# XI. Joint Policy Committee (JPC) Report to the Governing Council

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JPC Co-Chairs

October 29, 2024



#### Regular proposed policy statements

10 proposed policy statements were re-submitted in August and reviewed by the JPC in September

- A1: Supporting Physical Activity for Transgender Individuals
- A2: Increasing Access to Telehealth Medication Abortion in the United States
- A3: A Call to Protect Access to Gender Affirming Care Nationwide in the Wake of Stricter Health
   System Religious Practices
- A4: Actions to Incorporate Traditional, Complementary and Integrative Health Care Practices into Primary Disease Prevention and Health Promotion Policies
- A5: Advancing Community-Based Participatory Practice in Public Health
- A6: The Case for Equity and Justice-Centered Racial and Ethnic Public Health Data Collection Practices
- B1: Equitably Applying Artificial Intelligence in the United States Workforce Using Training and Collaboration
- B2: Protecting the Health and Safety of Workers Who Respond to Disasters: Achieving Equity Through
   Education and Training
- B3: A Multi-Component Approach to Increasing Prescription Drug Safety
- C1: Meeting the Health and Psychosocial Needs and Ensuring the Human Rights of Refugees from Nagorno Karabakh



#### Regular proposed policy statements

- 7 received positive assessments in this 2<sup>nd</sup> review
  - -A1, A2, A4, A5, A6, B1, B3
- 3 received negative assessments as they did not adequately address the changes, recommendations, and clarifications requested in the JPC's spring review
  - -A3, B2 and C1
    - » B2 and C1 moved forward to public hearings despite the negative assessment.
    - » A3 was withdrawn.



#### Removal of C3 and C5

C3: Antisemitism as a Public Health Crisis and C5: Support for Health Equity and Justice in the Occupied Palestinian Territories departed from APHA's intent to provide substantially new, evidence-based, policy statements on significant public health issues containing action steps that should be taken by entities external to APHA.

The JPC made a motion to the Executive Board to remove proposed policy statements C3 and C5 from the 2024 proposed policy statement review cycle, which was approved in May 2024.



#### **Late Breakers**

2 late breakers were submitted by the October 6<sup>th</sup> deadline

- The Islamic Republic of Iran and Its Proxies are an International Public Health Threat
- Empowering Health Organizations to Address the Palestinian Catastrophe

All four of the following criteria must be met for consideration as a late-breaker:

- They did not represent emergent events
- APHA has an existing policy statement addressing the issue presented
- Their action steps were inappropriate for addressing the issue/ problem outlined in the policy statement
- The statements were formatted incorrectly

Both were deemed not to meet the criteria



#### **Public Hearings**

2 successful public hearings were held on Monday, October 21 (Group A) and Tuesday, October 22 (Groups B and C).

The hearings were attended by close to 80 members each day.



#### **Archiving**

- The 14 policy statements adopted in 2004 and the 15 policy statements adopted in 2014 are scheduled for archiving.
  - Policy statements adopted in 2014 or later are scheduled for archiving after 10 years vs. the previous 20 years.
- APHA members were asked to review these statements and consider three potential options:
  - Remain on the archiving consent agenda
  - Update a policy statement scheduled for archiving
  - Request to keep active a PS to be archived



#### **Archiving (continued)**

- The Science Board received two requests to keep active policy statements
  - 20049- Promoting Public Health and Education Goals through Coordinated School Health Programs
  - 20143- Sexuality Education as Part of a Comprehensive Health Education Program in K to 12 Schools
- Following review, the Science Board recommended to the JPC to archive these policy statements as scheduled
- The JPC accepted the recommendation of the Science Board and recommends the statements be archived
- As a reminder, archived policy statements continue to serve as historical documents. They can
  be accessed by all APHA members and will be provided to non-members upon request. Policy
  statements are archived in order to ensure APHA policy statement maintain accurate evidence
  and scientific reasoning and feasible and applicable actions steps.



