

REPORT 15 OF THE BOARD OF TRUSTEES (November 2020)
Plan for Continued Progress Toward Health Equity
(Center for Health Equity Annual Report)
(Informational)

EXECUTIVE SUMMARY

In accordance with Policy D-180.981, this informational report outlines the equity activities of our AMA from 2nd Quarter 2019 through the 3rd Quarter of 2020, with some projections into the 4th Quarter of 2020.

REPORT OF THE BOARD OF TRUSTEES

B of T Report 15, November 2020

Subject: Plan for Continued Progress Toward Health Equity (Center for Health Equity Annual Report)

Presented by: Russ Kridel, MD, Chair

1 BACKGROUND

2
3 This report is submitted for information to the House of Delegates. In June 2018, the House of
4 Delegates adopted Policy D-180.981, “Plan for Continued Progress Toward Health Equity,”
5 directing our AMA to develop “an organizational unit, e.g., a Center or its equivalent, to facilitate,
6 coordinate, initiate, and track AMA health equity activities.” Subsequently, in April 2019, our
7 AMA hired its inaugural Chief Health Equity Officer and Group Vice President, Dr. Aletha
8 Maybank, and established the Center for Health Equity (“the CHE”, “the Center”). Under the
9 auspices of the Center for Health Equity, our AMA has outlined an internal equity strategy to be
10 leveraged across each business unit toward overall elevation of our AMA Strategic Arcs, and an
11 external equity strategy to maximize and normalize the embeddedness of equity in policy
12 development and in health care delivery, altogether toward the betterment of public health. Policy
13 D-180.981 also states “the Board will provide an annual report to the House of Delegates regarding
14 AMA’s health equity activities and achievements.” As it is just over a year since the inception of
15 the CHE, and the first full annual report of this nature, this document will expound on endeavors
16 that were in development in the mid and latter parts of 2019, and are now in full-fledge operation
17 or complete.

18 19 DISCUSSION

20 21 *Stating the Case for Strategic Equity*

22
23 Based on the premise of advancing optimal health for all, strategic equity is the re-aligning
24 objective for health systems, whether under normal operating procedure or in the midst of public
25 health crises, such as that which our world faces in 2020 with coronavirus SARS-CoV-2, COVID-
26 19. Especially in the face of pandemic, the CHE considers equity the accelerant that focuses and
27 prioritizes health practitioners’ practice-wide goals to deliver high-level, comprehensive, equitable
28 care to all, with thoughtful consideration of myriad lived experiences of patients. Equity
29 considerations ought not fall by the wayside under grim conditions. This is where such principles
30 are needed the most.

31 32 *Center for Health Equity Quarter Successes and Milestones*

33 34 2nd Quarter, 2019

35 (1) Hired in April 2019, Dr. Aletha Maybank leads the CHE as Chief Health Equity Officer, as
36 well as AMA Group Vice President (initially Vice President). Having an extensive
37 background at the intersection of public health, medicine, government, and equity
38 enterprise establishment, Dr. Maybank brings with her a deep reservoir of know-how
39 regarding embedding equity across a multi-tiered organization such as our AMA. Prior to

1 joining the AMA, Dr. Maybank served as the Founding Deputy Commissioner for the
2 Center for Health Equity at the NYC Department of Health and Mental Hygiene (2014).
3 She was instrumental in infusing equity at the neighborhood level and advancing the
4 Department's place-based approach to addressing health inequities. She also set
5 precedence with groundbreaking work at the Office of Minority Health in the Suffolk
6 County Department of Health Services (2006) while serving as the Founding Director. Dr.
7 Maybank has taught medical and public health students on topics related to health
8 inequities, public health leadership and management, physician advocacy, and community
9 organizing in health. In 2012, along with a group of Black woman physician leaders, Dr.
10 Maybank co-founded "We Are Doc McStuffins", a movement inspired by the Disney
11 Junior character Doc McStuffins serving to shine light on the critical importance of
12 diversity in medicine.

- 13
14 (2) Most of the time in the first quarter was spent learning AMA's culture and engagement
15 with external partners. There was initial reach out and engagement with minoritized
16 physician associations such as NMA and NHMA to start relationship building. Dr.
17 Maybank provided in-depth AMA presence at NMA National Conference via participation
18 in several panels. Also due to critical demand by business units (BU) across AMA, she
19 began discussions BU by BU to share what she had learned in the past regarding
20 institutional culture change as it related to equity as a way to start laying the foundation.
21 She clearly articulated that AMA's approach needed to be an 'inside - outside' strategy in
22 which the culture, practice, and policy within the management and membership was as
23 equally critical to evolve as out external engagement in order to advance equity.
24

