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Proposed Amendment to Senate Concurrent Resolution No. 13

(Submitted by Senator Wiener)

Amend SCR 13 to read as follows:

“WHEREAS, Obesity manifests itself as one of our nation’s most significant public health concerns as proven by recent statistics from the Centers for Disease Control and Prevention which reveal that in the United States, approximately 38.8 million adults, 19.8 percent of adults in the United States, are classified as obese, and an estimated 9 million children and adolescents between the ages of 6 and 19 years, 15 percent of that age group, are categorized as overweight; and

WHEREAS, These statistics represent such an extremely rapid rise of obesity in our society over the last decade that members of the medical profession attach the word “epidemic” to the problem, a word usually reserved for massive outbreaks of infectious disease; and

WHEREAS, Obesity is a chronic disease, and studies show that about one half of children who are overweight by the time they are 6 or 7 years of age remain overweight as adults and 75 percent of adolescents who are overweight will remain overweight as adults; and

WHEREAS, Research has established that there is a direct causal relationship between obesity and heart disease, hypertension, stroke, elevated cholesterol, type 2 diabetes, gallbladder disease, arthritis, breathing problems, gout, and forms of cancer such as uterine, cervical, ovarian, breast, gallbladder, colorectal and prostate; and

WHEREAS, Statistics for the year 2000 from the Centers for Disease Control and Prevention disclose that 4,089 deaths in Nevada were the result of heart disease and that 3,763 deaths were caused by cancer, and obesity almost assuredly played a role in many of these deaths; and

WHEREAS, Not only does obesity affect physical health, but obese persons may also experience low self-esteem, social stigmatism, discrimination, poor body image and increased risk of emotional

problems, and disorders such as chronic depression, anxiety and obsessive compulsive disorder have commonly been linked to obesity; and

WHEREAS, According to *The Surgeon General's Call to Action to Prevent and Decrease Overweight and Obesity*, issued in 2001, an estimated 300,000 people die each year from illnesses directly caused or worsened by being overweight, a fact that prompted former Surgeon General David Satcher to warn that obesity may soon overtake tobacco as the leading cause of preventable death in America; and

WHEREAS, In 2000, the total costs of this epidemic in the United States rose to an estimated \$117 billion per year, consisting of \$61 billion in direct costs for preventive, diagnostic and treatment services for medical care and \$56 billion in losses relating to productivity in the workforce and the value of future earnings lost by premature death; and

WHEREAS, There is a compelling need for an aggressive program of prevention and treatment because the direct and indirect costs resulting from obesity are expected to increase rapidly as the problem worsens and because the prevention and amelioration of obesity could have a significantly positive impact on health care costs in this state; and

WHEREAS, The problem of obesity must not be considered only a personal responsibility but a responsibility which is shared by the community and which must be addressed by the community in the same way as problems with alcohol, substance abuse and tobacco have been addressed; and

WHEREAS, Conquering the problem of obesity must begin with the process of accumulating sound scientific data as a foundation for fostering awareness of the role that genetics, behavior and environment play in obesity and finding solutions to improve the quality of life; now, therefore, be it

RESOLVED BY THE SENATE OF THE STATE OF NEVADA, THE ASSEMBLY CONCURRING, That the Legislative Committee on Health Care is hereby directed to conduct a study of the medical and societal costs and impacts of obesity on the State of Nevada; and be it further

RESOLVED, That a subcommittee must be appointed for the study consisting of one Legislator appointed by the Majority Leader of the Senate, one Legislator appointed by the Minority Leader of the Senate, one Legislator appointed by the Speaker of the Assembly and one Legislator appointed by the Minority Leader of the Assembly, all of whom must have served on the Senate Standing Committee on Human Resources and Facilities or the Assembly Standing Committee on Health and Human Services during the 2003 Legislative Session; and be it further

RESOLVED, That one person assigned by the Health Division of the Department of Human Resources and one person assigned by the Department of Education shall also serve as voting members of the subcommittee; and be it further

RESOLVED, That the Legislative Commission shall appoint a chairman of the subcommittee from among the members of the subcommittee; and be it further

RESOLVED, That the study must include, without limitation:

1. An analysis of available information relating to the medical and societal costs and impacts of obesity on Nevadans;
2. An analysis of the fiscal impact of obesity on health care costs and productivity in Nevada and a determination of possible savings in health care costs resulting from the prevention and proper treatment of obesity;
3. The identification of existing resources in Nevada that may be available for use in programs relating to obesity;

4. Recommendations for specific programs aimed at the prevention of and intervention in obesity;
5. The identification of programs and practices that have been established in Nevada and other states which are cost-effective and could be implemented throughout Nevada;
6. Recommendations for coalitions between the public and private sectors that could be instituted in communities;
7. Recommendations for programs to increase public awareness regarding the causes, prevention, risks and treatment of obesity;
8. An examination of the particular effects of the 24-hour lifestyle and transient nature of some of the population of this state on obesity;
9. An evaluation of the current health standards in Nevada that may have an influence on obesity and an assessment of the progress toward treating obesity in states that establish and monitor such standards;
10. Recommendations for programs and practices that encourage healthy and balanced fitness and nutritional choices; and
11. Any other proposals for legislation relating to health care for obesity that the committee may receive or develop; and be it further

RESOLVED, That any recommended legislation proposed by the subcommittee must be approved by a majority of the members of the Senate and a majority of the members of the Assembly appointed to the subcommittee; and be it further

RESOLVED, That the Legislative Committee on Health Care shall submit a report of the results of the study and any recommendations for legislation to the 73rd Session of the Nevada Legislature.”.