTION NO. 1001: ACHIEVE FAMMEDPAC FREE OF CONFLICT OF**  
7 **INTEREST/TRANSPARENCY**

8  
9 RESOLVED, That the American Academy of Family Physicians requires that the  
10 FamMedPAC examine the campaign contributions of the National Rifle Association and  
11 other related groups as well as pharmaceutical and biotechnology companies in  
12 determining whether or not funds should be directed toward candidates, and be it further  
13

14 RESOLVED, That the American Academy of Family Physicians requires that the  
15 FamMedPAC review the candidates' voting records to ensure that they align with American  
16 Academy of Family Physicians' commitment to Health Care for All, affordable prescription  
17 drugs, and gun violence prevention in determining whether or not funds should be allocated  
18 for such a candidate, and be it further  
19

20 RESOLVED, That the American Academy of Family Physicians requests the FamMedPAC  
21 to prepare an annual report outlining their rationale for providing or withholding donations to  
22 candidates, politicians, and committees that would be available on American Academy of  
23 Family Physicians website for membership to ensure transparency and accountability of  
24 such funds collected from student, resident, and physician members, and be it further  
25

26 RESOLVED, That the American Academy of Family Physicians ensures the publication of  
27 the minutes of the proceedings of the FamMedPAC on their website to be available for all  
28 American Academy of Family Physicians members, and be it further  
29

30 RESOLVED, That this resolution be sent to the American Academy of Family Physicians  
31 Congress of Delegates.  
32

33 The reference committee heard testimony in support of and in opposition to the resolution. One  
34 delegate testified about the need to know where PAC dollars were being spent. The delegates  
35 opposed to the resolution acknowledged the value of transparency but suggested that in this  
36 difficult political environment the AAFP should position itself to be able to communicate with  
37 legislators who do not necessarily agree with all of family medicine's policies.  
38

1 The reference committee agreed that FamMedPAC contribution records are reportable to the  
2 Federal Election Commission and publicly available. The committee raised concerns that additional  
3 disclosure might inappropriately reveal the AAFP's political strategy. The committee also noted that  
4 FamMedPAC has a separate governing board. There were concerns raised that the list of  
5 organizations and businesses which FamMedPAC would have to examine could be so expansive  
6 as to be a burden and that refraining from contributing to certain legislators could limit the voice of  
7 family medicine. The reference committee agreed that politics is multifaceted and requires strategic  
8 partnerships.

9  
10 **RECOMMENDATION: The reference committee recommends that Resolution No. 1001 not**  
11 **be adopted.**

12  
13 **ITEM NO. 2: RESOLUTION NO. 1002: PROMOTING SAFETY IN SCHOOLS**

14  
15 RESOLVED, That the American Academy of Family Physicians expand its current firearm  
16 policy to support red flag laws, waiting periods, and gun-free school zones, and be it further

17  
18 RESOLVED, That the American Academy of Family Physicians promote the equitable and  
19 nondiscriminatory application of gun safety laws.

20  
21 The reference committee heard testimony from three speakers, all in support of the resolution. The  
22 need to do more to promote gun safety and keep guns out of the hands of those who can kill many  
23 was emphasized, while another speaker praised the AAFP's existing policy on gun violence and  
24 framed the resolution as a continuation of existing action grounded in evidence-based practices.

25  
26 The reference committee discussed existing advocacy efforts to address gun violence, and in  
27 particular red flag legislation, including a 2/24/19 [letter](#) to Representative Mike Thompson (D-CA).  
28 The committee affirmed the first resolved clause, which was in line with existing advocacy on gun  
29 violence, including red flag legislation. The committee also affirmed the second resolved clause,  
30 citing AAFP policy on [Mental Health Care Services by Family Physicians \(Position Paper\)](#) to  
31 ensure that individuals with mental illness would not be discriminated against.