25 3rd Quarter, 2019

- 26 (1) By August 2019, Dr. Maybank hired Diana N. Derige, DrPH, as the CHE's Director of
27 Health Equity Strategy and Development to focus on strategic planning, strengthen
28 external partnerships such as West Side United, and identify external funding
29 opportunities. In September 2019, Dr. Maybank hired Mia Keeys, MA, DrPH(c), as
30 Director of Health Equity Policy and Advocacy to directly engage and support AMA
31 Advocacy to center equity since advocacy is one of AMA's greatest assets. The Center is
32 administratively supported by Executive Assistant Nish Wise, also hired within the 3rd
33 quarter of 2019.
34
35 (2) Over the course of the 2019 3rd and 4th quarters, the CHE staff, with the guidance of an
36 equity-in-practice consultant, developed strategic approaches, a vision, and a mission to
37 guide the Center's work, which included embedding equity across the AMA enterprise.
38 Internally, the CHE submitted its Strategic Roadmap for comment to AMA Management
39 Team leadership at the end of 2019, listed below:

40
41 CHE's vision is a nation where all people live in thriving communities where resources
42 work well, systems are equitable and create no harm, and everyone has the power to
43 achieve optimal health; and all physicians are equipped with the consciousness, tools,
44 and resources to confront inequities as well as embed and advance equity within and
45 across all aspects of the health care system.

46
47 CHE's mission is to strengthen, amplify, and sustain the AMA's work to eliminate
48 health inequities - improving health outcomes and closing disparities gaps - which are
49 rooted in historical and contemporary injustices and discrimination.

1 Over the course of its development, the Center set about refining the Strategic Roadmap,
2 informed by both internal and external stakeholder feedback, and have arrived at the tenets
3 described in detail in a separate document, but, summarily, the CHE Strategies Approaches
4 are:

- 5
- 6 • Embed health equity in practice, process, action, innovation and organizational
7 performance and outcomes
- 8 • Build alliances and share power via meaningful engagement
- 9 • Ensure equitable opportunities and conditions in innovation for marginalized and
10 minoritized people and communities
- 11 • Push upstream to address all determinants of health
- 12 • Create pathways for truth, reconciliation, and healing
- 13

14 (3) Also, in late 2019, CHE firmly established the Health Equity Workgroup building upon
15 already exiting efforts with the AMA Management Team co- lead by Rodrigo Sierra and
16 Michael Tutty. The Health Equity Workgroup (“HEW”) is a conglomerate of AMA
17 business unit representatives who are collectively tasked with building a community of
18 equity learning and practice; supporting local and enterprise-wide accountability to equity
19 principles; ensuring equity is explicit and infused during goal and objective setting; and
20 better aligning and accounting for enterprise-wide health equity work. The HEW is a
21 merger between AMA’s Diversity and Inclusion and former Health Equity Workgroup.
22 The CHE manages the Workgroup and coordinates its Steering Committee, which consists
23 of leaders and members who are involved in planning, development, and implementation
24 of Health Equity Workgroup and Business Action Team activities. Two persons per
25 business unit have been appointed to work with their respective business units to create
26 equity explicit metrics and goals. Following each HEW convening, those business unit
27 representatives convey issues and decisions to supervisors, colleagues, and staff;
28 appropriately escalate concerns; actively seek out, listen to, and incorporate other ideas and
29 perspectives. They are heralded as accessible and open to discussing sensitive matters, and
30 for bringing forth messages about health, race, gender, and social equity into
31 communications with staff and stakeholders as it relates to their work.

32
33 Staff in these roles are voluntarily contributing significant time and talent to the
34 development and implementation of health equity work and vision, at the behest of the
35 enterprise-wide equity imperative. The HEW promotes inclusion of diverse voices (by
36 gender/sexual identity, race, age), opportunity to build expertise around equity issues, and
37 the implementation of an equity lens. The HEW gatherings and trainings are designed to
38 focus on workforce equity, particularly at the leadership level, as well as to center equity in
39 policy, practice, and programming.

40
41 (4) Since 2019, the Center has organized ongoing racial equity training for senior leadership
42 and staff. Hosted by staff of the Racial Equity Institute (REI)—an organization dedicated
43 to developing the equity capacity of organizations and its leaders—the training is a two-
44 day immersive experience that features lessons tailored to organizational needs with
45 respect to understanding, appreciating, and embedding racial equity across all goals and
46 processes. For AMA, these trainings have included a deep review of organizational
47 membership (by race), policies, and practices across its 175+ years existence. It has also
48 included team-building and small-group discussions related to race, power, and how these
49 constructs manifest within the context of our AMA. With the support of CEO Jim Madara,
50 to date, 90% of Senior Management Group (SMG) have received REI training, and 17% of
51 non-SMG staff have taken the REI training. Before the shelter-in-place and stay-at-home

1 orders went into effect, the Center had planned to hold additional trainings. The CHE plans
2 to resume REI virtual trainings in the 4th Quarter of 2020, and in-person trainings in 2021
3 in accordance to AMA guidelines on in-person gatherings. The goal is to achieve 100%
4 staff and SMG training by 2025.

