Aletha Maybank, MD, MPH, on the AMA's work to advance health equity

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In today’s episode of Moving Medicine, AMA Chief Experience Officer Todd Unger talks with AMA Chief Health Equity Officer Aletha Maybank, MD, MPH, about the AMA’s critical work to advance health equity in 2022.

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Speaker

- Aletha Maybank, MD, MPH, chief health equity officer, AMA

Transcript

Unger: Hello, this is the American Medical Association's Moving Medicine video and podcast. Today we're joined by Dr. Aletha Maybank, the AMA's senior vice president and chief health equity officer in New York, to discuss AMA's critical work in advancing health equity. I'm Todd Unger, AMA's chief experience officer in Chicago.

Dr. Maybank, it's great to have you back. I know, I'm going to ask you to think pre-COVID, way back to when you first started back in 2019, when the AMA first established its Center for Health Equity. I don't think anybody could have predicted what was coming with a pandemic and how that was going to amplify so many inequities in health care. Why don't you start off by talking about how AMA has supported COVID-19 equity work and strategies throughout the pandemic?

Dr. Maybank: Great and hi Todd, good to be back on the show. And congratulations to all the success that you've had, I think in just amplifying and communicating with physicians and other health
providers across the country. So, just really thank you for the work and your efforts. As you said, I had no sense that this was going to happen, as it relates to COVID and it's definitely centered attention on inequities and equity that's been on one end really kind of helpful for the work in elevating the platform. And then on the other end, just really this tremendous sense of urgency and demand to make sure that we're doing something, we're in the right place and we're showing up in the ways that we need to.

It's been challenging but I would say over the course of especially this last year of 2021, the team and the center, we participated in hundreds of presentations and panels and events from across the national health care ecosystem and popular media just to really, one, put our footprint out there, I think as AMA to say that this is in a space that we are and we are here to help. You say to kind of be the physicians, powerful ally in this space and figuring out best ways to be responsive to COVID-19. We were able to really continue and expand our prioritizing equity series on YouTube. That brings experts together in the space of equity ranging from a whole bunch of topics of people with disabilities, Latinx communities, LGBTQ communities, talking about trustworthiness and vaccine equity.

At the height of the pandemic, we actually had this opportunity to meet with the White House COVID-19 Health Equity Task Force to advise them on some equitable strategies for preparedness and response, especially as it related to physicians and the health care community. And then lastly is, is not the last and only thing but one of the other, I think big contributions that we've been having is really thinking about health care transformation and in, at the intersection of equity and emergency preparedness and response. So we've partnered with the American College of Preventive Medicine, through a CDC funded opportunity to help support physicians of color across the country to one really document what are the equity strategies that they have been using over this particular time? So there's a lot that's been happening and on the kind of radar out there for us as AMA.

Unger: I remember when the pandemic first started and you were one of the first folks we spoke to, and this issue about the need for more race and ethnicity data, not just in vaccine distribution, but this was kind of way before that. And just understanding like the numbers. Can you talk a little bit about, as this has become more in focus, what have you learned about the data and what have you been able to kind of drive forward in terms of awareness of why this is so important?

Dr. Maybank: Yes. I mean, I think we have learned, we've had this tremendous opportunity at this time to really name the importance of having systems infrastructure, the will and the imperative to collect race and ethnicity data. We can't just leave it to the side. We can't just leave it to the side. We can't just have all of this missing data, not only missing data inaccurate data. And we've been working with, larger entities, like the Association of American Medical Colleges, as well as ACGME to kind of really think through how do we strengthen how we do as institutions collect race and ethnicity data and therefore influencing really the larger health care ecosystem. But also I think it's just really important that we recognize that,
AMA through our policy and our House of Delegates and membership, supports the consider of race and ethnicity as a marker for increased disease, in the allocating scarce resources in this time of COVID and for treatments of COVID just due to the historical context of racism.

However, we know that race and ethnicity should not be used only as a proxy for biology and genetics. It's a social construct. It changes over time, it will continue to change. And so we have to really be conscious of that. And so it's not to say that we don't want race and ethnicity data to be collected and analyzed. It should be, it needs to be, but we also need to make sure and recommend that clinicians understand and focus on the experience of racism and people’s lives. This system that we know discriminates and excludes many people and therefore harms. And we’ve put forward policies that really focus on, the valuable opportunities that we have in resource I mean, in research kind of what data hospitals need to collect in other organizations. We actually had this amazing opportunity through one of my team members, Fernando De Maio, to contribute to Robert Wood Johnson Foundation’s National Commission to transform public health data systems.

And it was really grounded in principles of truth and racial healing. And they were tasked to identify what changes need to happen in our data systems across the country to better position us, to really understand these other structural drivers that we know impact health. And then we also released a data report as a center for health equity and the AMA that really looked at the experiences of black and Latinx and Indigenous positions throughout the early part of the pandemic, and really noted, that they are really experiencing great amounts of stress and burnout.

**Unger:** We have a lot to learn, and on that point, so much of the work around equity begins with education, both to improve health literacy and increased physicians knowledge about social determinants of health. What are we doing to help educate physicians and patients so that more people can achieve optimal health?