32  
33 **RECOMMENDATION: The reference committee recommends that Resolution No. 1002 be**  
34 **reaffirmed as current policy.**

35  
36 **ITEM NO. 3: RESOLUTION NO. 1003: MEDICAL STUDENT DEBT RELIEF (EXPANDED)**

37  
38 RESOLVED, That the American Academy of Family Physicians seek to collaborate with  
39 financial institutions to offer loan consolidation programs geared toward lowering the  
40 interest rate on privately funded student loans once a physician enters the United States  
41 work force or qualifying non-governmental organization as a practicing family medicine  
42 primary care provider, and be it further

43  
44 RESOLVED, That the American Academy of Family Physicians seek to advocate legislation  
45 to support that federal loan agencies offer loan consolidation programs geared toward  
46 lowering the interest rate on government funded student loans once a physician enters the  
47 United States work force or qualifying non-governmental organization as a practicing  
48 primary care provider (Family Medicine, Internal Medicine, Pediatrics, etc.) to offset the  
49 financial burden that high debt places on our primary care providers, and be it further

50  
51 RESOLVED, That the American Academy of Family Physicians collaborate with the Group  
52 of Six (American Academy of Pediatrics, American Osteopathic Association, American

1 College of Physicians, American Congress of Obstetricians and Gynecologists, American  
2 Psychiatric Association) to advocate legislation to support that federal loan agencies offer  
3 loan consolidation programs geared toward lowering the interest rate on government  
4 funded student loans once a physician enters the United States work force or qualifying  
5 non-governmental organization as a practicing primary care provider (Family Medicine,  
6 Internal Medicine, Pediatrics, etc.) to offset the financial burden that high debt places on our  
7 primary care providers.

8  
9 The reference committee heard many speakers in support of medical student debt relief. There  
10 was broad agreement that debt limits family physicians' career choices and that the AAFP should  
11 take steps to reduce the burden of medical student debt. A member suggested that capping  
12 interest rates as the military did for their physicians is a good precedent. Another delegate  
13 highlighted debt as a potential hinderance to achieving the goal of 25x2030, and another said that  
14 her monthly payment in residency scarcely covers the accumulating interest.

15  
16 The reference committee agreed that student debt was a serious issue for AAFP members. They  
17 discussed the AAFP's collaboration with insurance companies to offer affordable products to  
18 members and agreed that there might be an opportunity for the AAFP to work with financial  
19 institutions to offer loan consolidation programs through similar strategic partnerships.

20  
21 **RECOMMENDATION: The reference committee recommends that Resolution No. 1003 be**  
22 **adopted.**

23  
24 **ITEM NO. 4: PAID FAMILY LEAVE**

25  
26 **RESOLUTION NO. 1004**

27  
28 RESOLVED, That the American Academy of Family Physicians support a minimum of 12  
29 weeks paid leave for parents of a newly born or newly adopted child [of any age], including  
30 family physicians and residents, and support an optional extension of this leave as unpaid  
31 time off, and be it further

32  
33 RESOLVED, That the American Academy of Family Physicians advocate actively for  
34 national legislation to support Paid Family Leave, and be it further

35  
36 RESOLVED, That the American Academy of Family Physicians partner with the  
37 Accreditation Council for Graduate Medical Education to update the Common Program  
38 Requirements to include specific language endorsing paid family leave, and be it further

39  
40 RESOLVED, That this resolution should be sent to the Congress of Delegates.

41  
42 **RESOLUTION NO. 1014**

43  
44 RESOLVED, That the American Academy of Family Physicians support a minimum of 12  
45 weeks paid leave for primary caregivers for a newly born or adopted child, including family  
46 physicians and residents, and support an optional extension of this leave as unpaid time off.

47  
48 The reference committee heard testimony from speakers in favor of the resolution on paid family  
49 leave, citing the need for physicians and the general public to bond with their children. Another  
50 member informed the committee how she had to leave her three children early because her office  
51 did not have a comprehensive paid family leave policy. Additional testimony highlighted how all  
52 citizens would benefit from a national paid family leave standard.

1  
2 Reference committee members spoke at length and recommended combining the resolution with  
3 Resolution No. 1014, "AAFP Supports Family Leave" as they are similar. Recognizing that the  
4 AAFP cannot compel the Accreditation Council for Graduate Medical Education (ACGME) to  
5 update Common Program Requirements to include paid family leave, the committee recommended  
6 revising the second resolved clause to "communicate" with the ACGME a recommendation to  
7 update the Common Program Requirements. Additionally, the committee added that the AAFP  
8 communicate with the Review Committee for Family Medicine within ACGME to promote paid  
9 family leave within family medicine specifically. The committee also included clarifying language in  
10 the second resolved clause to ensure that the family paid leave under consideration include the  
11 "birth of a child or adoption of a child of any age with optional extension of this leave as unpaid  
12 time off."  
13

14 **RECOMMENDATION: The reference committee recommends that Substitute Resolution No.**  
15 **1004 be adopted in lieu of Resolution Nos. 1004 and 1014 as printed below:**  
16

