

SENATE CONCURRENT RESOLUTION NO. 13—SENATORS WIENER,
CEGAVSKE, TITUS, RAWSON, CARE, MATHEWS, RAGGIO
AND WASHINGTON

MARCH 4, 2003

Referred to Committee on Legislative Affairs and Operations

SUMMARY—Directs Legislative Commission to conduct interim
study concerning economic, medical and societal
costs and impacts of obesity in Nevada. (BDR R-25)

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EXPLANATION – Matter in *bolded italics* is new; matter between brackets ~~omitted material~~ is material to be omitted.

SENATE CONCURRENT RESOLUTION—Directing the
Legislative Commission to conduct an interim study
concerning the economic, medical and societal costs and
impacts of obesity in Nevada.

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

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

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

19 WHEREAS, Research has established that there is a direct causal
20 relationship between obesity and heart disease, hypertension, stroke,
21 elevated cholesterol, type 2 diabetes, gallbladder disease, arthritis,



1 breathing problems, gout, and forms of cancer such as uterine,
2 cervical, ovarian, breast, gallbladder, colorectal and prostate; and

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

8 WHEREAS, Not only does obesity affect physical health, but
9 obese persons may also experience low self-esteem, social
10 stigmatism, discrimination, poor body image and increased risk of
11 emotional problems, and disorders such as chronic depression,
12 anxiety and obsessive compulsive disorder have commonly been
13 linked to obesity; and

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

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

27 WHEREAS, Such costs definitely constitute a governmental issue
28 because the government pays for a portion of the costs related to
29 health care and certainly has a stake in the loss of productivity in the
30 workforce; and

31 WHEREAS, In addition to these medical costs and losses in
32 productivity, the 33 to 40 percent of women and 20 to 24 percent of
33 men in this nation who are attempting to lose weight spend \$33
34 billion a year on weight-reduction products and services; and

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

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



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

6 RESOLVED BY THE SENATE OF THE STATE OF NEVADA, THE
7 ASSEMBLY CONCURRING, That the Legislative Commission is
8 hereby directed to appoint an interim committee, composed of three
9 members of the Assembly and three members of the Senate, one of
10 whom must be appointed as Chair of the committee, to conduct a
11 study of the economic, medical and societal costs and impacts of
12 obesity on the State of Nevada; and be it further

13 RESOLVED, That the Chair of the committee may appoint an
14 advisory committee of not more than three persons, who are not
15 Legislators and are nonvoting members, who are knowledgeable in
16 the areas of the study, to consult with and to assist in conducting the
17 study; and be it further

18 RESOLVED, That the study must include, without limitation:

19 1. An analysis of available information relating to the
20 economic, medical and societal costs and impacts of obesity on
21 Nevadans;

22 2. An analysis of the fiscal impact of obesity on health care
23 costs and productivity in Nevada and a determination of possible
24 savings in health care costs resulting from the prevention and proper
25 treatment of obesity;

26 3. The identification of existing resources in Nevada that may
27 be available for use in programs relating to obesity;

28 4. Recommendations for specific programs aimed at the
29 prevention of and intervention in obesity;

30 5. The identification of programs and practices that have been
31 established in Nevada and other states which are cost-effective and
32 could be implemented throughout Nevada;

33 6. Recommendations for coalitions between the public and
34 private sectors that could be instituted in communities;

35 7. Recommendations for programs to increase public
36 awareness regarding the causes, prevention, risks and treatment of
37 obesity;

38 8. An examination of the particular effects of the 24-hour
39 lifestyle and transient nature of some of the population of this state
40 on obesity;

41 9. An evaluation of the current health standards in Nevada that
42 may have an influence on obesity and an assessment of the progress
43 toward treating obesity in states that establish and monitor such
44 standards; and



1 10. Any other proposals for legislation relating to health care
2 for obesity that the committee may receive or develop; and be it
3 further

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

8 RESOLVED, That the Legislative Commission shall submit a
9 report of the results of the study and any recommendations for
10 legislation to the 73rd Session of the Nevada Legislature.

