

AMERICAN MEDICAL ASSOCIATION RESIDENT AND FELLOW SECTION

Resolution: 10
(I-21)

Introduced by: Faith Crittenden, MD, MPH; Alexandria Wellman, MD

Subject: Recognition of National Anti-Lynching Legislation as Public Health Initiative

Referred to: Reference Committee

1 Whereas, Lynching is defined “as to put to death by mob action without legal approval or
2 permission”^{1,2}; and
3

4 Whereas, In the 20th century lynching occurred mostly in southern states by White southerners
5 against Black southerners, however, it was not limited to this region alone nor to Black
6 Americans. Other minority populations were vulnerable to experiencing lynching such as
7 Latinos, Native Americans, and Asian Americans^{3,4}; and
8

9 Whereas, Historical trauma is defined by the U.S. Department of Health & Human Services
10 as “multigenerational trauma experienced by a specific cultural, racial or ethnic group”^{3,4}; and
11

12 Whereas, health outcomes and impact related to historical trauma can defined by U.S.
13 Department of Health and Human Services as depression, fixation on trauma, low self-esteem,
14 anger, and self-destructive behavior and can be experienced by descendants who have not
15 directly experienced a traumatic event⁴⁻⁷; and
16

17 Whereas, Today’s vulnerable populations experience historical trauma that can be contributed
18 to lynching practices under the Jim Crow period (1870-1965)⁷; and
19

20 Whereas, In 1947, the Journal of the National Medical Association called for lynching to be
21 named a federal offense as “...there is only one remedy and that is for Congress to enact a law
22 making lynching a federal crime to be tried not be a local jury but in a United States court...”⁸;
23 and
24

25 Whereas, current bill H.R. 55 introduced in the 117th Congress known as the “Emmett Till
26 Antilynching Act” has been introduced into Congress for more than 120 years and has not
27 passed due to Congressional mishandlings^{9,10}; and
28

29 Whereas, H.R. 55 and previous iterations of this Act are focused on amending section 249 of
30 Title 18, United States Code, to specify lynching as a hate crime act^{9,10}; and
31

32 Whereas, Current AMA policy H-65.965 Support of Human Rights and Freedom states “Our
33 AMA recognizes that hate crimes pose a significant threat to the public health and social welfare
34 of the citizens of the United States, urges expedient passage of appropriate hate crimes
35 prevention legislation in accordance with our AMA's policy through letters to members of
36 Congress; and registers support for hate crimes prevention legislation, via letter, to the
37 President of the United States;” therefore be it
38

39 RESOLVED, That our AMA supports national legislation that recognizes lynching as a hate
40 crime; and be it further

1 RESOLVED, That our AMA work with relevant stakeholders to support medical students,
2 trainees, and physicians receiving education on the inter-generational health outcomes related
3 to lynching and its impact on the health of vulnerable populations; and be it further
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5 RESOLVED, That current AMA policy H-65.965, Support of Human Rights and Freedom,
6 be amended by addition:
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8 Our AMA: (1) continues to support the dignity of the individual, human rights and the
9 sanctity of human life, (2) reaffirms its long-standing policy that there is no basis for the
10 denial to any human being of equal rights, privileges, and responsibilities commensurate
11 with his or her individual capabilities and ethical character because of an individual's sex,
12 sexual orientation, gender, gender identity, or transgender status, race, religion,
13 disability, ethnic origin, national origin, or age; (3) opposes any discrimination based on
14 an individual's sex, sexual orientation, gender identity, race, phenotypic appearance,
15 religion, political affiliation, disability, ethnic origin, national origin or age and any other
16 such reprehensible policies; (4) recognizes that hate crimes pose a significant threat to
17 the public health and social welfare of the citizens of the United States, urges expedient
18 passage of appropriate hate crimes prevention legislation in accordance with our AMA's
19 policy through letters to members of Congress; and registers support for hate crimes
20 prevention legislation, via letter, to the President of the United States; (5) support
21 legislation to end lynching and mob violence against individuals and groups in the United
22 States.

Fiscal Note:

References:

1. NAACP. History of Lynching in America. 2021. Available at: <https://naacp.org/find-resources/history-explained/history-lynching-america> Accessed September 18, 2021
2. Webster Dictionary. Definition of lynching. 2021. Available at: <https://www.merriam-webster.com/dictionary/lynch> Accessed September 18, 2021
3. Emmett Till Antilynching Act, H.R. 55, 117th Cong. (2021) <https://www.congress.gov/bill/117th-congress/house-bill/55/text>
4. Ken Gonzalez-Day. Lynching in the West 1850-1935. Duke University Press. November 2006.
5. U.S. Department of Health and Human Services: Administration of children and families. What is historical trauma? 2021. Available at: <https://www.acf.hhs.gov/trauma-toolkit/trauma-concept> Accessed September 18, 2021
6. Mohatt NV, Thompson AB, Thai ND, Tebes JK. Historical trauma as public narrative: a conceptual review of how history impacts present-day health. *Soc Sci Med*. 2014;106:128-136. doi:10.1016/j.socscimed.2014.01.043
7. Sotero, MM (2006). A Conceptual Model of Historical Trauma: Implications for Public Health, Practice and Research. *Journal of Health Disparities Research and Practice* (1):93-108.
8. Equal Justice Initiative. Lynching in America: Confronting the Legacy of Racial Terror. 2017. Available at: <https://eji.org/wp-content/uploads/2020/09/lynching-in-america-3d-ed-091620.pdf> Accessed September 18, 2021
9. Make Lynching a Federal Offense. *J Natl Med Assoc*. 1947;39(4):164.
10. Emmett Till Antilynching Act, H.R. 55, 117th Cong. (2021) <https://www.congress.gov/bill/117th-congress/house-bill/55/text>
11. Nicholas Fandos. Frustration and fury as Rand Paul holds up anti-lynching bill in senate. 2020. Available at: <https://www.nytimes.com/2020/06/05/us/politics/rand-paul-anti-lynching-bill-senate.html> Accessed September 18, 2021

Relevant RFS Position Statements:

260.002R Health Policy Education in Medical School and Residency

That our AMA work with interested organizations to develop and incorporate a health policy curriculum into medical school and residency training that is based on a list of core topics integral to the fundamental understanding of health policy. (Resolution 5, I-11) (Reaffirmed Resolution 8, A-12)

260.008R Eliminating Health Disparities - Promoting Awareness and Education of Lesbian, Gay, Bisexual, and Transgender (LGBT) Health Issues in Medical Education

That our AMA (1) support the right of medical students and residents to form groups and meet on-site to further their medical education or enhance patient care – without regard to their gender, sexual orientation, race, religion, disability, ethnic origin, national origin or age (2) support students and residents who wish to conduct on-site educational seminars and workshops on health issues in Lesbian, Gay, Bisexual, and Transgender communities; (3) encourage the Liaison Committee on Medical Education (LCME) and the Accreditation Council of Graduate Medical Education (ACGME) to include LGBT health issues in the cultural competency curriculum for medical education, and (4) that this resolution be forwarded to the AMA-HOD for consideration at the 2005 Annual Meeting. (Resolution 5, A-05) (Reaffirmed Report E, A-16) (Reaffirmed Report D, I-16)

Relevant AMA Policy:

Racism as a Public Health Threat H-65.952

Our AMA acknowledges that, although the primary drivers of racial health inequity are systemic and structural racism, racism and unconscious bias within medical research and health care delivery have caused and continue to cause harm to marginalized communities and society as a whole. (2) Our AMA recognizes racism, in its systemic, cultural, interpersonal, and other forms, as a serious threat to public health, to the advancement of health equity, and a barrier to appropriate medical care.(3) Our AMA will identify a set of current, best practices for healthcare institutions, physician practices, and academic medical centers to recognize, address, and mitigate the effects of racism on patients, providers, international medical graduates, and populations.(4) Our AMA encourages the development, implementation, and evaluation of undergraduate, graduate, and continuing medical education programs and curricula that engender greater understanding of: (a) the causes, influences, and effects of systemic, cultural, institutional, and interpersonal racism; and (b) how to prevent and ameliorate the health effects of racism.(5) Our AMA: (a) supports the development of policy to combat racism and its effects; and (b) encourages governmental agencies and nongovernmental organizations to increase funding for research into the epidemiology of risks and damages related to racism and how to prevent or repair them. (6) Our AMA will work to prevent and combat the influences of racism and bias in innovative health technologies. [Resolution. 5, I-20]

Adverse Childhood Experiences and Trauma-Informed Care H-515.952

Our AMA recognizes trauma-informed care as a practice that recognizes the widespread impact of trauma on patients, identifies the signs and symptoms of trauma, and treats patients by fully integrating knowledge about trauma into policies, procedures, and practices and seeking to avoid re-traumatization. [Resolution 504, A-19 Appended: CSAPH Rep. 3, A-21]

Support of Human Rights and Freedom H-65.965

Our AMA: (1) continues to support the dignity of the individual, human rights and the sanctity of human life, (2) reaffirms its long-standing policy that there is no basis for the denial to any human being of equal rights, privileges, and responsibilities commensurate with his or her individual capabilities and ethical character because of an individual's sex, sexual orientation, gender, gender identity, or transgender status, race, religion, disability, ethnic origin, national origin, or age; (3) opposes any discrimination based on an individual's sex, sexual orientation, gender identity, race, religion, disability, ethnic origin, national origin or age and any other such reprehensible policies; (4) recognizes that hate crimes pose a significant threat to the public health and social welfare of the citizens of the United States, urges expedient passage of appropriate hate crimes prevention legislation in accordance with our AMA's policy through letters to members of Congress; and registers support for hate crimes prevention legislation, via letter, to the President of the United States. [CCB/CLRPD Rep. 3, A-14 Reaffirmed in lieu of Res. 001, I-16 Reaffirmation: A-17]