17 **RESOLVED, That the American Academy of Family Physicians support a minimum of**  
18 **12 weeks paid leave for parents of a newly born or newly adopted child [of any age],**  
19 **including family physicians and residents, and support an optional extension of this**  
20 **leave as unpaid time off, and be it further**  
21

22 **RESOLVED, That the American Academy of Family Physicians advocate actively for**  
23 **national legislation to support paid family leave, for parents of a newly born or newly**  
24 **adopted child [of any age], and be it further**  
25

26 **RESOLVED, That the American Academy of Family Physicians communicate with the**  
27 **Accreditation Council for Graduate Medical Education (ACGME) to recommend**  
28 **updating the Common Program Requirements to endorse paid family leave and**  
29 **include covering birth of a child or adoption of a child of any age with optional**  
30 **extension of this leave as unpaid time off and communicate with the Family Medicine**  
31 **Residency Committee within ACGME to promote same paid family leave.**  
32

33 **RESOLVED, That this resolution be referred to the Congress of Delegates.**  
34

35 **ITEM NO. 5: RESOLUTION NO. 1005: SUPPORT OF A SUSTAINABLE HEALTH CARE**  
36 **SYSTEM**  
37

38 RESOLVED, That the American Academy of Family Physicians support a system of health  
39 care that is financially sustainable regardless of politics and free from undue influence from  
40 commercial entities, and be it further  
41

42 RESOLVED, That this resolution be referred to American Academy of Family Physicians  
43 Congress of Delegates.  
44

45 The reference committee heard testimony from one speaker in favor of the resolution. One  
46 delegate referenced the [Health Care for All](#) document as evidence of the AAFP's support for  
47 affordable health care coverage.  
48

49 The reference committee members discussed the Health Care for All policy document and  
50 determined that it satisfied the resolution's goals of financial sustainability and independence from  
51 special interests.  
52

1 **RECOMMENDATION: The reference committee recommends that Resolution No. 1005 be**  
2 **reaffirmed.**

3  
4 **ITEM NO. 6: RESOLUTION NO. 1006: HEALTH CARE COVERAGE SHOULD EQUATE TO**  
5 **HEALTH CARE ACCESS**

6  
7 RESOLVED, That the American Academy of Family Physicians support a system of  
8 universal health care in which coverage equates to access, and be it further

9  
10 RESOLVED, That this resolution be referred to American Academy of Family Physicians  
11 Congress of Delegates.

12  
13 The reference committee heard from delegates in support of the resolution. The LGBT delegate  
14 said that despite having health care coverage, patients continue to face the same difficult choices  
15 between food, medications, and transportation costs because they continue to lack health care  
16 access.

17  
18 The reference committee agreed that the AAFP should and does support a system of universal  
19 health care in which coverage equates to access and voted to reaffirm the resolution as current  
20 policy.

21  
22 **RECOMMENDATION: The reference committee recommends that Resolution No. 1006 be**  
23 **reaffirmed.**

24  
25 **ITEM NO. 7: RESOLUTION NO. 1007: AFFIRMING THE SAFETY AND LEGALITY OF**  
26 **ABORTION**

27  
28 RESOLVED, That the American Academy of Family Physicians affirm the legality of Roe v.  
29 Wade in the form of a policy statement, and be it further

30  
31 RESOLVED, That the American Academy of Family Physicians partner with the American  
32 College of Obstetricians and Gynecologists and related stakeholders in position papers to  
33 defend access to safe and legal abortion across the United States, and be it further

34  
35 RESOLVED, That the American Academy of Family Physicians will support the right of  
36 family physicians to provide medication abortions with mifepristone in their general family  
37 practices and oppose legislation restricting access, and be it further

38  
39 RESOLVED, that the NCCL will instruct its delegates to submit resolution "Affirming the  
40 Safety and Legality of Abortion" to the AAFP Congress of Delegates.

41  
42 The reference committee heard testimony, mostly in support of the resolution. Several speakers,  
43 including one abortion provider, spoke in support, with one suggesting that the resolution isn't  
44 necessarily supportive of abortion, but rather a recognition that it is a safe procedure. A member  
45 agreed, saying that the resolution is asking to affirm a procedure already in existence. Another  
46 member – an abortion provider – agreed, saying that she's spoken with many fellow family  
47 physicians reluctant to join the AAFP because of its lack of advocacy on abortion rights. Speakers  
48 opposing the resolution encouraged the AAFP to take a neutral stance, given that abortion is a  
49 personal decision.

