

**SERVING
OUR SOCIETIES**

NEWSLETTER 2024

Internal News

Advocacy Focus SOMA FALL HOUSE OF DELEGATES

By Anika Gupta

For November, the SOMA advocacy theme is "Serving our Societies." We recently had OMED in San Antonio, Texas this past September. Osteopathic medical trainees from all over the country could attend professional development sessions, hear from keynote speakers, and network with physicians. SOMA had its Fall House of Delegates during OMED and passed many resolutions that follow the advocacy theme for this month; here are some highlights.

Photo by National SOMA



F-24-01

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The first resolution, F-24-01, that passed was about addressing climate change within the medical education curriculum. This resolution aimed to include climate and health education within the Environment and Occupational Medicine core competency to ensure that students understand the complex interactions between climate change and population health. This resolution being passed is important considering the increasing prevalence of climate-related disasters, their impact on vulnerable populations, and the different diseases that can emerge as the climate continues to change.

F-24-04

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The second resolution, F-24-04, called for more accessibility and availability of information on these funds and resources so residents and potentially medical students can access them, especially given the long hours many residents and medical students work. Currently, ACGME requires that safe transportation options be made available for resident physicians.

F-24-06

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november newsletter

Internal News

In honor of this month's advocacy focus, "**Serving our Society**", we highlight several resolutions **passed** at OMED addressing climate change, mental health disclosure, and fertility preservation.

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Member Spotlight

Initially hesitant about getting involved, **Raelynn Dorscheid** shares her advocacy journey and how she discovers her commitment through SOMA and offers insights on how you can participate.

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External News

Hurricane Helene's unexpected impact in October 2024 exposed critical **vulnerabilities** in the U.S. healthcare supply chain, sparking urgent calls for **better disaster preparedness** and innovative solutions to combat **climate-related health challenges**.

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The third resolution, F-24-06, that passed advocated for education about disability insurance plans on behalf of medical students. The cost of medical school can range from \$100,000- \$200,000 so most medical students will be in six-figure debt by the time they graduate. A disabling injury can prevent a student from completing their studies and can result in severe financial hardship. Given the lost income, disability insurance can provide a safety net.

F-24-16

Photo by Canva



The fourth resolution, F-24-16, discussed educating medical students about the process of disclosing mental health related issues for state licensure. Training to become a physician is grueling and can lead to many experiencing mental health problems such as depression, burnout, anxiety, etc. However, the majority of students do not seek care because of the perceived consequences and stigma. This resolution was written with the intention to ease students' fears and educate them that most residency programs comply with the Americans with Disabilities Act (ADA), so they should seek mental health care. However, this resolution also highlighted the importance of taking action when programs are found to be discriminating against medical students who have sought proper mental health treatment.

F-24-08

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The final resolution I will talk about is one that I wrote. F-24-08 is about advocating for fertility preservation and family planning resources for medical students. I am really passionate about this topic because I was an active member of the American Medical Women's Association during college. I sat on their infertility subcommittee and met many

female physicians who waited until after training to have kids. The majority of them could not conceive without some form of medical intervention and did not know the high cost of IVF, oocyte preservation, and other procedures. This resolution seeks to assist medical students who have or are planning to have children throughout their medical training and/or career. As family planning progressively becomes difficult, from a physical, emotional, and financial standpoint, bringing awareness, education, and resources to students encourages early family planning that may alleviate potential stressors encountered in the future.

Overall, the Fall SOMA House of Delegates was a success with 13 resolutions being passed! I am so proud and amazed at all the wonderful ways osteopathic medical students around the country are advocating for themselves and their patients. I can't wait to see how SOMA members use their knowledge and training as physicians to pursue the things they are passionate about in the future!

Photo by National SOMA



Photo by Canva



For further information on all adopted resolutions, visit the [SOMA Policy Database!](#)

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Member SPOTLIGHT

By Joy Jarnagin

What is your advocacy passion?

My advocacy passions are vastly different from one another. But that's the beauty of advocacy. Your interests can be so different, and you can still be involved with each and make an impact. One of my greatest advocacy passions is advocating for newborn and pediatric patient populations. When I was younger, seeing close family friends impacted by congenital health conditions and illness truly sparked my passion for advocating for this patient population. There are so many aspects of policy that have an indirect effect on children and many times, they cannot advocate for themselves. As a future physician, I am passionate about helping these individuals and families be heard. In addition to this patient population, mental health advocacy is a major passion of mine, especially for medical students. We are all focused on caring for others but we have to take care of ourselves first so we can take care of others.

