

107<sup>TH</sup> CONGRESS  
1<sup>ST</sup> SESSION

# S. CON. RES. 11

Expressing the sense of Congress to fully use the powers of the Federal Government to enhance the science base required to more fully develop the field of health promotion and disease prevention, and to explore how strategies can be developed to integrate lifestyle improvement programs into national policy, our health care system, schools, workplaces, families and communities.

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IN THE SENATE OF THE UNITED STATES

FEBRUARY 14, 2001

Mrs. FEINSTEIN (for herself, Mr. CRAIG, Mr. BINGAMAN, Mr. CRAPO, Mr. LUGAR, Mr. WARNER, Mr. DORGAN, Mrs. MURRAY, Mr. BIDEN, Mr. INHOFE, Mr. ENSIGN, Mr. FEINGOLD, and Mr. LEVIN) submitted the following concurrent resolution; which was referred to the Committee on Health, Education, Labor, and Pensions

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## CONCURRENT RESOLUTION

Expressing the sense of Congress to fully use the powers of the Federal Government to enhance the science base required to more fully develop the field of health promotion and disease prevention, and to explore how strategies can be developed to integrate lifestyle improvement programs into national policy, our health care system, schools, workplaces, families and communities.

Whereas the New England Journal of Medicine has reported that modifiable lifestyle factors such as smoking, sedentary lifestyle, poor nutrition, unmanaged stress, and

obesity account for approximately 50 percent of the premature deaths in the United States;

Whereas the New England Journal of Medicine has reported that spending on chronic diseases related to lifestyle and other preventable diseases accounts for an estimated 70 percent of total health care spending;

Whereas preventing disease and disability can extend life and reduce the need for health care services;

Whereas the Department of Health and Human Services has concluded that the health burden of these behaviors falls in greatest proportion on older adults, young children, racial and ethnic minority groups and citizens who have the least resources;

Whereas business leaders of America have asserted that spending for health care can divert private sector resources from investments that could produce greater financial returns and higher wages paid to employees;

Whereas the Office of Management and Budget reports that the medicaid and medicare expenditures continue to grow;

Whereas the American Journal of Public Health reports that expenditures for the medicare program will increase substantially as the population ages and increasing numbers of people are covered by medicare;

Whereas the American Journal of Health Promotion reports that a growing research base demonstrates that lifestyle factors can be modified to improve health, improve the quality of life, reduce medical care costs, and enhance workplace productivity through health promotion programs;

Whereas the Health Care Financing Administration has determined that less than 5 percent of health care spending is devoted to the whole area of public health, and a very small portion of that 5 percent is devoted to health promotion and disease prevention;

Whereas research in the basic and applied science of health promotion can yield a better understanding of health and disease prevention;

Whereas additional research can clarify the impact of health promotion programs on long term health behaviors, health conditions, morbidity and mortality, medical care utilization and cost, as well as quality of life and productivity;

Whereas the Institute of Medicine of the National Academy of Science has concluded that additional research is required to determine the most effective strategies to create lasting health behavior changes, reduce health care utilization, and enhanced productivity;

Whereas the private sector and academia cannot sponsor broad public health promotion, disease prevention, and research programs;

Whereas the full benefits of health promotion cannot be realized—

(1) unless strategies are developed to reach all groups including older adults, young children, and minority groups;

(2) until a more professional consensus on the management of health and clinical protocols is developed;

(3) until protocols are more broadly disseminated to scientists and practitioners in health care, workplace, school, and other community settings; and

(4) until the merits of health promotion programs are disseminated to policy makers;

Whereas investments in health promotion can contribute to reducing health disparities; and

Whereas Research America reports that most American citizens strongly support increased Federal investment in health promotion and disease prevention: Now, therefore, be it

1        *Resolved by the Senate (the House of Representatives*  
2 *concurring),*

3 **SECTION 1. SHORT TITLE.**

4        This resolution may be cited as the “Building Health  
5 Promotion and Disease Prevention into the National  
6 Agenda Resolution of 2001”.

7 **SEC. 2. SENSE OF CONGRESS.**

8        It is the sense of Congress that the Federal Govern-  
9 ment should—

10            (1) increase resources to enhance the science  
11 base required to further develop the field of health  
12 promotion and disease prevention; and

13            (2) explore strategies to integrate life-style im-  
14 provement programs into national policy, health

- 1 care, schools, workplaces, families, and communities
- 2 in order to promote health and prevent disease.

