

AMERICAN MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution: 010
(A-24)

Introduced by: Medical Student Section

Subject: Supporting the Health of Our Democracy

Referred to: Reference Committee on Amendments to Constitution and Bylaws

1 Whereas, our American Medical Association “acknowledges voting is a social determinant of
2 health and significantly contributes to the analyses of other social determinants of health as a
3 key metric”; and
4

5 Whereas, our AMA “recognizes that gerrymandering which disenfranchises
6 individuals/communities limits access to health care, including but not limited to the expansion
7 of comprehensive medical insurance coverage, and negatively impacts health outcomes”; and
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9 Whereas, our AMA “will collaborate with appropriate stakeholders and provide resources to
10 firmly establish a relationship between voter participation and health outcomes”; and
11

12 Whereas, the Association of American Medical Colleges (AAMC) supports medical schools and
13 teaching hospitals facilitating nonpartisan voter registration efforts¹; and
14

15 Whereas, a growing body of research demonstrates the relationship between the political
16 determinants of health (including voter rates, government participation, and policy engagement)
17 and other social determinants, including how votes lost to morbidity and mortality in
18 underrepresented populations impact electoral and policy outcomes²⁻⁴; and
19

20 Whereas, lower voter rates among elderly patients, patients with disabilities, patients who are
21 socially isolated, and low-income patients are associated with poor reported health, and
22 increased voter rates are associated with healthier lifestyle behaviors and improved mental
23 health, even when controlling for income inequality⁴⁻¹⁰; and
24

25 Whereas, health facilities’ nonpartisan voter registration efforts demonstrate improved civic
26 engagement and are protected by the National Voter Registration Act and IRS code¹¹⁻¹⁴; and
27

28 Whereas, emergency absentee ballot access for people experiencing or managing medical
29 emergencies is variable across states, with only 23 offering coverage for patients’ relatives and
30 only 17 extending protections to healthcare workers¹²; and
31

32 Whereas, physician voter rates are lower than the general public, often due to work conflicts,
33 although rates are higher in states with universal mail ballots¹⁵⁻¹⁶; and
34

35 Whereas, President Biden’s Executive Order on Promoting Access to Voting strongly
36 encourages federal agencies, including Veterans Health Administration (VHA) and Indian Health
37 Service sites to seek designation as voter registration sites¹⁷; and

1 Whereas, other federal health and social programs such as the VHA, Medicaid, and SNAP/WIC
 2 offer voter registration services, and the Health Resources and Services Administration even
 3 offers guidance for Federally Qualified Health Centers to organize such efforts^{12,18-19}; and

4
 5 Whereas, civic engagement efforts are limited at Indian Health Service, Tribal, and Urban Indian
 6 Health Programs, which are crucial interfaces with Native American patients and Tribal
 7 governments²⁰⁻²¹; and

8
 9 Whereas, gerrymandering disenfranchises voters, especially voters of color and low-income
 10 voters, resulting in electoral outcomes that do not accurately reflect popular votes and
 11 subsequent governments who often limit ballot access once in power²²⁻²⁴; and

12
 13 Whereas, increased gerrymandering and barriers to ballot access are associated with lower life
 14 expectancies, obstruction of Medicaid expansion, and perpetuation of systemic racial health
 15 inequities, especially among Black, Latine, and Native American populations^{3,23-24}; and

16
 17 Whereas, the primary solution to gerrymandering is the creation of independent, nonpartisan
 18 redistricting commissions, so if our AMA recognizes that gerrymandering is a threat to health
 19 outcomes, then we should support solutions to mitigate this problem²⁵; therefore be it

20
 21 RESOLVED, that our American Medical Association support efforts to engage physicians and
 22 other healthcare workers in nonpartisan voter registration efforts in healthcare settings,
 23 including emergency absentee ballot procedures for qualifying patients, visitors, and healthcare
 24 workers (New HOD Policy); and be it further