50  
51 The reference committee members discussed whether the AAFP has the ability to affirm an  
52 existing legal decision – it does – but ultimately declined to adopt the first resolved clause because

1 they didn't feel compelled to affirm the decision's legality. The committee concurred with the  
2 recommendations in the last three resolved clauses.

3  
4 **RECOMMENDATION: The reference committee recommends that for Substitute Resolution**  
5 **No. 1007, be adopted in lieu of Resolution No. 1007 as printed below:**

6  
7 **RESOLVED, That the American Academy of Family Physicians partner with the**  
8 **American College of Obstetricians and Gynecologists and related stakeholders in**  
9 **position papers to defend access to safe and legal abortion across the United States,**  
10 **and be it further**

11  
12 **RESOLVED, That the American Academy of Family Physicians will support the right**  
13 **of family physicians to provide medication abortions with mifepristone in their**  
14 **general family practices and oppose legislation restricting access, and be it further**

15  
16 **RESOLVED, That this resolution be referred to the AAFP Congress of Delegates.**

17  
18 **ITEM NO. 8: RESOLUTION NO. 1008: DECLARATION OF PUBLIC HEALTH EMERGENCIES**  
19 **FOR REFUGEE, MIGRANT AND ASYLUM-SEEKER CARE**

20  
21 RESOLVED, That the American Academy of Family Physicians enlist other professional  
22 organizations and advocate that when federal and/or state governments declare an  
23 emergency which involves foreign-born individuals coming into the United States that they  
24 also declare a public health emergency to allow for emergency licensure of physicians to  
25 provide medical care to those individuals in affected states, and be it further

26  
27 RESOLVED, That the American Academy of Family Physicians adopt the California  
28 Academy of Family Physicians Toolkit on immigration called "Healthy Harbors for All  
29 Californians" to assist family physicians in caring for immigrant families and families  
30 separated at borders, and be it further

31  
32 RESOLVED, That the American Academy of Family Physicians work with other  
33 professional organizations to submit another joint public statement decrying current  
34 administration policies on immigrant care, detention, and family separation.

35  
36 Members in favor of the resolution reflected both compassion for refugees and other immigrants  
37 and personal experience as war refugees. One speaker urged the committee to reaffirm the work  
38 in California to support the needs of immigrating families on the U.S.-Mexican border. Another  
39 addressed the importance of supporting the network of local physicians who are struggling to  
40 provide care to immigrating families. Several spoke of the urgency to address the public health  
41 emergency.

42  
43 The reference committee agreed that the region was facing a public health emergency but did not  
44 see that such a declaration would permit emergency licensure exceptions. The Secretary of the  
45 Department of Health and Human Services may, under section 319 of the Public Health Service  
46 Act, determine that: a) a disease or disorder presents a public health emergency; or b) that a public  
47 health emergency, including significant outbreaks of infectious disease or bioterrorist attacks,  
48 otherwise exists. While such a declaration provides authority for grants and contracts; and  
49 conducting and supporting investigations into the cause, treatment, or prevention of the disease or  
50 disorder, it does not waive state licensure requirements. The reference committee recommends a  
51 substitute be adopted.



1 **RECOMMENDATION: The reference committee recommends that for Substitute Resolution**  
2 **No. 1008 be adopted in lieu of Resolution No. 1008 as printed below:**  
3

4 **RESOLVED, That the American Academy of Family Physicians adapt the California**  
5 **Academy of Family Physicians Toolkit on immigration called "Healthy Harbors for All**  
6 **Californians" to assist family physicians nationally in caring for immigrant families**  
7 **and families separated at borders.**  
8

9 **ITEM NO. 9: RESOLUTION NO. 1009: OPPOSE CRIMINALIZATION OF PHYSICIANS**  
10 **PROVIDING ABORTION CARE**

11  
12 RESOLVED, That the American Academy of Family Physicians publicly oppose any law  
13 which would criminalize physicians for providing abortion care, and be it further  
14

15 RESOLVED, That this resolution opposing the criminalization of physicians providing  
16 abortion care will be sent to the American Academy of Family Physicians' Congress of  
17 Delegates.  
18

19 The reference committee heard testimony from members both in support of this resolution. One  
20 delegate, speaking on behalf of the women's constituency, was an abortion provider herself and  
21 emphasized that abortion care is within the scope of family medicine and a very common  
22 procedure. A co-author of the resolution mentioned that policies like the criminalization of abortion  
23 providers keeps physicians from choosing family medicine as a specialty.  
24

