Resolution in Support of the Treatment and Prevention of Obesity

WHEREAS, obesity is a growing epidemic, affecting about 40% of adults in the United States, and is recognized as a chronic disease by many leading medical professional and patient organizations, including the American College of Cardiology, American Medical Association, American Heart Association, American Academy of Family Physicians, American Board of Obesity Medicine, Endocrine Society, and the Obesity Society; and

WHEREAS, experts and researchers agree obesity is a complex disease influenced by various psychological, environmental, and genetic factors and those affected by the disease are at higher risk of developing many health-related conditions such as type 2 diabetes, high blood pressure, cardiovascular disease, stroke, and some cancers; and

WHEREAS, all types of citizens are affected by the disease; however, according to the National Center for Health Statistics, it has a disproportionate impact among lower income individuals, those with less education, and minority communities; and

WHEREAS, in addition to its human costs, obesity has a significant economic burden; in 2014, the United States spent $1.42 trillion in direct and indirect medical treatment costs for health conditions causally related to obesity and overweight; and

WHEREAS, while prevention programs are an essential tool in mitigating the human and economic costs of this public health crisis, it is imperative for state policymakers to also consider the need to make comprehensive care and treatment available to individuals and families currently affected by obesity; and

WHEREAS, studies show bias and stigma against people affected by obesity, both societal and among healthcare professionals, are significant barriers to effectively treating the disease; and

WHEREAS, research suggests weight loss of 5% to 10% can improve health and reduce the risk of some obesity-related diseases and can thereby advance the goals of state public health initiatives to reduce chronic disease, improve health outcomes, and control healthcare costs;

NOW, THEREFORE, BE IT RESOLVED that the National Lieutenant Governors Association (NLGA) recognizes that steps should be taken to eliminate the stigma of obesity that impedes treatment and to increase opportunities for Americans to receive comprehensive care to manage this chronic disease; and

BE IT FURTHER RESOLVED that the NLGA encourages states to establish statewide obesity councils and taskforces or to otherwise use existing structures in place to elevate a focus on obesity as a significant and costly chronic disease, and to explore possible solutions for the growing epidemic, including the need for additional training of current and future health care professionals, who are critical to the diagnosis and treatment of obesity; and

BE IT FURTHER RESOLVED that NLGA recognizes that states can take a leading role in addressing this growing epidemic by providing adequate access to treatment options for state employees and in other publicly funded healthcare programs and can serve as a model for the private sector in managing the human toll and financial impact of obesity on health care costs.

ADOPTED, this day, the 29th of June, 2018.

Sponsors: Lt. Governor Justin Fairfax (D – Virginia), Lt. Governor Adam Gregg (R – Iowa), Lt. Governor Randy McNally (R – Tennessee), Lt. Governor Billy Nungesser (R – Louisiana), Lt. Governor John Sanchez (R – New Mexico), Lt. Gov. Nancy Wyman (D – Connecticut), Lt. Governor David Zuckerman (D – Vermont)

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