

Top 10 stories from the November 2021 AMA Special Meeting

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Nearly 700 physicians, residents and medical students gathered for the November 2021 AMA Special Meeting of the AMA House of Delegates to consider a wide array of proposals to help fulfill the AMA's core mission of promoting medicine and improving public health. As they have done since the global pandemic was declared last year, the delegates met virtually.

Here are the top 10 news stories from our coverage of the meeting—in no particular order.

AMA president: Physicians are leading “an army against the virus”

A former career officer in the U.S. Air Force and the Air National Guard, Gerald E. Harmon, MD, recognized the strained looks he saw in the hospital, working with young physicians and residents as COVID-19 ravaged his community hospital in Georgetown County, South Carolina, this past summer.

“The fear and weariness in young clinicians’ faces was not unlike what I witnessed in the medical arena in Iraqi Freedom and Enduring Freedom after 9/11—I’d call it battle fatigue,” Dr. Harmon said at the opening session. “Like combat, the unrelenting demands of responding to COVID patients has led to physical and emotional exhaustion and pushed physicians and our entire health care workforce to the breaking point.” (Watch or read Dr. Harmon’s speech.)

Patients still trust doctors. Learn why doctors count on the AMA.

While the public’s trust in many institutions has waned during the COVID-19 pandemic, people still trust their doctors—and doctors trust the AMA. Executive Vice President and CEO James L. Madara, MD, provided proof of this trust in an address during the opening session of the AMA Special Meeting, and he explained that the AMA had earned that trust by being physicians’ powerful ally in patient care.

“Trust in physicians was shown to be high among all groups, demographics and political affiliations,” Dr. Madara told delegates. “Physicians trust us to give voice to their concerns, and to help mitigate the challenges they face—from PPE shortages, to financial stress, to increasing regulatory burdens.” (Watch or read Dr. Madara’s speech.)

Collaboration needed to end spread of public health misinformation

The AMA will work with relevant health-professional societies and other stakeholders to combat public health disinformation disseminated by health professionals in all forms of media, and to address disinformation that undermines public health initiatives.

“Physicians are among the most trusted source of information and advice for patients and the public at large, which is why it’s so dangerous when a physician or other health care professional spreads disinformation,” said AMA Trustee Jesse M. Ehrenfeld, MD, MPH.

“While disinformation has run rampant during the COVID-19 pandemic, we know unscientific claims are being made about other health conditions and other public health initiatives are being undermined,” he added. “We are committed to doing everything we can to stop the spread of disinformation and providing accurate, evidence-based information—the lives of our patients and the public depend on it.”

6 ways doctors can use their voices to help science get heard

During the November 2021 AMA Section Meetings' plenary session, seven outstanding AMA members focused on the need to elevate physician voices to protect patients and the nation's health.

The pandemic has revealed so much about the expertise and resilience of our nation's physicians—but it has also revealed the need, now more than ever, for amplifying their voices. Special guest Peter Hotez, MD, PhD, discussed his experiences dispelling anti-vaccine myths as a vaccinologist and the father of a child with autism. (Watch the full plenary session.)

Over 29 million still uninsured. Here's how to help cover them.

Passage of the American Rescue Plan Act, COVID-19 relief legislation enacted earlier this year, has shifted the dynamics of U.S. health care coverage by increasing the generosity of and expanding eligibility for financial help to buy health insurance via Affordable Care Act (ACA) marketplaces. But additional steps can be taken to make affordable health insurance available to many more of the estimated 28.9 million who remain uninsured.

"We find ourselves in a time that we can cover the remaining uninsured in this country," AMA Trustee David H. Aizuss, MD, said in a statement. "By closing the coverage gap, fixing the family glitch, and helping workers and their families who are facing unaffordable employer coverage, most of the nation's uninsured will be eligible for ACA financial assistance, either the form of premium tax credits or Medicaid/CHIP. We can capitalize on this financial help available to cover the remaining uninsured."