5
6 1st Quarter, 2020

- 7 (1) In March 2020, the CHE hired and onboarded Hannah Seoh, Director of Health Equity
8 Performance and Operations, and Diana Lemos, PhD, Senior Health Equity Program
9 Manager.
- 10
11 (2) The Center for Health Equity is building sustainable and collaborative relationships with
12 leading organizations likewise committed to an equity imperative. CHE has played a
13 significant role in broadening the AMA’s engagement with elected officials, with leaders
14 throughout the fields of health care and public health, and also with non-traditional
15 partners that have historically held rapport with marginalized and minoritized
16 communities. Consequently, there is mounting evidence of the external environments’
17 understanding and appreciation of AMA’s Center for Health Equity, and for broader
18 appreciation of the AMA’s burgeoning practice of applying a strategic equity lens in
19 relationship and alliance-building efforts. Table 1 in the Appendix further demonstrates
20 identified cross-enterprise and external partners to date, and through 2025, thus far.
- 21
22 (3) Under the leadership of CHE, AMA is heavily investing in a nationwide effort to spread
23 health equity messaging and community health resources across Black communities
24 through *Essence*—the nation’s leading lifestyle magazine brand for Black women—most
25 notably through its [internationally acclaimed annual July festival](#), and through its [inaugural](#)
26 [Wellness Houses](#) in various cities with substantially large communities of Black women
27 and their families. Immediate Past President, Dr. Patrice Harris, has participated in the
28 *Essence Wellness House*, both in-person in Atlanta, GA, and, on March 31, 2020, virtually
29 through the first broadcast of the [Essence Wellness House Live](#) during a session titled
30 “Essence of the Matter: COVID-19’s Impact on Black America”.
- 31
32 The *Essence* partnership represents AMA’s commitment to going to where trusted
33 physician voices are needed and to building community trust through an established and
34 time-honored brand. The Center’s efforts also support the Improving Health Outcomes
35 (IHO) business unit, build the AMA brand in health equity in the Black community, and
36 demonstrate true partnership with the National Medical Association (NMA), the
37 Association of Black Cardiologists (ABC), and the American Heart Association (AHA) to
38 support community well-being.
- 39
40 (4) In February 2020, under the leadership of CHE, AMA partnered with notable hospitals,
41 community health centers, and social organizations in Chicago in a \$6 million
42 collaborative social impact investment pact called West Side United (WSU). The
43 investment in the collaborative is an investment in upstream improvements targeted at
44 tackling social determinants of health (SDoH) and is a solid step forward toward closing
45 the life expectancy gap between the loop and Chicago’s westside neighborhoods through
46 invigorating economic growth and improving educational outcomes.

47
48 For the first time, AMA is investing financially in our own backyard. In the first year,
49 AMA is investing \$2 million along with other health care institutions. This effort
50 encourages investment in upstream work wherein health care institutions help to reduce
51 burdens associated with SDoH. It also speaks to the awareness that health care institutions

1 and their leaders have a role in building community wealth and its impact on health. The
2 WSU investment is a stellar example of how AMA can support upstream work, through
3 social impact investing and a multi-tiered approach to planning, programming and
4 assessment, while bringing together and leveraging the expertise of many AMA business
5 units, including IHO (chronic disease management); Enterprise Communications—EC—
6 (social responsibility); Finance (social impact investing) and coordinating human and
7 financial resources to leverage impact.

8
9 2nd Quarter, 2020

- 10 (1) In May 2020, CHE also hired and onboarded Fernando De Maio, PhD, Director of Health
11 Equity Strategic Data Use and Research, who brings experience in quantitative data
12 analysis, social epidemiology and sociology. Dr. De Maio's role is a joint appointment
13 with DePaul University, where he remains a tenured professor in the Department of
14 Sociology. In May 2020, CHE also hired Alice Jones, Program Manager of Health Equity
15 Performance and Operations. In June 2020, Aziza Jones and Joaquin Baca, MSPH, also
16 joined the team as Marketing Manager and Senior Health Equity Policy Analyst,
17 respectively. Formerly with the Environmental Intelligence and Strategic Analytics
18 business unit, Chelsea Hanson also joined CHE as Director of Health Equity Innovation.
19 Consequently, within a year of onboarding its first staff of four, the CHE has nearly tripled
20 in size (see Figure 1 in the Appendix) with plans to hire a Director of Equitable Health
21 Systems Integration by end of 3rd Quarter 2020.
- 22
- 23 (2) The CHE, in partnership with Enterprise Communications, drafted an online guide, titled
24 Health Equity: A Guide on Concepts, Language and Narrative, which offers a selected
25 glossary and analysis of key equity language and concepts. Its purpose is to enable readers
26 to recognize, describe, think critically, and effectively engage in dialogue related to
27 inequities and equity. It supports the value of ongoing dialogue as a method for advancing
28 strategies for eliminating health inequities that undermine or diminish health. It is slated
29 for full release at the beginning of the 3rd Quarter 2020.
- 30
- 31 (3) Early in 2020, the CHE launched the internal AMA Today site for staff, which includes
32 learning modules on equity for staff edification; a reading list consisting of classic and
33 contemporary texts and articles on various equity-related subjects; and
34 videos/documentaries to aid self and business unit study of equity issues. At the onset of
35 COVID-19, the equity in COVID-19 resource webpage for physician-members and staff
36 was launched.
- 37
- 38 (4) On April 7, 2020, the [New York Times published an article](#) written by Dr. Maybank on the
39 significance of race and ethnicity data in combating COVID-19. It contributed greatly to
40 the national conversation and actions, received widespread attention on the issue, and
41 elevated the role and growing importance and relevancy of the AMA Center for Health
42 Equity. Demand from internal and external stakeholders for CHE's time, attention, and
43 advice increased tremendously after this time.
- 44
- 45 (5) On Tuesday, April 14, 2020, via Apple TV+, Dr Maybank sat down (virtually), with
46 international syndicate host Oprah Winfrey, during a special presentation, "[Oprah Talks](#)
47 [COVID-19 - The Deadly Impact On Black America](#)". During this in-depth conversation,
48 Dr. Maybank discussed the detrimental impact the COVID-19 pandemic is having on
49 Blacks across the country. This too increased the demand for time and attention from CHE.
50 It, like no other platform can do, elevated AMA as a serious contender in the fight for
51 injustice in health.

