# **POLITICAL AFFAIRS NEWSLETTER**

ISSUE NO. 13 | DECEMBER 2023

### **Member Spotlight: Jordan Paluch, OMS III**

#### What is your advocacy passion and how did you get involved?

I stumbled into advocacy during my time as a pre-medical student when I initiated collaboration between my state's osteopathic association (WAOPS) and my Pre-SOMA chapter. One of the WAOPS physicians, Dr. Lenard Markman, invited me to join him at an event called Doctor Day. This experience included networking, educational sessions, and legislative visits at our state's capitol building. Engaging in advocacy alongside Dr. Markman and grasping the significance of being a physician advocate, particularly through his narrative of lobbying for epinephrine legislation leading to the creation of state laws, ignited my passion for this aspect of healthcare. The WAOPS team consistently supported me since my junior year of college, thus one of my advocacy focuses has been shaped around advancing their initiatives. Additionally, my experiences with underserved populations in West Virginia and at the Hazelden Betty Ford rehabilitation center for their SIMS program have cultivated my interest in substance use disorders and addiction medicine.



JORDAN PALUCH, OMS III (LEFT), CURRENTLY SERVES AS JUNIOR PRE-SOMA DIRECTOR FOR THE SOMA NATIONAL BOARD OF DIRECTORS.

What advice would you give to someone who is interested in advocacy? If you're interested in advocacy, I recommend reaching out to the state osteopathic association where you plan to practice in the future. This will expose you to the key issues in that state and offer you both a community and a platform to ensure your voice is heard. If your long-term location is uncertain but you know your desired specialty, I would consider connecting with the specialty organization in your field of interest. Understanding the issues that the specialty consistently faces will enable you to contribute to meaningful change. Lastly, I would recommend the Osteopathic Political Action Committee (OPAC) for a variety of advocacy opportunities; their website provides extensive information on how you can get involved. Nominate an outstanding SOMA member for a Member Spotlight HERE

## **FEATURED ARTICLES**

### **Internal News**

# Is Modernizing the NIH a Win for Osteopathic Medical Research?

Senator Bill Cassidy, M.D., a gastroenterologist and Republican Senator from Louisiana, recently released a <u>statement</u> seeking vital input to revamp the National Institutes of Health (NIH) with the objective of modernizing the institution. As the Ranking Member of the Senate Health, Education, Labor, and Pensions (HELP) Committee, Senator Cassidy invited stakeholders to provide input on key topics regarding the pace of scientific advancements, extramural and intramural research programs, and the overall structure and functions of NIH. **(cont. page 2)** 

### **External News**

#### **December 2023 Election Results**

2023 is an odd year for elections, but they happened nonetheless, and they came with some major changes – especially at the state level. Arguably, this election cycle <u>centered around abortion</u> since this issue was central to the Ohio Issue 1 ballot measure, the Virginia state legislature elections, and Pennsylvania's Supreme Court elections to name a few. In all of these cases, <u>abortion won on the ballot</u> with pro-choice candidates winning and Issue 1 passing. **(cont. page 4)** 

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#### Is Modernizing the NIH a Win for Osteopathic Medical Research?

(cont from page 1) In his September 2023 statement, Senator Cassidy emphasized the critical role the NIH plays in enhancing the health and well-being of all Americans. However, he also described what he views as an essential need to make the NIH more "transparent, nimble, and forward-thinking." In particular, he cites the COVID-19 pandemic response, stating that the NIH "...became a lightning rod for partisan debates..." which he believes hindered public trust in the institution.

In early October, the American Association of Colleges of Osteopathic Medicine (AACOM) encouraged osteopathic colleagues to share their opinions and responded to Senator Cassidy's request accordingly by advocating for greater representation and funding opportunities for osteopathic medical research within the NIH. Emphasizing the pivotal role of osteopathic physicians and researchers in advancing clinical research, AACOM outlined barriers the osteopathic community faces in securing adequate funding and representation within NIH councils and study sections.