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We are all **focused** on **caring for others** but we have to take care of **ourselves first**...

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How did you get involved in advocacy?

Advocacy was never something I really saw myself getting involved with. It wasn't until joining SOMA that I really learned about what advocacy is. I was asked to help work on resolutions surrounding the topic of substance use disorders before my first SOMA House of Delegates. I'll be honest, I remember being so confused as to what I was helping with and what was the point- I'm just a student. When I attended DO Day on Capitol Hill for the first time, I



Raelynn Dorscheid, OMS III
OSTEOPATHIC PRINCIPLES & PRACTICES DIRECTOR

realized my “why” and began understanding the process of policy. I knew I was hooked. I learned there is a difference between politics and policy. Even as a student, our voice can be heard and deserves to be part of the conversation. After this first weekend immersed in advocacy, I then became more involved with SOMA policy as a Resolution Committee member and resolution author and began developing rapport with my state delegation.

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Photo by Raelynn Dorscheid





Photo by Raelynn Dorscheid

What has been your favorite advocacy moment as a member of SOMA?

There have been many incredible advocacy moments during my time as a SOMA member. The past two summers, SOMA has had incredible success at the AOA House of Delegates. Seeing SOMA cultivating conversations around important topics such as safety of healthcare workers, access to birth control, inclusive language surrounding substance use disorders and mental health advocacy for the geriatric population, has been truly inspirational. Being able to work with SOMA members from my school on their policy passion project of geriatric mental health and seeing the resolution evolve from drafts to SOMA policy to AOA policy was an incredible process to witness and help advocate for. SOMA's success in the AOA House of Delegates wouldn't be possible without the voices of student delegates. Seeing the student voice being heard loud and proud will always be one of my favorite advocacy moments.

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Seeing the **student voice** being **heard loud** and **proud...**

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What advice would you give to someone who is interested in advocacy?

Advocacy can definitely be intimidating at first if you've never been exposed to it. Once you step into the advocacy world, it is one of the most incredible environments to be part of. You find like-minded individuals who share your passions and you find friends and mentors for life. My advice is to get involved with local

SOMA chapters as well as learn more about your state society. This is a great first step to learning about issues in your community and the ongoing initiatives. You can also reach out to your SOMA leaders, both local and national! Many of us all have policy passions and are more than happy to help you get involved and point you in the right direction for you to pursue yours.

*Nominate an outstanding SOMA member for Member Spotlight [HERE](#).

External News

HEALTH CHALLENGES OF CLIMATE CHANGE

By Mitchell Stoddard

Photo by Canva



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Political Affairs

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Photo by Canva

Hurricane Helene, which struck the southeastern United States in October 2024, triggered a [severe shortage of intravenous \(IV\) fluids nationwide](#). The disruption occurred when flooding in North Carolina forced the shutdown of a major Baxter International plant, one of the largest producers of IV fluids in the country. As a result, hospitals across the nation struggled to maintain adequate supplies, leading to the implementation of rationing protocols and alternative methods for medication delivery. In response, [Baxter and other organizations began importing IV fluids](#) from international sources. At the same time the U.S. Food and Drug Administration (FDA) authorized the compounding of IV solutions and allowed temporary imports to meet the demand. This incident highlighted the vulnerability of the U.S. healthcare supply chain to natural disasters, underscoring the need for more resilient and diversified production strategies to prevent future disruptions. The shortage also raised broader concerns about the healthcare system's ability to manage critical supply shortages during crises, sparking discussions on disaster preparedness and the safeguarding of essential medical supplies.

Photo by Canva



Additionally, the [effects of climate change have intensified health challenges](#). Rising global temperatures have led to a surge in heat-related illnesses, such as heatstroke and dehydration, particularly affecting vulnerable populations like the elderly and individuals with pre-existing conditions. Climate change has also expanded the geographical range of infectious diseases like malaria and Lyme disease, as warmer temperatures enable vectors like mosquitoes and ticks to thrive in new regions. Poor air quality, worsened by wildfires and pollution, has aggravated respiratory conditions such as asthma and COPD, while flooding and heavy rains increase the risk of waterborne illnesses. In response to these growing challenges, healthcare systems must adapt by not only managing the immediate physical health impacts, but also developing long-term strategies to mitigate future risks such as increasing preparedness and resilience of key production facilities.



Photo by Canva

SOMA members wishing to get involved in promoting our healthcare system's transition to sustainability can contact their local representatives and draft pertinent resolutions for the next house!

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