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 26 RESOLVED, that our AMA support the use of independent, nonpartisan commissions to draw
 27 districts for both federal and state elections. (New HOD Policy)

28
 Fiscal Note: Minimal - less than \$1,000

Received: 4/24/2024

REFERENCES

1. Fact Sheet for Nonpartisan Voter Registration at Health Care Institutions. AAMC. Accessed May 14, 2023. <https://www.aamc.org/advocacy-policy/voterregistration>
2. Social Determinants of Health. Office of Disease Prevention and Health Promotion. <https://health.gov/healthypeople/priority-areas/social-determinants-health>. Accessed June 6, 2023.
3. Syed Q, Schmidt S, Powell R, Henry T, Connolly N, Cowart J, Newby C. Gerrymandering and Political Determinants of Health. Mary Ann Liebert, Inc. Published Aug 8, 2022. <https://doi.org/10.1089/pop.2021.0362>
4. Brown CL, Raza D, Pinto AD. Voting, health and interventions in healthcare settings: a scoping review. *Public Health Rev.* 2020;41:16.
5. Nelson MH. Explaining socioeconomic disparities in electoral participation: The role of health in the SES-voting relationship. *Soc Sci Med.* 2023;320:115718. doi:10.1016/j.socscimed.2023.115718
6. Ballard PJ, Hoyt LT, Pachucki MC. Impacts of adolescent and young adult civic engagement on health and socioeconomic status in adulthood. *Child Dev* 2018;00(0):1-17. Available from:<http://doi.wiley.com/10.1111/cdev.12998>.
7. Arah OA. Effect of voting abstention and life course socioeconomic position on self-reported health. *J Epidemiol Community Health.* 2008;62(8):759-60. <https://doi.org/10.1136/jech.2007.071100>.
8. Ballard PJ, Hoyt LT, Pachucki MC. Impacts of adolescent and young adult civic engagement on health and socioeconomic status in adulthood. *Child Dev* 2018;00(0):1-17. Available from:<http://doi.wiley.com/10.1111/cdev.12998>.
9. Bergstresser SM, Brown IS, Colesante A. Political engagement as an element of social recovery: a qualitative study. *Psychiatr Serv.* 2013;64(8):819-21 Available from:<http://psychiatryonline.org/doi/abs/10.1176/appi.ps.004142012>.
10. Kawachi I, Kennedy BP, Gupta V, Prothrow-Stith D. Women's status and the health of women and men: a view from the States. *Soc Sci Med.* 1999;48(1):21-32.
11. The National Voter Registration Act Of 1993 (NVRA). US Department of Justice. Published online July 20, 2022. <https://www.justice.gov/crt/national-voter-registration-act-1993-nvra>
12. Tang OY, Wong KE, Ganguli R, et al. Emergency Absentee Voting for Hospitalized Patients and Voting During COVID-19: A 50-State Study. *West J Emerg Med.* 2021;22(4):1000-1009. Published 2021 Jul 15. doi:10.5811/westjem.2021.4.50884
13. Lickiss S, Lowery L, Triemstra JD. Voter Registration and Engagement in an Adolescent and Young Adult Primary Care Clinic. *J Adolesc Health.* 2020;66(6):747-749. doi:10.1016/j.jadohealth.2019.11.316
14. Chamberlain C, Jaime H, Wohler D. Emergency Patient Voting Initiative in a Community Hospital During a Global Pandemic: Lessons and a Call-to-Action for Expanded Voter Access. *Dela J Public Health.* 2021;7(1):76-77. Published 2021 Jan 21. doi:10.32481/djph.2021.01.015

