

**AMERICAN MEDICAL STUDENT ASSOCIATION
HOUSE OF DELEGATES 2017
RESOLUTION: A4**

INTRODUCED BY: Fludiona Naka, Vice President for Internal Affairs

SCHOOL: University of Connecticut School of Medicine

SUBJECT: Principles Regarding Pediatric Obesity

TYPE: Resolution of Principles

1 WHEREAS approximately 17% of kids between the ages of 2-19 are considered obese; and,

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3 WHEREAS as high as 70% of obese youth grow up to be obese adults; and,

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5 WHEREAS obesity is related to cardiovascular disease, stroke, diabetes, etc.

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7 **THEREFORE BE IT RESOLVED** that the Principles Regarding Pediatric Obesity (p. 145) be
8 AMENDED BY ADDITION to state:

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10 The American Medical Student Association:

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12 5. In regards of prevention through school:

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14 a. **STRONGLY SUPPORTS** nutrition should be taught as part of a comprehensive school health
15 education program and essential education topics should be integrated into curriculum.

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17 b. **SUPPORTS** students having healthier food options to enhance the likelihood of adopting
18 healthful dietary practices.

19
20 c. **SUPPORTS** public school education about the long-term health consequences and risks
21 associated with overweight and how to achieve and maintain a healthy weight.

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23 d. **SUPPORTS** the creation of a local school wellness policy to promote student health and
24 reduce childhood obesity.

25
26 e. **SUPPORTS** increasing the amount of time that students spend on physically active.

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28 FISCAL NOTE: None

29
30 REFERENCES

31 Ogden CL, Carroll MD, Fryar CD, Flegal KM. Prevalence of obesity among adults and youth:
32 United states, 2011-2014. *NCHS Data Brief*. 2015(219):1-8

Nicklas TA, Baranowski T, Cullen KW, Berenson G. Eating patterns, dietary quality and obesity. *J Am Coll Nutr.* 2001;20(6):599-608

REPORT OF REFERENCE COMMITTEE A

DISCUSSION

BOT: **d. SUPPORTS** the ~~creation of a~~ development of local school wellness ~~policy~~ policies and programs to promote student health and reduce childhood obesity.

e. SUPPORTS increasing the amount of time ~~that~~ students spend on physical activity, while maintaining student safety.

BRD: N/A

PRD: Recommend to adopt as all written

IRD: recommends to adopt as all written

ACTE: 5d) recommend to amend to supports the creation local school wellness policies, student health and reduce childhood obesity (notation: to remove the “a”; and policy was pluralizing to policies).

5e) supports increasing the amount of protected time can be physically active.

Premedical Caucus: N/A

Other Groups: Voted to NA

SUMMARY OF DISCUSSION:

PROS: majority of the regions indicated that the wording needs to be clarified further.

CONS: ACTE and BOT recommended clarification and changing to some of the wording to further the intentions of the resolution for that alters the intent of the resolution.

REFERENCE COMMITTEE COMMENTS:

Both, BOT and ACTE recommended in further expanding the terms as that can be misinterpreted based on context. Particular concern was in regards to the usage of the semantics that can emphasize single overarching policy for all communities. Particularly because each policy can be created for each specific community and with the individual community. BOT suggested added student safety which we do not feel fits with the intentions of this specific resolution. ACTE recommended specifying protected time as to allow for incorporation within their daily routines.

1 of 4 committee members recommended that the resolution was adopted as written because “protected time” needs further clarification.

REFERENCE COMMITTEE RECOMMENDATION:

Adopt as amended

d. SUPPORTS the ~~creation of a~~ development of local school wellness ~~policy~~ policies and programs to promote student health and reduce childhood obesity.

e. SUPPORTS increasing the amount of protected time that students can spend being physically active.