



Student 2 Agenda and Resolutions

National Conference of Family Medicine Residents and Medical Students
July 29-31, 2021 – Kansas City, MO

<u>Item No.</u>	<u>Resolution Title</u>
1. Resolution No. 201	Stance on Medical Student Mental Health
2. Resolution No. 202	Insurance Reimbursement for Community Based Organizations Providing Services to Meet Patients' Social Determinants of Health
3. Resolution No. 203	Marriage Equality for People with Disabilities
4. Resolution No. 204	Advocating for Public Trust in the COVID-19 Vaccines
5. Resolution No. 205	AAFP to Encourage Culturally-Relevant Lifestyle Medicine Curriculum Within Training Programs with Goal to Improve Health Equity Within Underserved Communities

1 **Student RESOLUTION NO. 201**

2
3 **Stance on Medical Student Mental Health**

4
5 Introduced by: Brent Dudenhoeffer
6 Kelly Dougherty
7 Abrea Mizer
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9
10 WHEREAS, one-third of medical students experience depression with low treatment rates;
11 burnout and declining satisfaction are strongly associated with reductions in professional work
12 effort; and can undermine medical students' professional development, place patients at risk
13 and contribute to suicidal ideation, and
14

15 WHEREAS, the prevalence of depression or depressive symptoms among medical students is
16 27.2% and suicidal ideation is 11.1%; and approximately 50% of medical students experience
17 burnout; and medical students are three times more likely to commit suicide than the general
18 population, and
19

20 WHEREAS, research of physicians' mental health has shown stresses that begin in medical
21 school tend to continue throughout the years of practicing medicine, and
22

23 WHEREAS, medical students are less likely to look after their personal concerns or to seek
24 mental health treatment due to fears of stigmatization, confidentiality and the impact such
25 treatment may have on their future careers, and
26

27 WHEREAS, only 22% of depressed students used mental health counseling services, the most
28 frequently cited barriers to using these services were lack of time (48%), lack of confidentiality
29 (37%), stigma associated with using mental health services (30%), cost (28%), fear of
30 documentation on academic record (24%) and fear of unwanted intervention (26%), now,
31 therefore, be it
32

33 RESOLVED, That the American Academy of Family Physicians encourage medical schools to
34 have increased access to face-to-face and, when not available, remote mental health services
35 available to students, and be it further
36

37 RESOLVED, That the American Academy of Family Physicians encourage medical schools to
38 continue to abide by Health Insurance Portability and Accountability Act and Family Educational
39 Rights and Privacy Act regulations in regard to counseling services provided to medical
40 students.

1 **Student RESOLUTION NO. 202**

2
3 **Insurance Reimbursement for Community Based Organizations Providing Services to**
4 **meet Patients' Social Determinants of Health**

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6 Introduced by: Jasmine Chaparro
7 Rommel Morales
8 Wendy Silva
9 Derek Southwick
10 Jill Thiede

11
12 WHEREAS, Social determinants of health (SDOH) impact patient health and outcomes more
13 than clinical visits alone, yet health care systems are often not optimized to meet patient SDOH
14 needs, and

15
16 WHEREAS, community-based organizations (CBOs) are specialized to provide services to meet
17 these needs and often receive overwhelming numbers of referrals from health care systems
18 without proper financial compensation, staffing support, or resources, and

19
20 WHEREAS, without adequately supported CBOs, patients may be turned away from receiving
21 the food, housing, technology, and other social services that they need in order to live healthy
22 lives, leading to unnecessary hospitalizations, exacerbations of chronic illnesses, and worse
23 downstream health outcomes that could have been avoided, and

24
25 WHEREAS, during certain critical times, such as the COVID-19 pandemic and even summer
26 months for pediatric populations who otherwise may rely on school lunches for sufficient
27 nutritious food, children, families, and communities must rely heavily on CBOs for services in
28 order to avoid health exacerbations, such as malnutrition, diabetes, hypertension, reduced
29 immunity, and infectious diseases, and

30
31 WHEREAS, patients, health centers, CBOs, and payors all benefit from the triple aim of
32 improving health outcomes, patient satisfaction, and reducing cost if CBOs are supported in
33 providing SDOH services, including healthy food, supportive and transitional housing, and
34 technology, to patients; and relevant stakeholders are already engaging in innovative
35 partnerships nationwide to address this gap, now, therefore be it

36
37 RESOLVED, That the American Academy of Family Physicians support the establishment of
38 distribution centers for social services in vulnerable areas and support existing community
39 organizations that are already in place, and be it further

40
41 RESOLVED, That the American Academy of Family Physicians should advocate for insurance
42 reimbursement for all community-based organizations providing services that prevent illness
43 and promote health, and be it further

44
45 RESOLVED, That these reimbursed services include services that address a wide range of
46 Social Determinants of Health, which are typically not reimbursed despite their documented
47 benefit in improving health outcomes.

