

AMERICAN MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution: 415  
(A-24)

Introduced by: California

Subject: Building Environmental Resiliency in Health Systems and Physician Practices

Referred to: Reference Committee D

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1 Whereas, climate change disproportionately impacts the most vulnerable;<sup>1-3</sup> and

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3 Whereas, “resilience” is an effort to preemptively prepare for a crisis, absorb the impact of a  
4 crisis, adjust to new conditions, and build on lessons learned to create a more robust future;<sup>4</sup>and

5  
6 Whereas, significant investments in renewable energy sources, such as solar and hydro power,  
7 can reduce facility emissions due to energy use;<sup>5</sup>and

8  
9 Whereas, the World Health Organization (WHO) highlights the health care workforce as key  
10 actors in developing a facility’s climate resilience because they are the main implementors of  
11 climate change mitigation measures and serve as a direct link to communities and populations  
12 most adversely affected by climate change;<sup>4</sup> and

13  
14 Whereas, the WHO notes that health care facilities can greatly reduce the potential risk to staff,  
15 patients, and the surrounding communities by appropriately responding to, and reducing  
16 exposure to, hazardous water and waste;<sup>4</sup> and

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18 Whereas, investments in flood- and storm-resistant construction and low-carbon construction  
19 practices can increase a facility’s safety and durability in a changing climate;<sup>6</sup> and

20  
21 Whereas, the Inflation Reduction Act (IRA) has allocated almost \$400 billion toward efforts to  
22 increase green energy and reduce carbon emissions;<sup>7</sup> therefore be it

23  
24 RESOLVED, that our American Medical Association support a resilient, accountable health care  
25 system capable of delivering effective and equitable care in the face of changing health care  
26 demands due to climate change (New HOD Policy); and be it further

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28 RESOLVED, that our AMA encourage health care organizations to develop climate resilience  
29 plans, for the continuity of operations in an emergency, that take into account the needs of  
30 groups in their community that experience disproportionate risk of climate-related harm and  
31 ensure the necessary collaboration between different types of healthcare facilities (New HOD  
32 Policy); and be it further

33  
34 RESOLVED, that our AMA recognizes that climate resilience and mitigation efforts will be  
35 community-specific and supports physician engagement at the local level to promote community  
36 alliances for environmental justice and equity. (New HOD Policy)

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Fiscal Note: Minimal - less than \$1,000

Received: 4/23/2024

## REFERENCES

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3. Vickery J., & Hunter L. M. (2016). Native Americans: Where in environmental justice research? *Society & Natural Resources*, 29(1), 36–52. <https://doi.org/10.1080/08941920.2015.1045644>.
4. Augustynowicz, A.; Opolski, J.; Waszkiewicz, M. (2022) Resilient health and the healthcare system. A few introductory remarks in times of the COVID-19 pandemic. *International Journal of Environmental Research and Public Health*, 19, 3603. <https://doi.org/10.3390/ijerph19063603>.
5. Delivering a "Net Zero" National Health Service, NATIONAL HEALTH SERVICE ENGLAND (July 2022), available at <https://www.england.nhs.uk/greenemhs/wp-content/uploads/sites/51/2022/07/B1728-delivering-a-net-zero-nhs-july-2022.pdf>.
6. *Categorical Waiver – Health Care Microgrids Systems (HCMs)*, Centers for Medicare & Medicaid Services website at <https://www.cms.gov/files/document/gso-23-11-lsc.pdf>.
7. *Building a Clean Energy Economy: A Guidebook to the Inflation Reduction Act's Investments in Clean Energy and Climate Action*, THE WHITE HOUSE (January 2023), available at <https://www.whitehouse.gov/wp-content/uploads/2022/12/Inflation-Reduction-Act-Guidebook.pdf>.