**Dr. Maybank:** Yes and thanks Todd for that question. And I think the way that the first part of how you frame that in terms of the context of literacy is how do we educate more physicians? Literacy is a there’s a power dynamic in it. And I think that we, as the physician community really has to take on this concept and context of health literacy and the responsibility of it. The rest of the population doesn’t go to med school in the way that we do. And so if folks aren’t understanding the information that we’re putting forward, then that’s upon us as a health care and physician community to figure out how to break it down better and to understand. You know very well, marketing and communications is key, to helping support people, to understand information and to buy into information.

And so that’s upon us to do, I think, as a health community. And we have to change that narrative to shift away that, it’s about how do we help patients or put the responsibility upon patients solely to understand health information. And so, I think we’ve released definitely several communication documents specifically as it relates to the equity, whether it’s the strategic plan that came out as well as the narrative guide to understand better these power dynamics that really impact how people are
able to digest and take up information. We have also worked really to support unequipped physicians and other health care providers through our resources on the Ed Hub, on our AMA site to get more information. And we're collaborating with partners such as the American College of Radiology and Stanford Healthcare, Howard Brown Health, Fenway Institute, COVID Black to really develop a series of modules again through our AMA Ed Hub.

And we actually now have 26 health related and equity related specifically modules that are covering topics from the use of race and medical research and equities and telemedicine, and just overall, experiences of inequities that both physicians and pharmacists actually are experiencing. We are releasing quality and safety and equity modules this coming spring. And we're learning a lot, in the opportunity to bring other leaders together, to learn about experiences of what's happening across the country. How are they leading with an equity lens or an anti-racism lens? And we're partnering with the Groundwater Institute to help really train around these ideas around anti-racism work and just build a sense of community and confidence that we think is really important to lead in this work. Because oftentimes people feel isolated or they're fearful to lead and really engage in this work of equity and anti-racism.

**Unger:** We mentioned earlier in your comments, there is so much that we've learned, I think, through talking to so many different physicians that there's the part of the work and the challenges that we face. And then there's the entire communications part of that. And that's something your team has been really busy working on over the past couple of years. You also mentioned the work that you did on the strategic guide that was launched earlier last year and kind of give a roadmap for the work that you're really looking to achieve. Talk to us a little bit about kind of where you stand in that roadmap and what you see as kind of the key tent pole kind of things that you'll be looking at this year beyond what you've already mentioned.

**Dr. Maybank:** Yes so there's been a lot. And so I would say, the big thing was releasing the plan itself. I think the next thing, as I mentioned was the guide, as a reminder, there are the kind of the five approaches to this guide and I feel what really needs to happen and what we know. We hear from physicians in health care systems, they want to learn clearly, kind of the roots of inequities where they come from but they also want to have a sense of what it is it that they do. And, I think one of the major opportunities that we're going to really take on in 2022 is really develop a package for physicians and health systems to kind of in this envelope of learn, practice, and do racial justice and equity focused work and methods to help support this health care ecosystem.

And there will be different ways in which they kind of can engage within their ecosystem or their health system around equity work. But I feel the opportunity is to provide different opportunities. We will also, as I mentioned before, some of the work that we've been doing with the CDC around emergency preparedness and response. We're going to have a guide also to help support health care systems and figuring out how do you embed equity into your emergency response and preparedness.


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efforts. There’s a lot for the public health system overall but not as much for the health care ecosystem. So a lot of our focus is really going to be on supporting health care systems and physicians to, of the actual practice of embedding equity. And what does that look like? How do we hold ourselves accountable but also how do we create community of practices also to learn from one another.

Unger: Just digging in a little bit there for those physicians out there that do want to learn more about how to put equity, to work in their practices and their everyday lives, what are some of those resources that you recommend that they consult?

Dr. Maybank: Sure, absolutely. I mentioned earlier before, the AMA educational hub or Ed Hub, we call it for short, has a huge now health equity education center. That's inclusive of lots of information and materials. And I highly, highly highly recommend that folks go there. We have information on what health care practices can do to implement, an anti-racism lens or an equity lens to the work that they're doing. The Prioritizing Equity series also is on there and you can get CME credit and that's conversations with many different leading experts across the country in this space of equity. I already mentioned the narrative guide that we did with and published with AAMC. And then there's just many thought leaders at this time. I think we're at a time where, there are a lot of books that have been written.

We now have access to many talks and webinars and ways that we couldn't before, because we're, everything is, kind of virtually. And so, we engaged as AMA with Heather McGee, the sum of us. And we heard from her, a team member of mine, published a book and co-published a book called Unequal Cities. There's another really interesting, and I think, impactful book called Inflamed by Rupa Marya and Raj Patel. So there are a lot of opportunities I think, to learn in a way that we haven't been able to as physicians. There's lots of information out there.

Unger: For those of you who are interested in checking out the Prioritizing Equity series. You can find that on AMA's YouTube channel and Dr. Maybank, thank you so much to you and your team. And we'll look forward to more work coming out in 2022. We need it. That's it for today's Moving Medicine video and podcast. Please click subscribe on our YouTube channel. So you don't miss any of these episodes or check us out on Apple, Spotify, wherever you listen to your podcasts. Thanks for joining us today. Please take care.

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