1 3rd Quarter, 2020

- 2 (1) In just over a year, CHE has represented our AMA and its equity commitment in over 75
3 speaking engagements across the country. Table 2 in the Appendix describes speaking
4 engagements at which CHE staff have represented the AMA since Interim 2019 to June
5 2020.

6
7 In addition to the physical and virtual speaking engagements, the CHE has solidified its
8 online presence. In April 2020, the CHE, in collaboration with the Marketing and Member
9 Experience (MMX) business unit, launched a YouTube-based conversation platform called
10 “Prioritizing Health Equity.” This series of conversation focuses on the experiences of
11 marginalized and minoritized physicians, public health leaders, and medical students
12 during the COVID-19 pandemic. The views have exceeded 50,000. Table 3 in the
13 Appendix maps out the initiative to date.

- 14
15 (2) COVID-19 has shifted how CHE engages with AMA business units and with outside
16 partners. At the time this report was written, CHE was in the process of refining the CHE
17 Strategic Roadmap, informed both by internal and external feedback. In many ways,
18 COVID-19 has enhanced engagement with external partners, and hastened output and
19 collaboration across all AMA BUs while also looking to create both short-term, as well as
20 sustainable endeavors to address the pandemic’s impact on the AMA physician
21 membership body, their patients, and on the greater public health environment.

22
23 The Center leads the AMA collection of emerging practices on Health Equity/Racial
24 Equity COVID-19 strategic programs/policies. The collection and dissemination of the
25 practices is meant to support best practice dissemination, innovation, and network
26 development all in support of health equity. The Center will serve as repository of this
27 information and will make the information available on the AMA website. Post COVID-
28 19, the CHE will use the information to inform “after-action” conversations for planning
29 and policy development.

30
31 Developed in response to the COVID-19 threat, this Equity COVID-19 Resource Page
32 consists of articles, commentaries, resource lists, etc., produced by world health and public
33 health leaders, as it relates to the pandemic. Not only are our AMA utilization analytics
34 demonstrating its usefulness for physician-members—this is also a tool from which the
35 general public is gaining utility. The Health Equity Resource Center for COVID-19 serves
36 as a clearinghouse of sorts to ensure that communications from AMA have an equity
37 framing and consideration of structural issues that contribute to, and could exacerbate,
38 already existing inequities.

- 39
40 (3) In consultation with the National Council of Asian Pacific Islander Physicians, during
41 Asian American Pacific Islander Heritage Month (May 2020), AMA released a public
42 [statement denouncing racism and xenophobia](#), particularly as it impacts Asian Americans
43 and Asian-presenting persons in America. This document also publicly leverages a fuller
44 report arguing for the discrete data disaggregation of Asian American and Pacific Islander
45 health outcomes, which CHE also produced and release to the Board of Trustees in March
46 2020. [A public version of the report is also available on the AMA website.](#)

- 47
48 (4) One of the CHE’s critical concerns related to COVID-19 is the dearth of publicly available
49 granular data on the number of positive cases, hospitalizations, and mortality by race and
50 ethnicity. Without these data, it is difficult to make sound decisions on resource allocation
51 and to glean an overall understanding of how the virus has been impacting various

1 communities. Therefore, on April 3, 2020, in coordination with Advocacy business unit,
 2 the CHE submitted a letter to the Department of Health and Human Services (HHS) urging
 3 policymakers to require equitable demographic data collection and urging health
 4 systems/practices to collect data. The following physician and public health organizations
 5 signed onto this letter: the National Medical Association, the National Hispanic Medical
 6 Association, the National Council on Asian Pacific Islander Physicians, the Association of
 7 American Indian Physicians, the American Academy of Family Physicians, the American
 8 Academy of Pediatrics, and the American College of Gynecologists.

- 9
 10 (5) On April 2, 2020, CHE, in coordination with the Advocacy business unit, submitted legislative
 11 language on equity considerations for inclusion consideration for a forthcoming COVID-19
 12 legislative package. The bill, HR 6585, called the Equitable Data Collection and Disclosure
 13 Act, was introduced as a stand-alone bill by Representatives Kelly (D-IL), Pressley (D-MA),
 14 Bass (D-CA), and Lee (D-CA). Its Senate companion was introduced by Senators Booker (D-
 15 NJ), Harris (D-CA), Markey (D-MA), Merkley (D-OR), and Warren (D-MA).