## RELEVANT AMA POLICY

### H-135.938 Global Climate Change and Human Health

Our AMA: 1. Supports scientific consensus that the Earth is undergoing adverse global climate change and that anthropogenic contributions are significant. These climate changes have adversely affected the physical and mental health of people. We recognize that minoritized and marginalized populations, children, pregnant people, the elderly, rural communities, and those who are economically disadvantaged will suffer disproportionate harm from climate change. 2. Supports educating the medical community on the adverse public health effects of global climate change and incorporating the health implications of climate change into the spectrum of medical education, including topics such as population displacement, heat waves and drought, flooding, infectious and vector-borne diseases, and potable water supplies. 3. (a) Recognizes the importance of physician involvement in policymaking at the state, national, and global level and supports efforts to search for novel, comprehensive, and economically sensitive approaches to mitigating climate change to protect the health of the public; and (b) recognizes that whatever the etiology of global climate change, policymakers should work to reduce human contributions to such changes. 4. Encourages physicians to assist in educating patients and the public on the physical and mental health effects of climate change and on environmentally sustainable practices, and to serve as role models for promoting environmental sustainability. 5. Encourages physicians to work with local and state health departments to strengthen the public health infrastructure to ensure that the global health effects of climate change can be anticipated and responded to more efficiently, and that adaptation interventions are equitable and prioritize the needs of the populations most at risk. 6. Supports epidemiological, translational, clinical and basic science research necessary for evidence-based global climate change policy decisions related to health care and treatment. 7. Encourages physicians to assess for environmental determinants of health in patient history-taking and encourages the incorporation of assessment for environmental determinants of health in patient history-taking into physician training. [Modified: CSAPH Rep. 2, I-22; Modified: Res. 424, A-22; Reaffirmation: I-19; Reaffirmed: CSAPH Rep. 04, A-19; Reaffirmation A-14; CSAPH Rep. 3, I-08]

### D-135.966 Declaring Climate Change a Public Health Crisis

1. Our AMA declares climate change a public health crisis that threatens the health and well-being of all individuals. 2. Our AMA will protect patients by advocating for policies that: (a) limit global warming to no more than 1.5 degrees Celsius, (b) reduce US greenhouse gas emissions aimed at a 50 percent reduction in emissions by 2030 and carbon neutrality by 2050, and (c) support rapid implementation and incentivization of clean energy solutions and significant investments in climate resilience through a climate justice lens. 3. Our AMA will consider signing on to the Department of Health and Human Services Health Care Pledge or making a similar commitment to lower its own greenhouse gas emissions. 4. Our AMA encourages the health sector to lead by example in committing to carbon neutrality by 2050. 5. Our AMA will develop a strategic plan for how we will enact our climate change

policies including advocacy priorities and strategies to decarbonize physician practices and the health sector with report back to the House of Delegates at the 2023 Annual Meeting. [Res. 420, A-22; Appended: CSAP Rep. 02, I-22]

#### **H-135.939 Green Initiatives and the Health Care Community**

Our AMA supports: (1) responsible waste management and clean energy production policies that minimize health risks, including the promotion of appropriate recycling and waste reduction; (2) the use of ecologically sustainable products, foods, and materials when possible; (3) the development of products that are non-toxic, sustainable, and ecologically sound; (4) building practices that help reduce resource utilization and contribute to a healthy environment; (5) the establishment, expansion, and continued maintenance of affordable, accessible, barrier-free, reliable, and clean-energy public transportation; and (6) community-wide adoption of 'green' initiatives and activities by organizations, businesses, homes, schools, and government and health care entities. [Modified: Res. 923, I-19; Modified: Res. 516, A-18; Reaffirmed in lieu of: Res. 504, A-16; Reaffirmed in lieu of Res. 402, A-10; Reaffirmation A-09; CSAPH Rep. 1, I-08]

#### **H-135.923 AMA Advocacy for Environmental Sustainability and Climate**

Our AMA (1) supports initiatives to promote environmental sustainability and other efforts to halt global climate change; (2) will incorporate principles of environmental sustainability within its business operations; and (3) supports physicians in adopting programs for environmental sustainability in their practices and help physicians to share these concepts with their patients and with their communities. [Reaffirmation: I-19; Res. 924, I-16]

