AMA member David J. Welsh, MD, has been a general surgeon in private practice in Batesville, Indiana, for more than 30 years. Throughout his career, Dr. Welsh has taken on many leadership roles within the AMA and the Indiana State Medical Association. In those roles, he was taught about advocacy and how physicians can make a difference. Now he is taking those experiences to the government and running for state representative in Indiana.

As Dr. Welsh takes on this new chapter in his career, he took time to talk with the AMA about his goals and how his roles in leadership and advocacy will help in his run for office. Listen to more of this conversation with Dr. Welsh on Apple Podcasts, Spotify or anywhere podcasts are available.

AMA: What was your decision behind running on the republican ticket for state representative in Indiana for district 55 at the primary May 3?

Dr. Welsh: As I learned more about some of the rules, regulations and legislation that rule our lives—and can sometimes make things more difficult—I wanted to get my voice to the legislators. I have been working from an advocacy standpoint from the training I got from my state association and from the AMA. It was just logical to continue that and up the ante if you will.

Years ago, I took on a personal journey with advocacy where—I called it adopting an elected official. I tried to get close to—and work with—state and federal officials, congress men and women, state senators and state representatives. The state representative who I would hopefully replace, I've worked with her for 10 years and we see eye to eye on a lot of issues.

When I learned that she was not going to go for reelection, I thought, "I need to stop going to the state house and telling them what I think and what my other colleagues think. I need to go there and tell the other legislatures what we think, what I think." It's like the story of rescuing people drowning in a river. You can go out and you can rescue them, or you can go upstream and find out why they're falling in.
So, I'm going to go upstream and see if I can help.

The other thing I learned from advocacy is you can go and testify, you can send letters, you can make phone calls, and all those are treated evenly when you're in a session at the state house. If you're an elected official, there's a higher level of conversation among the elected officials. I learned that from another colleague who got elected two years ago, Brad Barrett, MD, who has spoken at the AMA and at the Indiana State Medical Association. I learned from him that if his voice is in that room, it can carry more weight. And I thought, "That's taking advocacy to the next level." When the opportunity became available, I said, "OK, I've got to stop suggesting and telling other folks what to do. I need to go there and do it myself."

AMA: How have your various leadership positions like serving on the AMA Council on Science and Public Health helped get you to this point?

Dr. Welsh: They have helped immensely. At the Indiana State Medical Association, I was sort of tricked into getting involved. Someone got ill and couldn't fill a spot in the district. "Oh, it's not much to it," they said, "Just go ahead and fill in because Dr. So-and-so is going to be out for a while.”

Next thing I know I'm on the board of trustees and moving up the chain, becoming board chair, and then president. And I learned so much about our profession, the inner workings of the profession and agencies, how the rules are made and how to change the rules. When I was board chair at the state association was when the first Healthy Indiana Plan was put forth in Indiana. That's a plan to help those folks who don't qualify for Medicaid and can't afford regular insurance. And that was just a godsend to a lot of folks in my rural setting, so I learned firsthand we can make a difference. We can do things to help those around us. I also learned—starting at the board level at my state—that you can get the best product accomplished the more people you have working together. I carried that over when I was fortunate enough to be active at the AMA at different levels. I remember the first meeting when I heard about this group called, the Organized Medical Staff Section [OMSS]. It was at the convention and I was trying to ask the staff person at the AMA, "Tell me about this OMSS." And they said, "Just go inside and find out." Well, I went inside, and boy did I find out—I connected with colleagues from across the nation. At the state level, and particularly at the AMA, I learned how important it is to listen, how important it is to get the temperature in the room, and work with the folks and these different levels in the organization. I love OMSS—the people on those governing councils. I've learned so much and they will do anything they can for you. That's what I found at the House of Delegates—our colleagues will go out of their way to help you any way they can. One of my other hats I wear is that I'm a county health officer, and of course busy with COVID-19. One Sunday night, I get a call from the health officer in the next county. He was beside himself. He had some long-term care facilities that were just being overwhelmed by COVID, people were dying, and he wasn't sure what to do. And it was Sunday evening, so he was having trouble getting ahold of somebody at the state level. So I said, "That sounds like something right up the Council on Science and Public Health's
alley." I contacted members of the council. Within 35 minutes, I got a very special phone call from a liaison from the Centers for Disease Control and Prevention who deals with long term care facilities and he helped me get resources to this rural county's long-term care facilities that were being overrun. Each thing I've done at the AMA I've just been amazed with, and it's encouraged me to try that next step. And each next step goes beyond my expectations, and it helps me do my other work—whether it's taking care of patients or working with folks at the state level. It's an ongoing process.

AMA: Why is it important to have physicians in higher leadership roles?

Dr. Welsh: The last two years have shown us that if people are making choices and making decisions for the rest of us—and they don't have updated and accurate information—they're not going to make the best choices for us. For example, when the opioid crisis was rising across the country—including Indiana—the Indiana State Medical Association decided to do something, and put together a task force about how to deal with it in our state. We thought we did a really good job, and we put together some plans and we were going to propose it to the state to see how we could help curb this crisis. Well, we had some criticism from our first draft, and we had not involved some folks who deal with chronic pain management. We had opened the door and invited people to join us, and they just had not joined us. But once they said, "We don't like what you've put together for these reasons," our first response was, "Great. Join us. Join our group so that we can make a better product, a better proposal, to help the citizens of Indiana." They did. And we came up with a much better plan that was proposed to—and accepted by—the state. That's an example that I'm going to carry on if I'm elected: Make sure that I reach out to those who are affected, those who have good information. And because of the complex nature of medicine, we need to have physicians involved in the legislative process, otherwise we're going to have rules and regulations that are going to make things more difficult, not better.

AMA: What are some health care goals that you hope to accomplish or address with this position?

Dr. Welsh: There's a lot of determinants of health that need help in our area. As county health officer, I know of some of the challenges. I know of some of the deficits in the area that need to be addressed. Flint, Michigan, isn't the only place dealing with clean water issues. There's also land management. There's dealing with sewage treatment plants. There's a lot of basic living needs and necessities that need help in some of the rural areas. And trying to connect citizens to those.

AMA: How do you effectively reach the community in Indiana to let them know about your goals, but also hear about their needs and wants?

Dr. Welsh: The best part of my job as a physician is getting to talk to patients and family members and going to the local sporting events at the high schools. I'm a doc on the sidelines and I help out, so I get to talk to a lot of individuals and find out what they're thinking. I've actually been on a listening
In the last two months, I’ve been touring to ask: What are their needs? What are their thoughts? What are their priorities? In addition, I’ve been reaching out to focus groups, to the schools, to first responders, and to law enforcement to learn about their challenges. I was fortunate to be on the AMA Ambassador Steering Committee, where I learned a lot about social media from my colleagues. They were very patient. They taught me dos and don'ts. And I’ve been trying to use those tools and those instructions in my journey to run for election. In this area, Facebook and Twitter seem to resonate with a lot of the organizations and the citizens. I can talk to individuals, groups, neighborhoods, organizations, and I’ve already started to attend some of those meetings to listen, to learn, and to talk to them about my plans. And I’m pleased to say that so far, it seems to be resonating well.