16
 17 The following are the provisions of the bill, which CHE submitted:

- 18 • Require HHS to use all available surveillance systems to post daily updates on the
 19 CDC website showing the testing, hospitalizations, treatment data disaggregated by
 20 race, ethnicity, sex, age, socioeconomic status, disability status, county, and other
 21 demographic information, including patients’ preferred written and spoken language;
- 22 • Require HHS to take all necessary steps to protect privacy in releasing this data;
- 23 • Require HHS to provide a summary of the final statistics and a report to Congress
 24 within 60 days after the end of the public health emergency;
- 25 • Create a Commission on Ensuring Health Equity during the COVID-19 Public Health
 26 Emergency, including federal, state, local, and tribal officials along with independent
 27 experts, to provide guidance on how to better collect, develop and analyze racial and
 28 other demographic data in responding to future waves of the coronavirus;
- 29 • Authorize \$50 million in emergency supplemental funding to the CDC, state public
 30 health agencies, the Indian Health Service, and other agencies to conduct or support
 31 data collection on racial, ethnic, and other demographic implications of COVID-19.

32
 33 Not long after the bill had been introduced, the Centers for Disease Control and Prevention
 34 (CDC) announced it would adopt several the bill’s provisions.

- 35
 36 (6) Following the initial success of the equitable data bill, the Center convened a series of
 37 intimate virtual meetings with leading and representative minds in equity and ethics in
 38 public health, policy, and health care, throughout the months of April and May 2020. The
 39 purpose of these meetings was to gather additional ideas for legislative action to address
 40 inequities related to COVID-19. The following is a list of our contributive partners:

41

America’s Essential Hospitals	Illinois Coalition for Immigrant & Refugee Rights
American Public Health Association	National Birth Equity Collaborative
Association of American Indian Physicians	National Council of Asian Pacific Islander Physicians
Civic Health Partners	National Hispanic Medical Association
CommonSpirit Health	National Medical Association
Commonwealth Fund	Trust for America’s Health
Families USA	Unidos US

- 1 (7) At the behest of the United States Breastfeeding Committee, CHE serves as a leading
2 organizational representative on the Infant and Young Child Feeding Constellation. This
3 body is prompted to review and put forth guidance on the impact and related advantages
4 and/or challenges associated with breastfeeding as the world uncovers additional
5 information about the novel coronavirus, COVID-19.
6
- 7 (8) At the onset of COVID-19, the City of Chicago witnessed high numbers of positive cases,
8 hospitalizations, and deaths due to complications of the virus. An overwhelming number of
9 these cases were among marginalized and minoritized communities. In a valiant effort to
10 quell the rapid spreading of the disease, Mayor Lori Lightfoot instituted a comprehensive,
11 city-wide plan, which included a new mandatory race and ethnicity reporting requirement
12 for all COVID-19 cases reported under the auspices of one of the nation's first Racial
13 Equity Rapid Response efforts. In May 2020, CHE joined this effort, with the goal of (1)
14 supporting data analysis to understand the burden of COVID-19 in Chicago and how that
15 burden varies across the city by race/ethnicity, and (2) leveraging AMA's national reach to
16 elevate this work and learn lessons from efforts in other cities. The WSU collaboration is
17 also a critical component of Chicago Mayor Lori Lightfoot's Racial Equity Rapid
18 Response Team.
19

20 4th Quarter 2020 and early 2021 Projections

- 21 (1) The COVID-19 pandemic demonstrates that the case for addressing patients' health-related
22 social needs by integrating social care into health care delivery has never been stronger.
23 Pandemics like COVID-19 highlight both the existing challenges in the current health
24 system, lack of coordinated preparedness, and also the fragile state of the safety net health
25 system that supports children, the elderly, people of color, Limited English Proficient
26 persons, geographically challenged persons, people who identify as LGBTQ+, religious
27 minorities, persons with disabilities, and individuals of low socioeconomic status. These
28 communities are even more vulnerable to the uncertainty of the preparation, response, and
29 events surrounding public health crises. This trend is playing out repeatedly—it is a trend
30 that is becoming the clamoring, cacophonous tenor of the American health care system.
31 These experiences expose the need for an evidence-based social determinants approach to
32 maximize the public health of the nation, and the efficacy of this nation's physicians and
33 other health care professionals.
34

35 However, health practitioners lack adequate support and training to lead this
36 transformation into an equity-driven system, particularly as they are overwhelmed by the
37 onslaught of COVID-19. As a simultaneous response to this dearth of strategic equity
38 guidance, and in anticipation of the evolved needs of the nation's patient population in the
39 wake of COVID-19, the Center for Health Equity has developed the first ever Centering
40 Equity in Emergency Preparedness and Response: A Health care Institutions' Guide. In
41 addition to the COVID-19 Equity Resource page, the Guide serves as an iterative, living
42 document meant as a guide during public health crises, and also as health systems'
43 transformative guide based on the tenets of applying an equity lens throughout all of a
44 health systems' efforts to embed equity. CHE developed this guidance for physicians as
45 they:

- 46 • Renew and refine practice's internal strategic equity preparedness for COVID-19
47 related care and for future health crises;
- 48 • Consider innovative integration of social determinant approaches across communities
49 they service;

- 1 • Leverage the suggested resources to bolster the health of physicians, co-workers, and
2 families;
- 3 • Access guides and resources that aid physicians in helping patient communities to
4 recover from impacts of COVID-19.

