

## Alleviating the impact of political debates on medical education

### Issue:

According to the [AMA Principles of Medical Ethics](#), “A physician shall, while caring for a patient, regard responsibility to the patient as paramount,” and toward this responsibility, the purpose of medical education is to meet the needs of patients today and in the future. Although the AMA has robust policy protecting the physician-patient relationship from outside forces, such as the [AMA Stance on the Interference of the Government in the Practice of Medicine H-270.959](#), political debates that intrude on physician autonomy to practice medicine in the best interests of the patient also impact medical education, to the detriment of opportunities for learners to achieve competence in areas of practice. This issue brief describes some challenges in medical education related to current political debates in the U.S. and offers strategies to promote effective medical education in the face of these challenges.

### Background:

AMA frequently advocates in support of [physician autonomy](#) in care for patients. For instance, in response to the U.S. Supreme Court’s ruling in *Dobbs v. Jackson Women’s Health Organization*, the AMA continues to emphasize advocacy for access to [reproductive health care](#). AMA also opposes state legislation that prohibits the provision of medically-necessary [gender transition-related care](#), counters medical [mis- and disinformation](#), and, in conjunction with other organizations and individuals, successfully [advocated against “gag laws”](#) that sought to restrict physician conversations with patients about gun safety. Within medical education, AMA, for example, supports race-conscious admissions, [joined an amicus brief](#) against ending affirmative action, and continues to work in coalition with other groups to [strategize and promote a diverse workforce](#).

However, as Dr. Graham McMahon, president and CEO of the Accreditation Council for Continuing Medical Education (ACCME) pointed out at the AMA Council on Medical Education’s June 2024 educational session, “Exploring the impacts of current political debates on medical education,” political controversy may have a “chilling effect.” Charged topics can create an uncomfortable atmosphere for physician educator and learner engagement, even in the absence of tangible, legal repercussions. People may refrain from expressing themselves due to fear. Uncertainty in an ever-changing legal and political landscape can impact medical education. This impact can include [concerns about travel](#) to states with laws that restrict certain forms of medical care or educator [concerns about job security and funding](#) in the face of anti-diversity pushback, even when at the present time certain laws may not directly restrict the education of current and future physicians.

Outside the AMA, medical education organizations offer resources to address these concerns, such as:

- The Association of American Medical Colleges joined with other organizations to [support academic freedom](#) in higher education and offers resources on topics such as [assessing and improving institutional culture and climate](#).
- The Accreditation Council for Graduate Medical Education (ACGME) hosted “[Roe v Wade and the Future of Graduate Medical Education](#)” and continues to collaborate on infrastructure that allows

programs to meet requirements. Dr. Lynne Kirk, chief accreditation officer, emphasized at an educational session at the AMA's June 2024 Annual Meeting that physicians who complete ACGME-accredited training must be capable of practicing in every state, as well as around the world, while simultaneously following the law, and that the house of medicine can come together to create solutions. ACGME also offers [Equity Matters](#), an "immersive 18-month facilitated program... to develop and implement projects that address workforce diversity and build inclusive learning environments." Dr. Kirk noted that affirmative action is itself not required to meet ACGME standards and that many efforts toward improving health equity for underserved populations may be reframed and enacted, even under existing restrictions.

- The American College of Obstetricians and Gynecologists (ACOG) offers [evidence-based resources](#), including a member portal for abortion-related questions and clinical guidance and advocacy resources.
- The American Board of Medical Specialties (ABMS) tracks and/or engages with impactful legislation and participates in offering guidance on [professionalism and self-regulation](#).
- The ACCME offers [Diversity, Equity, and Inclusion](#) resources and emphasizes the power in choice-based education to drive patient care. Physicians, Dr. McMahon noted, are protected by free speech in the teaching of evidence-based patient care and protected in having conversations with peers on professional topics. "Keep talking, teaching, and doing the right thing for patients," Dr. McMahon concluded.

## Potential Strategies:

- Research and raise awareness about proposed legislation versus enacted laws, debunking misunderstandings and providing encouragement against the "chilling effect" of controversy
- Reframe work and learning in legally appropriate ways and continue to emphasize the importance of excellent and comprehensive medical education
- Advocate that medical education and standards organizations provide guidance to medical educators and learners on how to achieve competency in the face of political interference impacting education
- Encourage programs and individuals to reach out to medical education organizations with concerns and requests for assistance
- Advocate for the utmost importance of the physician-patient relationship, including educating the public how political interference in physicians' responsibility to their patients damages their health

## Moving Forward:

The AMA has many policies that address the physician-patient relationship and its protection from outside factors. For example, the AMA:

- opposes the interference of government in the practice of medicine, including the use of government-mandated physician recitations ([H-270.959](#))
- strongly condemns any interference by government or other third parties that compromise a physician's ability to use their medical judgment as to the information or treatment that is in the best interest of their patients ([H-373.995](#))
- informs the American public as to the dangers inherent in regulations or statutes restricting communication between physicians and their patients ([H-5.989](#))

## AMA Resources:

- [Council on Medical Education](#)
- [PolicyFinder](#)
- [Health Care Advocacy](#) (including [model bills](#))
- [ChangeMedEd](#)
- [Center for Health Equity](#)
- [LGBTQ+ Section](#)
- [Academic Physicians Section](#)
- [CME from AMA Ed Hub](#)