AACOM also highlighted the crucial need for improved access to research funding, especially in primary care, non-prescription pain management, chronic disease care, and rural and underserved populations. They presented actionable policy recommendations, such as structured partnerships between the NIH and the osteopathic community, establishing programs incentivizing principal investigators from osteopathic institutions, and increased representation for osteopathic professionals within NIH councils and study selection reviewers. Later, the House Appropriations Subcommittee on Labor, Health and Human Services, Education, and Related Agencies (LHHSE) released explanatory materials for FY24 Departments of Labor, Health and Human Services, and Education, and Related Agencies Appropriations Act Explanatory Materials (H.R. 5894). Notably, the LHHSE spending bill report stated, "Osteopathic medical schools educate 25 percent of all medical students, and more research involving doctors of osteopathic medicine is needed to enhance primary care and improve healthcare for rural and underserved populations. The Committee urges NIH, in conjunction with national stakeholders, to consider how to best incorporate colleges of osteopathic medicine into research activities and involvement of their researchers on NIH National Advisory Councils and study sections to have better representation of the osteopathic medicine field." This statement could allow osteopathic physicians to contribute more fully to medical research and NIH advisory councils which is important as there have been documented discrepancies between osteopathic and allopathic medical student involvement in research. Additionally, between 2010 and 2020, only 0.07% of NIH grants were awarded to osteopathic medical schools compared to 37.37% awarded to allopathic schools.

However, while this statement sounds like a step towards equality in research opportunities for osteopathic physicians and medical students, it is worth noting that there are controversial budget cuts listed that do not align with the goal to "enhance primary care and improve healthcare for rural and underserved populations." Among these are cuts to public health and national health organizations such as the NIH, National Cancer Institute, National Institute of Mental Health, National Institute of Neurological Disorders and Stroke, CDC, Public Health Data Modernization, Office of Minority Health, Minority HIV/AIDS initiative, and Office of Women's Health .

In addition, the bill proposes the complete elimination of funding for the Ending the HIV Epidemic Initiative, Tobacco Prevention and Control, Firearm Injury and Mortality Prevention Research, Climate and Health Program, Title X Family Planning, Teen Pregnancy Prevention, and more. These reductions, spanning critical sectors like healthcare for underserved populations, contradict the stated objectives, raising concerns about the potential impact on essential programs and initiatives that aid the vulnerable communities many osteopathic physicians are committed to serving. One can only hope that the committee may find a way to continue to promote osteopathic involvement in the NIH without eliminating funding for programs that align with the goal of providing quality health care to all. For now, we will have to wait and see as the House adjourned on Wednesday, November 15th, without passing H.R. 5894. They intend to resume discussions after the Thanksgiving holiday.

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#### **December 2023 Midterm Election Results**

**Cont. from page 2)** Issue 1 in Ohio is an amendment to the constitution that <u>enshrines abortion and contraceptive</u> <u>care as a protected right</u>. However, the law does not prohibit the state from limiting abortion completely as it states "...abortion may be prohibited after fetal viability." Fetal viability is defined as the likelihood of survival of the fetus as assessed by the patient's treating physician and is determined on a case-by-case basis. This has been celebrated as a major win for pro-choice advocates across the country.

In Virginia, Republican Governor Glenn Youngkin <u>campaigned heavily</u> to win a majority government in both the state senate and house, but ultimately lost both bodies to the Democrats which spells trouble for his agenda. Part of his campaigning focused on a 15 week abortion ban with some exceptions which would be a severe limitation compared to the current 26 week and six day law that currently exists in Virginia. With the major loss and messaging failure, the law will remain in effect and providers can continue to provide care in the state.

Interestingly, the <u>Pennsylvania race</u> indicates that even while avoiding discussing abortion, Republicans may have still stunted their popularity with the overturning of Roe v Wade. Republican candidate Carolyn Carluccio did not discuss abortion much while campaigning; however, she was still endorsed by anti-abortion groups. In contrast, Democrat Dan McCaffery made protecting abortion rights (and other rights) central to his campaign stating that the recent decisions and scandals of the national Supreme Court made constituents pay more attention. McCafferey's victory over Carluccio is indicative that simply staying silent on the matter may not be enough to toe the line to a win.

This election cycle served as a nation-wide refutation of the pro-life/anti-abortion rhetoric from the national Republican party; even top brass <u>Republicans are taking notice</u> with Sen. Mitt Romeny (R-UT) noting "in many states, abortion is not a winning issue for Republicans." Pro-life/anti-abortion group American United for Life is even calling for red states that have citizen-led ballot measures to scrap them and only allow for state-legislatures to call for the ballot measures as a way to prevent changes to current bans and limitations in place. This election cycle paints an interesting picture for the Republican primaries and candidates still in the running since it may indicate a necessity to pivot from anti-abortion rhetoric. While Donald Trump still holds a significant lead and is <u>noncommittal</u> on a federal ban, other candidates have taken hardline stances either for or against a national ban.



Make your voice heard by voting in your local, state, and national elections. Go to https://www.usa.gov/register-to-vote to learn how to sign up to vote in your state. See you at the polls!