5
6 This document has also been reviewed by other institutional partners and is slated for
7 release in 4th Quarter 2020.
8

- 9
10 (2) In partnership with the Satcher Health Leadership Institute at Morehouse School of
11 Medicine, the Health Equity Advocacy and Leadership (HEAL) Fellowship proposes to
12 close the ever-widening health gap by training physicians who are best positioned to
13 elevate health equity for communities in need. This fellowship—slated for initiation in
14 2021—will mobilize and engage AMA members in health equity-focused advocacy
15 leadership to use their power and privilege to create positive changes that will address the
16 structural determinants affecting health and implement health projects that will eliminate
17 health disparities. The program will create a common platform for in-depth engagement in
18 exploring a panoply of topics that will give participants concrete tools to enable effective
19 engagement of multidisciplinary sectors and resources required to improve health and
20 community well-being. The Health Equity Advocacy Leadership (HEAL) Fellowship will
21 actualize health equity that is inclusive of the political determinants of health framework
developed by the Morehouse School of Medicine’s Satcher Health Leadership Institute.

APPENDIX

Figure 1: Current CHE Staff (As of 6/22/20)

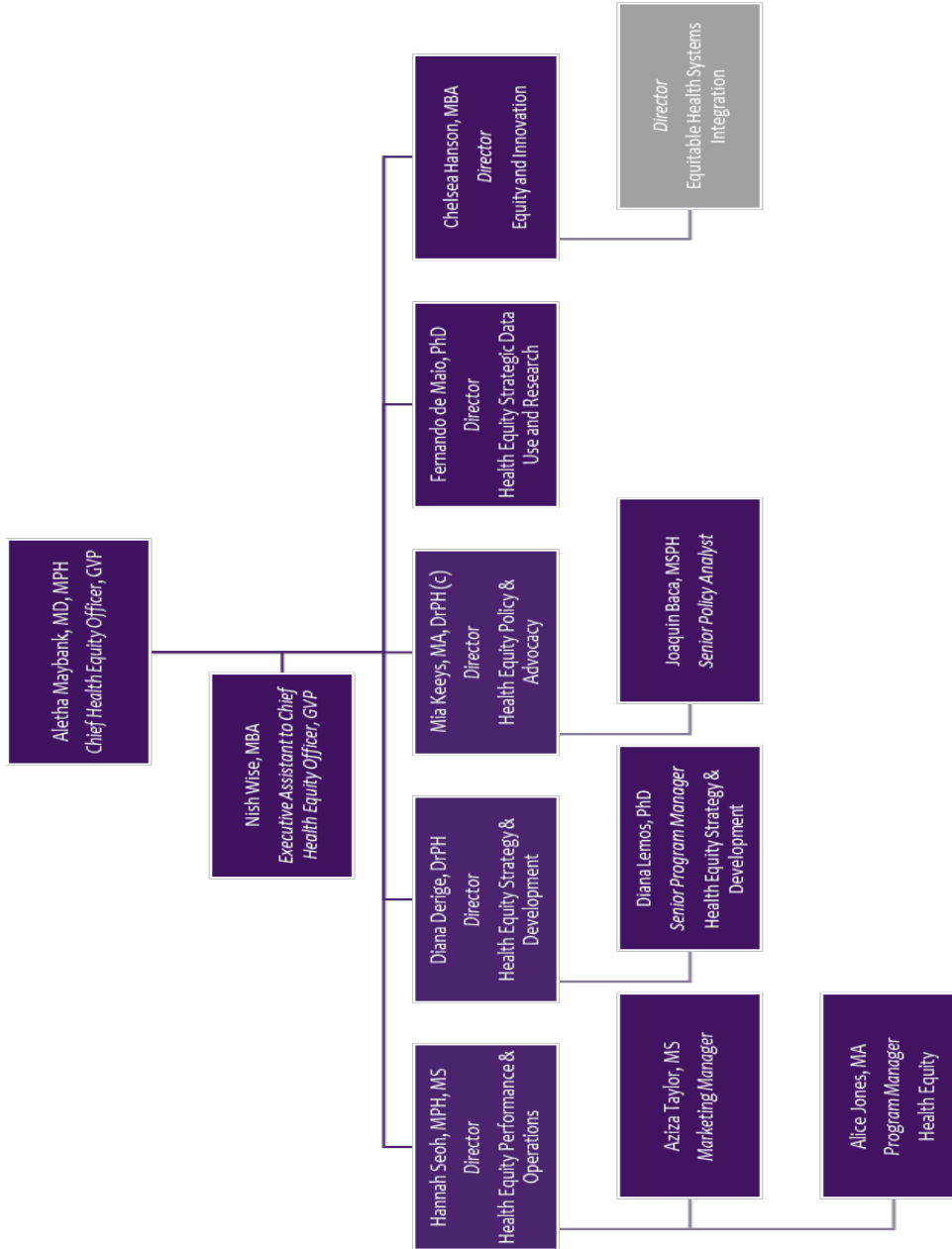


Table 1: AMA Center for Health Equity Supports & Partners (2020-2025)