15. Solnick RE, Choi H, Kocher KE. Voting Behavior of Physicians and Healthcare Professionals. *J Gen Intern Med.* 2021;36(4):1169-1171. doi:10.1007/s11606-020-06461-2
16. Ahmed A, Chouairi F, Li X. Analysis of Reported Voting Behaviors of US Physicians, 2000-2020. *JAMA Netw Open.* 2022;5(1):e2142527. doi:10.1001/jamanetworkopen.2021.42527
17. Biden J. Executive Order on Promoting Access to Voting. The White House. Published online March 7, 2021. <https://www.whitehouse.gov/briefing-room/presidential-actions/2021/03/07/executive-order-on-promoting-access-to-voting>
18. VA promotes greater access to voter information to Veterans and families. Veterans Affairs. Published online March 24, 2022. <https://news.va.gov/press-room/va-promotes-greater-access-to-voter-information-to-veterans-and-families>
19. Hess D. Using Medicaid Automatic Voter Registration to Address Persistent Voter Registration Problems: Helping the National Voter Registration Act Achieve its Potential. Institute for Responsive Government. Published online June 23, 2023. <https://responsivegoverning.org/research/using-medicaid-automatic-voter-registration-to-address-persistent-voter-registration-problems-helping-the-national-voter-registration-act-achieve-its-potential>
20. Title I | Office of Direct Service and Contracting Tribes. Title I | Office of Direct Service and Contracting Tribes. Office of Direct Service and Contracting Tribes. Current as of 2023. <https://www.ihs.gov/odsct/title1/>
21. Martin A, Raja A, Meese H. Health care-based voter registration: a new kind of healing. *International Journal of Emergency Medicine.* Published online April 30, 2021. doi:https://doi.org/10.1186/s12245-021-00351-y
22. Cavell S. Why Gerrymandering Matters. Harvard University Press. July 9, 2018. Accessed May 28, 2023. https://harvardpress.typepad.com/hup_publicity/2018/07/why-gerrymandering-matters-allan-lichtman.html
23. Tausanovitch A and Root D. How Partisan Gerrymandering Limits Voting Rights. The Center for American Progress. July 8, 2020. Accessed May 28, 2023. <https://www.americanprogress.org/article/partisan-gerrymandering-limits-voting-rights/>
24. Study Finds Residents with Reduced Voter Access and in Gerrymandered States Have Worse Health Outcomes. Union of Concerned Scientists. Nov 7, 2019. Accessed on May 28, 2023. <https://www.ucsusa.org/about/news/study-finds-residents-reduced-voter-access-and-gerrymandered-states-have-worse-health>
25. Independent Redistricting Commissions. Campaign Law Center. Accessed on Sep 18, 2023. <https://campaignlegal.org/democracy/accountability/independent-redistricting-commissions>

RELEVANT AMA Policy

Support for Safe and Equitable Access to Voting H-440.805

1. Our AMA supports measures to facilitate safe and equitable access to voting as a harm-reduction strategy to safeguard public health and mitigate unnecessary risk of infectious disease transmission by measures including but not limited to: (a) extending polling hours; (b) increasing the number of polling locations; (c) extending early voting periods; (d) mail-in ballot postage that is free or prepaid by the government; (e) adequate resourcing of the United States Postal Service and election operational procedures; (f) improved access to drop off locations for mail-in or early ballots; and (g) use of a P.O. box for voter registration.
2. Our AMA opposes requirements for voters to stipulate a reason in order to receive a ballot by mail and other constraints for eligible voters to vote-by-mail.
3. Our AMA: (a) acknowledges voting is a social determinant of health and significantly contributes to the analyses of other social determinants of health as a key metric; (b) recognizes that gerrymandering which disenfranchises individuals/communities limits access to health care, including but not limited to the expansion of comprehensive medical insurance coverage, and negatively impacts health outcomes; and (c) will collaborate with appropriate stakeholders and provide resources to firmly establish a relationship between voter participation and health outcomes.

Medical Student, Resident/Fellow, and Physician Voting in Federal, State and Local Elections D-65.982

Our AMA will: (1) study the rate of voter turnout in physicians, residents, fellows, and medical students in federal and state elections without regard to political party affiliation or voting record, as a step towards understanding political participation in the medical community; and (2) work with appropriate stakeholders to ensure that medical students, residents, fellows and physicians are allowed time to vote without penalty on Election Days.