1 **Student RESOLUTION NO. 203**

2
3 **Marriage Equality for People with Disabilities**

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5 Introduced by: Amy Hoffman
6 Rashaad-Dreana Jett
7 Hannah Spotts
8 Pratiti Roy
9 Zakary Newberry

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11 WHEREAS, Eight million elderly and disabled Americans rely on the Supplemental Security
12 Income (SSI) for monetary support and Medicaid health insurance, with 60% reporting SSI as
13 their sole source of income, and

14
15 WHEREAS, many individuals with disabilities who receive SSI face forfeiture or reduction of
16 benefits and Medicaid health insurance if they get married, with the average monthly benefit
17 disproportionately increasing to \$1157 for married couples compared to \$787 for an individual,
18 and

19
20 WHEREAS, individuals who receive SSI cannot have assets exceeding \$2,000 for an individual
21 and \$3,000 for a couple without losing benefits including Medicaid health insurance, and

22
23 WHEREAS, the American Academy of Family Physicians policy states that health care,
24 including timely, quality, and affordable access to essential services, is an intrinsic right, now,
25 therefore be it

26
27 RESOLVED, That the American Academy of Family Physicians support that marriage be
28 accessible to people with disabilities without penalty of losing Supplemental Security Income
29 (SSI) and Medicaid health insurance, and be it further

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31 RESOLVED, That the American Academy of Family Physicians support the Supplemental
32 Security Income Restoration Act of 2021 (H.R. 3824/S. 2065) which will redefine economic
33 inclusion criteria of the Social Security Act, including but not limited to the expansion of
34 Supplemental Security Income eligibility and repeal of marriage penalties.

1 **Student RESOLUTION NO. 204**

2
3 **Advocating for Public Trust in the COVID-19 Vaccines**

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5 Introduced by: Wendy Silva
6 Alejandro Blitch
7 Eduardo Torres
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9 WHEREAS, The American Academy of Family Physicians (AAFP) passed a resolution
10 advocating for a safe and effective vaccine with data transparency and accessibility regardless
11 of pay and recognized that the success of the COVID-19 vaccines depends on the acceptance
12 of the COVID-19 vaccine by a large proportion of the American population, and
13

14 WHEREAS, the COVID-19 vaccines have been proven safe and effective, yet, with easy
15 accessibility and availability only 49.5% of the U.S. population has been vaccinated, which
16 remains significantly lower than the goal of 80-100% population vaccination goal to achieve
17 herd immunity given the vaccine has been widely available for several months now, and
18

19 WHEREAS, the AAFP recognizes that family medicine provides the care for America's
20 underserved rural and urban populations which are being disproportionately affected by COVID-
21 19 and that patients tend to look to and trust their primary care providers for health guidance,
22 and
23

24 WHEREAS, the Centers for Disease Control and Prevention recognized an increased risk for
25 severe COVID-19 morbidity and mortality in rural and underserved counties compared to urban
26 counties, and
27

28 WHEREAS, recent spikes in COVID-19 due to new variants have mostly affected the
29 unvaccinated population, but is also starting to lead to breakthrough cases in the vaccinated
30 population, now, therefore be it
31

32 RESOLVED, That the American Academy of Family Physicians publicly support and promote
33 the safety and efficacy of COVID-19 vaccines, and be it further
34

35 RESOLVED, That the American Academy of Family Physicians publicly denounce the
36 misinformation surrounding the COVID-19 vaccine, and be it further
37

38 RESOLVED, That the American Academy of Family Physicians advocate for all health care
39 providers to receive the COVID-19 vaccines unless they are unable to receive the vaccine due
40 to a medical condition, and be it further
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42 RESOLVED, That the American Academy of Family Physicians recommend that schools,
43 colleges, and universities require their students be vaccinated before returning to in-person
44 schooling, and be it further,
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46 RESOLVED, That the American Academy of Family Physicians develop informational posters,
47 pamphlets, and media that target rural/underserved populations, that local family medicine
48 physicians can propagate throughout their communities.

1 **Student RESOLUTION NO. 205**

2
3 **AAFP to Encourage Culturally-Relevant Lifestyle Medicine Curriculum Within Training**
4 **Programs with Goal to Improve Health Equity Within Underserved Communities**

5
6 Introduced by: Hannah Vuong

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8 WHEREAS, lifestyle factors including nutrition, physical activity, substance use, and emotional
9 well-being are foundational to patient health, and

10
11 WHEREAS, the American Academy of Family Physicians (AAFP) acknowledges the importance
12 of preventative medicine and lifestyle interventions including diet, physical activity, and
13 emotional well-being in prevention and management of conditions seen in family medicine, and

14
15 WHEREAS, the AAFP aims to enact health equity across socioeconomic backgrounds, race,
16 and diverse patient experiences, and

17
18 WHEREAS, lifestyle risk factors disproportionately affect underserved and vulnerable
19 populations, now, therefore be it

20
21 RESOLVED, That the American Academy of Family Physicians actively encourage lifestyle
22 medicine including food as medicine curriculum in medical school and residency training to
23 promote holistic patient health, and be it further

24
25 RESOLVED, That the American Academy of Family Physicians encourage a dynamic,
26 culturally-relevant lifestyle medicine curriculum focused on practice within underserved
27 communities.