Identified Supports and Partners 2020-2025					
	Embed Equity	Build Alliances & Share Power	Push Upstream	Ensure Equity in Innovation	Create Pathways for Healing
Cross-Enterprise Partnerships	<ul style="list-style-type: none"> All AMA management business units BUs co-creating opportunities and products Human Resources Enterprise Communications EISAMR Health Solutions Advocacy Publishing (Ed/Hub) Marketing and Membership Experience (MMX) AMA House of Delegates and Sections/Councils 	<ul style="list-style-type: none"> MMX (Ambassador Program, MAS (Minority Affairs Section), LGBTQ Advisory Committee, Women Physicians Section (WPS)) Advocacy (AMA PAC) IHO (Improved Health Outcomes) EISAMR American Medical Association Foundation AMA Federation 	<ul style="list-style-type: none"> IHMI EISAMR Health and Science MedEd PS2 Ed Hub MMX 	<ul style="list-style-type: none"> EISAMR PS2 Health Solutions Health & Science IHMI Health 2047 	<ul style="list-style-type: none"> AMA Archives Health & Science [Ethics] MMX
External Partnerships		<ul style="list-style-type: none"> West Side United Alliance for Health Equity National Medical Association National Hispanic Medical Association Association of American Indian Physicians National Council of Asian Pacific Islander Physicians Congressional Black Caucus Congressional Hispanic Caucus Congressional Asian Pacific American Caucus ESSENCE (Sponsorship) REACH Media (Sponsorship) Landmark Ventures (Sponsorship) 	<ul style="list-style-type: none"> West Side United MEDICC APHA (American Public Health Association) American College of Preventive Medicine (ACPM) NAACP Academy of Nutrition & Dietetics 	<ul style="list-style-type: none"> AfroTech – Blavity Landmark Ventures (Sponsorship) HealthTech 4 Medicaid 	<ul style="list-style-type: none"> National Medical Association National Hispanic Medical Association Association of American Indian Physicians National Council of Asian Pacific Islander Physicians Harriet Washington – Author of American Apartheid Meahery Medical College & Morehouse SOM
Consultants (paid)	<ul style="list-style-type: none"> Race Forward Morten Group Racial Equity Institute Interaction Institute for Social Change OnBoard Health Brandstage 		<ul style="list-style-type: none"> Health Begins Advancing Health Equity (Uche Blackstock) Jonathan Metz (Vanderbilt) 	<ul style="list-style-type: none"> Onboard Health 	<ul style="list-style-type: none"> Kirwan Institute for the Study of Race and Ethnicity

**Table 2: AMA Center for Health Equity National Speaking Engagements
(November 2019- June 2020)**

Table 2: American Medical Association Center for Health Equity National Speaking Engagements (Nov 2019-Present)				
EVENT	DATE	LOCATION	PRESENTATION STYLE	AUDIENCE REACH
Exponential	November 7, 2019	San Diego, CA		
Stanford University Artificial Intelligence in Health care: The Hope, The Hype, The Promise, The Peril	November 8, 2019	Stanford, CA	Solo	400
AMA I-19	November 12, 2019	San Diego, CA	Solo	NA
NHHF National Hispanic Health	November 21, 2019	Los Angeles, CA		NA
Brigham's Site Visit	December 12, 2019	Boston, MA		NA
Health Disparities Lecture at Rush	January 9, 2020	Chicago, IL	Solo	NA
MSS Standing Committee	January 12, 2020			NA
Chicago HS for AG Sciences	February 6, 2020	Chicago, IL	Solo	NA
Cook County	February 19, 2020	Chicago, IL	Panel	NA
Sojourner Truth Lecture	February 20, 2020	Claremont, CA	Solo	NA
University of Wisconsin–Madison’s La Follette School of Public Affairs Inaugural Health Policy Conference	March 2, 2020	Madison, WI	Keynote Speaker	400+
Women's March/Moms Rising: Talking to Your Kids about Coronavirus	March 17, 2020	Zoom	Panel	1,129
AMA COVID-19 Update	March 25, 2020	Online	Panel	1,977
AMA COVID-19 Update	March 31, 2020	Online	Panel	582
AMA COVID-19 Update	April 2, 2020	Online	Panel	NA
ABA WEBINAR: Implications of the COVID-19 pandemic on African Americans	April 2, 2020	Zoom	Panel	NA
Prioritizing Equity: Physicians of Color and COVID-19	April 2, 2020	Online	Moderator	4,494
National Minority Quality Forum Webinar: (Every Friday since April 2020 to Present)	April 3, 2020 - Ongoing	RingCentral	Moderator	2,000+
AMA COVID-19 Update	April 6, 2020		Panel	550
COVID-19: MA’s National Physician Townhall	April 9, 2020	Online	Panel	2,346