#### **Archiving**

Motion: The JPC RECOMMENDS Policy Statement 20049, <u>Promoting</u>
Public Health and Education Goals through Coordinated School Health
<u>Programs</u> be archived as scheduled

- Yea
- Nay



#### **Archiving**

Motion: The JPC RECOMMENDS Policy Statement 20143, Sexuality Education as Part of a Comprehensive Health Education Program in K to 12 Schools be archived as scheduled

- Yea
- Nay





The JPC recommends the following 7 proposed policy statements for adoption:

- A1- Supporting physical activity for transgender and gender diverse individuals
- A4- Actions to Incorporate Traditional, Complementary, and Integrative Health Care Practices into Primary Disease Prevention and Health Promotion Policies
- A5- Advancing Community-Based Participatory Practice in Public Health
- A6- The Case for Improved Racial and Ethnic Public Health Data Collection Practices to Reduce Racial Disparities in Health
- B1- Equitably Applying Artificial Intelligence in the United States Workforce Using Training and Collaboration
- B2- Protecting the Health and Safety of Workers who Respond to Disasters: Achieving Equity through Education and Training
- B3- Improving Public Health by Advancing a Multi-component Approach to Increasing Prescription Dispensing Safety in U.S. Outpatient Pharmacies



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- A6- The Case for Improved Racial and Ethnic Public Health Data Collection Practices to Reduce Racial Disparities in Health
- B1- Equitably Applying Artificial Intelligence in the United States Workforce Using Training and Collaboration
- B2- Protecting the Health and Safety of Workers who Respond to Disasters: Achieving Equity through Education and Training

\*B2 moved from a negative assessment in the Fall 2024 to the consent agenda following substantial revisions in response to the fall review and public hearings

 B3- Improving Public Health by Advancing a Multi-component Approach to Increasing Prescription Dispensing Safety in U.S. Outpatient Pharmacies



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**Motion:** To adopt the following proposed policy statements as a part of the consent agenda: A1, A4, A5, A6, B1, B2, B3

- -Yea
- -Nay



## **POLICY DISCUSSION RULES**

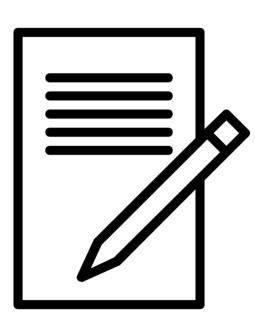
- Discussion Limited to 15 Minutes on Any Policy
- Council May Vote to Extend by 10 Minutes (Simple Majority)
- <u>MUST</u> address Comments to the Mr. Speaker.
   Comments ARE NOT addressed to other Councilors.
- Individual Comments Limited to 60 Seconds



## REMINDERS

Amendments <u>MUST</u> be submitted in writing PRIOR to speaking:

GOVERNANCE@APHA.ORG



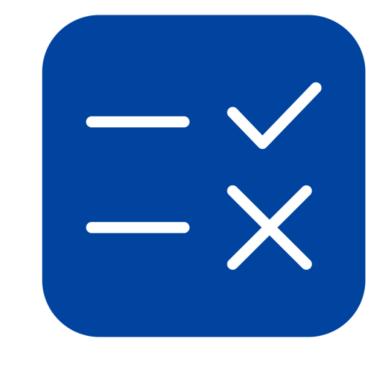


# **POLICY DISCUSSION**

Microphone 1: FOR

Microphone 2: AGAINST

Microphone 3: QUESTION



# Additional Recommendations



The JPC DOES NOT recommend the following proposed policy statements for adoption:

A2: Increasing Access to Telemedicine Medication Abortion in the United

The JPC DOES NOT recommend the following proposed policy statements for adoption:

A2: Increasing Access to Telemedicine Medication Abortion in the United

A2 moved from a positive assessment in Fall 2024 to the recommendation to not adopt due to significant concerns, including major deficiencies in the evidence base, raised by representative from the Sexual and Reproductive Health Section at the public hearings, as well as during the Science Board's and JPC's business meeting in October 2024.



**Motion:** To adopt policy statement A2: Increasing Access to Telemedicine Medication Abortion in the United

JPC Recommendation: DO NOT ADOPT

- -Yea
- -Nay



The JPC DOES NOT recommend the following proposed policy statements for adoption:

C1: Meeting the health and psychosocial needs and ensuring the human rights of refugees from Nagorno Karabakh

The JPC DOES NOT recommend the following proposed policy statements for adoption:

C1: Meeting the health and psychosocial needs and ensuring the human rights of refugees from Nagorno Karabakh

The JPC does not recommend adoption of C1. Concern from the Science Board and the JPC remain following a negative assessment in the Fall 24, primarily around the lack of connection between the Problem Statement, Evidence Based Strategies and Action Steps.



**Motion:** To adopt policy statement C1: Meeting the health and psychosocial needs and ensuring the human rights of refugees from Nagorno Karabakh

JPC Recommendation: DO NOT ADOPT

- -Yea
- Nay