Sweeping plan outlined to address maternal health care inequities

Improving maternal health care among people from historically marginalized communities means raising awareness about the health impacts of racial and ethnic inequities, extending public health care programs to cover new mothers for 12 months after the end of pregnancy, and investing in research and outreach.

Two key “steps are expanding access to affordable health insurance and eliminating racial and ethnic inequities in care and outcomes,” says a report that delegates adopted. For example, Black women are much more likely than white women to die from pregnancy-related causes or experience severe maternal morbidity.

“The AMA is committed to being a leader on maternal mortality prevention, and the nation’s physicians have charged the AMA to prioritize the elimination of racial and ethnic inequalities in maternal health care while increasing access to affordable health insurance for new mothers,” said AMA Immediate Past President Susan R. Bailey, MD. “As a first step, the AMA acknowledges the roles that structural racism and bias play in negatively impacting health care, including maternity care.”

How policing can benefit from medicine’s evidence-based approach

Both police officers and physicians often face high-pressure situations in which they must make time-sensitive, life-or-death decisions and “it may benefit law enforcement to borrow some of the strategies and practices that the medical profession uses to ensure that its members provide safe and effective care,” says an AMA Board of Trustees report whose recommendations were adopted at the Special Meeting.

“The AMA is strongly invested in the betterment of public health and remains committed to advocating for actionable reform to eliminate excessive police violence in historically marginalized communities,” said AMA Trustee Willie Underwood III, MD, MSc, MPH. “We value the opportunity to contribute the scope of the AMA’s expertise to the national conversation on policing—especially as it relates to improving the health of our patients and the overall health of the nation.”

AMA sets out to strengthen U.S. public health systems

The nation's public health infrastructure has also been threatened by high rates of staff turnover as well as obsolete data-collection and reporting methods. These obstacles can lead to delayed detection and response to public health threats.

"Our country's public health systems are woefully underfunded and lack the workforce and data infrastructure and interoperability needed to promote health and protect against threats and emergencies," Dr. Ehrenfeld said. "The COVID-19 pandemic has resurfaced the urgent need to improve our nation's public health infrastructure and ensure public health agencies have the authority to implement evidence-based measures necessary to keep the population safe from disease and save lives."

Add rural medicine exposure in training to boost country doctors

One of in five Americans lives in a rural community, areas that face physician shortages across medical specialties. The AMA adopted policy to, among other things, encourage the Accreditation Council for Graduate Medical Education review committees to consider adding exposure to rural medicine as appropriate. The aim is to encourage the development of rural program tracks in training programs and increase physician awareness of the conditions that pose challenges and lack of resources in rural areas.

“There is a clear, urgent need for more physicians to serve in rural America to help close existing gaps in patient care,” said AMA Trustee Scott Ferguson, MD. “The AMA is dedicated to addressing the root causes of health inequities for the rural patient population, and this policy is one step closer to removing those obstacles to care and achieving optimal health for all.”

AMA seeks more help for medical students, residents with disabilities

Nearly one in 20 medical students has a disability, and the share of medical students with disabilities rose two percentage points from 2016–2019. Yet despite protections afforded by the Americans with Disabilities Act, medical students and resident physicians with disabilities face structural and cultural barriers to success.

“The AMA strongly supports efforts to increase the diversity of our future physician workforce,” said AMA Trustee Drayton Charles Harvey, a fifth-year MD-PhD student. “By examining the roadblocks that medical students and trainees with disabilities often face, we can prioritize inclusion, eliminate stigmatization, and change the medical education experience.”

In other action, the AMA called for:

- | MDs and DOs to decide who gets medical vaccine exemptions.
- | More transparency on loan forgiveness for medical student-loan debt.
- | Protecting medical students and residents who call out unsafe working conditions.

To catch up with these items and other news from the House of Delegates gathering, read our complete highlights from the November 2021 AMA Special Meeting.