Oprah Talks COVID-19: The Deadly Impact of Black America	April 14, 2020		Solo	40,755
Cook County Commissioner Donna Miller's Virtual Town Hall - Our fight against COVID-19 in the southland focus on health equity	April 16, 2020	streamyard.com	Panel	2,900
University of N. Carolina Chapel Hill Class Lecture: Advocacy, Public Policy, & Health Reform: Improving Access to Quality Health Care	April 16, 2020	Zoom	Solo	25
Virtual - AMEC 2020 Speaker Invite	April 18, 2020	app.hopin.to	Solo	1,542
Birthright AFRICA Deep Dive Session	April 19, 2020	app.hopin.to	Panel	2,252
AMA COVID-19 Update	April 21, 2020		Panel	1,045
EPIDEMIC podcast Season 1 Episode 13: A Black Plague	April 21, 2020	Zoom	Solo	NA
AMA Moving Medicine Podcast - US Census 101 for Physicians, Part I	April 21, 2020		Panel	NA
Racial Disparities in the Pandemic, and what they mean for the Future of Medicine	April 23, 2020	Zoom	Solo	NA
Prioritizing Equity: Strengthening the Public Health Infrastructure to Battle Crises	April 23, 2020	Zoom	Moderator	558
COVID-19: The Battle to Save African American Lives Virtual Town Hall	April 30, 2020	Zoom	Panel	1200
National Minority Quality Forum Webinar (Every Friday since May 2020 to Present)	May 1, 2020	RingCentral	Moderator	1600+ to date
Black AZ COVID-19 Task Force	May 8, 2020	WebEX	Solo	100+
NewsOne Panel on COVID-19	May 13, 2020	Online	Panel	3,900
#ListenUpMBC Confab on Young Women's Metastatic Breast Cancer Disparities	May 29-30, 2020	Zoom	Keynote speaker & Moderator	100+
Northern CA Black Physicians Forum	June 12, 2020	TBD	Keynote speaker	NA

Table 3: AMA Center for Health Equity “Prioritizing Equity” YouTube Series (April – August 2020)

Date	Time	Title "Prioritizing Equity:..."	Panelists
4/2/2020	7 PM EDT/6 PM CDT	“Physicians of Color and COVID-19”	Dr. Patrice Harris Dr. Brian Thompson Dr. Elena Rios Dr. Winston F. Wong Dr. Siobhan Wescott
4/23/2020	7 PM EDT/6 PM CDT	“Strengthening the Public Health Infrastructure to Battle Crises”	Dr. Georges Benjamin Dr. J. Nadine Gracia Lori Tremmel Freeman
5/7/2020	7 PM EDT/6 PM CDT	“COVID-19 and the Experiences of Medical Students”	Alec Calac Alex Lindqwister Osose Oboh Sarah Mae Smith Yingfei Wu
5/14/2020	6 PM EDT/5 PM CDT	“COVID-19 and Latinx Voices in the Field”	Dr. Luis Seija Dr. Ricardo Correa Dr. Erica Flores Uribe Dr. Joaquín Estrada
5/21/2020	7 PM EDT/6 PM CDT	“COVID-19 and Native Voices in the Field”	Dr. Mary Owen Dr. Shannon Zullo Dr. Don Warren
5/28/2020	7 PM EDT/6 PM CDT	“The Root Cause”	Dr. Zinzi Bailey Dr. Joia Crear-Perry Dr. Camara Jones Dr. Jonathan Metzl Dr. Whitney Pirtle Dr. Brian Smedley
6/4/2020	1 PM EDT/12 PM CDT	“Police Brutality & COVID-19”	Dr. Rupa Marya Edwin G. Lindo Dr. Atheendar Venkataramani Dr. Mitchel Roger Jr. Dr. Rhea Boyd,
6/11/2020	1 PM EDT/12 PM CDT	“The Root Causes and Considerations for Healthcare Professionals”	LaShyra Nolen Dr. Michael Mensah Dr. Kamini Doobay Dr. Emily Cleveland Manchanda Dr. Brian Williams Dr. David Ansell
6/18/2020	2 PM EDT/1 PM CDT	“LGBTQ+ Health & COVID-19”	Dr. Jesse Ehrenfeld Dr. Blackstock Dr. Shilpen Patel Dr. Asa Radix Dr. David Malebranche
7/2/2020	1 PM EDT/12 PM CDT	“Moving Upstream”	Rishi Manchanda Lauren Powell David Zuckerman Sandra Hernandez
7/16/2020	1 PM EDT/12 PM CDT	COVID-19 & Asian American and Pacific Islander Voices	Dr. Julie Morita Dr. Raynald Samoa Dr. Jay Bhatt Dr. Manisha Sharma Ignatius Bau Dr. Ryan Huerto
8/6/2020	1 PM EDT/12 PM CDT	“Mental Health and COVID-19”	Dr. Patrice Harris Dr. Damon Tweedy
8/20/2020	1 PM EDT/12 PM CDT	“Political Determinants of Health”	Daniel Dawes Rep. Robin L. Kelly