

## The Reply



LaRocca appears to agree that we should eliminate mental health questions on applications for medical licensure.<sup>1</sup> And I wholeheartedly agree with his suggestion that an experienced health condition or disability is a very important asset to providing health care for people with health conditions and disabilities. In the legal profession, I have never heard of a disability rights advocate who did *not* have a disability. But I would take his suggestion one step further.

Can the medical profession really claim to be a legitimate purveyor of the interests of people with health conditions and disabilities when there are no out physicians with health conditions or disabilities? In the words of U.S. Senator Tom Harkin, “How many persons with disabilities do you know in the medical community at large?”<sup>2</sup> Does it matter if they are all closeted in part because of medical licensure applications and other institutional policies that make it almost impossible for them to come out?

I would argue that the absence of out physicians with health conditions and disabilities substantially limits the ability of the medical profession to advocate on behalf of people with health conditions and disabilities. And that is one reason why removing mental health questions from licensure applications, and eliminating physician impairment and resident well-being policies, needs to be a top priority of the medical profession and the incoming administration.

But even before that happens, we need commitments from medical institutions, associations, and journals to elect medical leaders with disclosed health conditions and disabilities, particularly mental health conditions and disabilities. Psychiatrists should commit to making the next American Psychiatric Association President a person with a disclosed mental health condition or disability. Physicians of all types should commit to making the next American Medical Association President a person with a physical or mental health condition or disability. These steps are particularly important to help ensure that the priorities of these professions reflect the priorities of those purported to benefit. Because I am not the only one who doubts that they do. And until that happens, I have a message as a member of the disability community: we don't trust you.

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## References

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2. Harkin T, Buckingham-Schutt L. Thirty years after passage of the Americans with Disabilities Act: has the medical community done enough? *Ann Intern Med* 2020;173(9):756–7.

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