25 The reference committee recognized that the AAFP cannot compel chapters to take action and  
26 chose to add the word "federal" to the first resolved clause in recognition of this and add clarifying  
27 language to ensure that the AAFP would consult with a state prior to any advocacy in opposition to  
28 any legislation in that state that would criminalize abortion providers.  
29

30 **RECOMMENDATION: The reference committee recommends that Resolution No. 1009 be**  
31 **adopted.**  
32

33 **ITEM NO. 10: RESOLUTION NO. 1010: FAIRNESS FOR FAMILY PHYSICIANS OF NON-US**  
34 **ORIGIN AND THEIR FAMILIES**  
35

36 RESOLVED, That the American Academy of Family Physicians advocate for the elimination  
37 of per country numerical limitation of permanent residency status for highly skilled  
38 employment-based immigrants, and be it further  
39

40 RESOLVED, That the American Academy of Family Physicians work with the American  
41 Medical Association and the Society of Hospital Medicine in the elimination of the country  
42 specific employment-based immigration limits.  
43

44 The reference committee heard testimony in support of the resolution. Delegates stated that the  
45 limitation on employment-based green cards caused a huge processing backlog and unfairly  
46 threatened the families of family physicians. One speaker said that green card wait times could  
47 result in non-citizen children of physicians being sent home after turning 21.

48 The reference committee found the testimony compelling but believed that they did not have  
49 enough information on this issue and the impact that the reforms could have on global health and  
50 the brain drain from other nations.  
51

1 **RECOMMENDATION: The reference committee recommends that Resolution No. 1010 not**  
2 **be adopted.**

3  
4 **ITEM NO. 11: RESOLUTION NO. 1011: KEEP LEGISLATORS FROM PRACTICING MEDICINE**  
5 **WITHOUT A LICENSE**

6  
7 RESOLVED, That the American Academy of Family Physicians condemns any interference  
8 by state or federal government that mandates a physician to present non-evidence based  
9 information to a patient, and be it further

10  
11 RESOLVED, That the American Academy of Family Physicians advocate against state laws  
12 that restrict the privacy of physician-patient-family relationships and/or that violate the First  
13 Amendment rights of physicians in their practice of the art and science of medicine, unless  
14 a substantial public health justification exists, by partnering with other organizations,  
15 formally releasing a statement and/or mobilizing state chapters to take action, and be it  
16 further

17  
18 RESOLVED, That the AAFP will advocate against state interference in the teaching and  
19 training of medical students and residents in the practice of evidence-based medical  
20 services.

21  
22 The reference committee heard testimony, all in support of the resolution. A number of state  
23 policies that ultimately restricted physicians' ability to practice abortion care and other forms of care  
24 were shared. A delegate speaking in support of the resolution recalled a story in which the state  
25 threatened to pull money from a grant program once it found out it was funding trans youth care.

26  
27 The reference committee recognized the first resolved clause is current policy when they reviewed  
28 the existing AAFP policy on [Infringement on Patient Physician Relationship](#), which opposes  
29 legislation that infringes on the content or breadth of information exchanged within the patient  
30 physician relationship. Regarding resolved clause two, it also recognized that the AAFP cannot  
31 compel chapters to take action against a specific policy, but recommended accommodations in the  
32 last resolved clause to encourage the AAFP to collaborate with relevant chapters to oppose  
33 problematic legislation.

34  
35 **RECOMMENDATION: The reference committee recommends that for Substitute Resolution**  
36 **No. 1011 be adopted in lieu of Resolution No. 1011 as printed below:**

37  
38 **RESOLVED, That the AAFP will collaborate with the chapter, if requested, to**  
39 **advocate against state interference in the teaching and training of medical students**  
40 **and residents in the practice of evidence-based medical services.**

41  
42 **ITEM NO. 12: RESOLUTION NO. 1012: SINGLE PAYER AS THE SYSTEM THAT PROVIDES**  
43 **EQUITY AND HEALTH CARE AS A HUMAN RIGHT**

44  
45 RESOLVED, That single payer is the only system amongst those studied by the American  
46 Academy of Family Physicians that ensures an equitable system and delivers health care  
47 as a human right for all, and be it further

48  
49 RESOLVED, That single payer be the preferred system of the American Academy of Family  
50 Physicians in efforts for health care reform, and be it further

51  
52 RESOLVED, That this resolution be referred to Congress of Delegates.