#### **D-440-912 AMA Public Health Strategy**

1. Our AMA will distribute evidence-based information on the relationship between climate change and human health through existing platforms and communications channels, identify advocacy and leadership opportunities to elevate the voices of physicians on the public health crisis of climate change, and centralize our AMA's efforts towards environmental justice and an equitable transition to a net-zero carbon society by 2050. 2. Our AMA Board of Trustees will provide an update on loss of coverage and uninsurance rates following the return to regular Medicaid redeterminations and the end of the COVID-19 Public Health Emergency, the ensuing financial and administrative challenges experienced by physicians, physician practices, hospitals, and the healthcare system; and a report of actions taken by the AMA and recommendation for further action to address these issues at I-2023. 3. Our AMA Board of Trustees will provide a strategic plan or outline for the AMA's plan to address and combat the health effects of climate change at I-2023. 4. Our AMA Board of Trustees will provide an update on the efforts and initiatives of the AMA's gun violence task force at I-2023. 5. Our AMA will continue to support increased funding for public health infrastructure and workforce, which should include funding for preventative medicine-related residency programs, to increase public health leadership in this country. [Modified: BOT Rep. 05, I-23; BOT Rep. 17, A-23]

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#### **H-135.973 Stewardship of the Environment**

The AMA: (1) encourages physicians to be spokespersons for environmental stewardship, including the discussion of these issues when appropriate with patients; (2) encourages the medical community to cooperate in reducing or recycling waste; (3) encourages physicians and the rest of the medical community to dispose of its medical waste in a safe and properly prescribed manner; (4) supports enhancing the role of physicians and other scientists in environmental education; (5) endorses legislation such as the National Environmental Education Act to increase public understanding of environmental degradation and its prevention; (6) encourages research efforts at ascertaining the physiological and psychological effects of abrupt as well as chronic environmental changes; (7) encourages international exchange of information relating to environmental degradation and the adverse human health effects

resulting from environmental degradation; (8) encourages and helps support physicians who participate actively in international planning and development conventions associated with improving the environment; (9) encourages educational programs for worldwide family planning and control of population growth; (10) encourages research and development programs for safer, more effective, and less expensive means of preventing unwanted pregnancy; (11) encourages programs to prevent or reduce the human and environmental health impact from global climate change and environmental degradation. (12) encourages economic development programs for all nations that will be sustainable and yet nondestructive to the environment; (13) encourages physicians and environmental scientists in the United States to continue to incorporate concerns for human health into current environmental research and public policy initiatives; (14) encourages physician educators in medical schools, residency programs, and continuing medical education sessions to devote more attention to environmental health issues; (15) will strengthen its liaison with appropriate environmental health agencies, including the National Institute of Environmental Health Sciences (NIEHS); (16) encourages expanded funding for environmental research by the federal government; and (17) encourages family planning through national and international support. [Reaffirmation I-16; Reaffirmed in lieu of Res. 402, A-10; Reaffirmed in lieu of Res. 417, A-04; Amended: CSA Rep. 8, A-03; Amended: CLRPD Rep. D, I-92; CSA Rep. G, I-89]

#### **H-135.919 Climate Change Education Across the Medical Education Continuum**

Our AMA: (1) supports teaching on climate change in undergraduate, graduate, and continuing medical education such that trainees and practicing physicians acquire a basic knowledge of the science of climate change, can describe the risks that climate change poses to human health, and counsel patients on how to protect themselves from the health risks posed by climate change; (2) will make available a prototype presentation and lecture notes on the intersection of climate change and health for use in undergraduate, graduate, and continuing medical education; and (3) will communicate this policy to the appropriate accrediting organizations such as the Commission on Osteopathic College Accreditation and the Liaison Committee on Medical Education. [Res. 302, A-19]