1  
2 The reference committee heard testimony from one speaker in support of the resolution. A member  
3 referenced the [Health Care for All](#) universal coverage document and stated that single payer will  
4 perform the best of all options cited in the framework. He made special note to emphasize that no  
5 one will lose their physician under a single payer system.

6  
7 The reference committee recognized the importance of the AAFP's Health Care for All policy  
8 statement. After discussion, the committee recommended that this resolution not be adopted.

9  
10 **RECOMMENDATION: The reference committee recommends that Resolution No. 1012 not**  
11 **be adopted.**

12  
13 **ITEM NO. 13: RESOLUTION NO. 1013: SUPPORT BREASTFEEDING MOTHERS IN THE**  
14 **WORKPLACE**

15  
16 RESOLVED, That the American Academy of Family Physicians advocate for the  
17 enforcement of current legislation as well as additional legislation that supports the ability of  
18 working mothers to breastfeed, and be it further

19  
20 RESOLVED, That the American Academy of Family Physicians advocate for amendments  
21 to current legislation to remove exclusions for specific fields.

22  
23 The reference committee heard testimony from members in support of strengthening the laws  
24 which call for support and clean accommodations for breastfeeding mothers in the workplace and  
25 ending exceptions for certain professions including teachers, nurses, retail, sales and others. One  
26 speaker urged the reference committee to revise the resolved clause to change "working mothers"  
27 to "working parents" and breastfeeding to include chestfeeding.

28  
29 The committee concurred with the testimony heard and recommended adopting a substitute to  
30 clarify intent and add working parents who chestfeed.

31  
32 **RECOMMENDATION: The reference committee recommends that Substitute Resolution No.**  
33 **1013 be adopted in lieu of Resolution No. 1013 as printed below:**

34  
35 **RESOLVED, That the American Academy of Family Physicians advocate for**  
36 **amendments to and enforcement of the "Break Time for Nursing Mothers" law to**  
37 **remove exclusions for specific employment fields and include all breast or chest**  
38 **feeding parents.**

39  
40 **ITEM NO. 14: RESOLUTION NO. 1015: RESOLUTION TO PREVENT NUCLEAR WAR**

41  
42 RESOLVED, That the American Academy of Family Physicians advocate for the United  
43 States government to lead a global effort to prevent nuclear war by renouncing the option of  
44 using nuclear weapons first, ending the sole, unchecked authority of any president to  
45 launch a nuclear attack, taking United States nuclear weapons off hair-trigger alert,  
46 cancelling the plan to replace its entire arsenal with enhanced weapons, and actively  
47 pursuing a verifiable agreement among nuclear-armed states to eliminate their nuclear  
48 arsenals.

49  
50 The reference committee heard testimony from a delegate in support of the resolution to prevent  
51 nuclear war. The reference committee discussed the current AAFP Nuclear Disarmament policy  
52 adopted by the 2015 Congress of Delegates which reads as follows: "The American Academy of

1 Family Physicians support the elimination of nuclear weapons.” They also read the policy on  
2 Nuclear, Biological and Chemical (NBC) Warfare adopted in 1987 and reaffirmed in 2016 which  
3 states: The American Academy of Family Physicians endorses the concept of worldwide, verifiable  
4 moratorium on testing, production and deployment of nuclear, biological, and chemical weapons.  
5 After considering whether to revise the resolution’s resolved clause, the reference committee  
6 decided to recommend a substitute.

7  
8 **RECOMMENDATION: The reference committee recommends that Substitute Resolution No.**  
9 **1015 be adopted in lieu of Resolution no. 1015 as printed below:**

10  
11 **RESOLVED, That the American Academy of Family Physicians advocate for the**  
12 **United States government to lead a global effort to prevent nuclear war.**

13  
14 **I wish to thank those who appeared before the reference committee to give testimony and**  
15 **the reference committee members for their invaluable assistance. I also wish to commend**  
16 **the AAFP staff for their help in the preparation of this report.**

1 Respectfully Submitted,  
2  
3  
4  
5  
6 

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Hershey Jayasuriya, MD – CHAIR  
7  
8 Noureen Akbar, MD – IMG  
9 Laura Kaplan-Weisman, MD – LGBT  
10 Jessica Richmond, MD, FAAFP– New Physicians  
11 Nicole Shields, MD – Women  
12 Srikala Yedavally-Yellayi, DO – Minority  
13 Lauren Williams, MD (Observer)