

117TH CONGRESS
2D SESSION

H. CON. RES. 106

Supporting the designation of the week of September 19 through September 23, 2022, as “Malnutrition Awareness Week”.

IN THE HOUSE OF REPRESENTATIVES

SEPTEMBER 20, 2022

Ms. BONAMICI (for herself, Mr. KATKO, Mr. BACON, Mr. FITZPATRICK, Mr. CARBAJAL, Mr. COSTA, Mr. GRIJALVA, Ms. NORTON, Mr. BISHOP of Georgia, Mr. SOTO, Ms. JACKSON LEE, Mrs. CAROLYN B. MALONEY of New York, Mr. DEUTCH, Mr. BLUMENAUER, Mr. MCGOVERN, Mrs. LEE of Nevada, Mrs. WATSON COLEMAN, Mr. CORREA, Mrs. HAYES, and Ms. MENG) submitted the following concurrent resolution; which was referred to the Committee on Energy and Commerce, and in addition to the Committees on Agriculture, Education and Labor, and Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

CONCURRENT RESOLUTION

Supporting the designation of the week of September 19 through September 23, 2022, as “Malnutrition Awareness Week”.

Whereas malnutrition is the condition that occurs when a person does not get enough protein, calories, or nutrients;

Whereas malnutrition is a significant problem in the United States and around the world, crossing all age, racial, class, gender, and geographic lines;

Whereas malnutrition can be driven by social determinants of health, including poverty or economic instability, access to affordable health care, and low health literacy;

Whereas there are inextricable and cyclical links between poverty and malnutrition;

Whereas the Department of Agriculture defines food insecurity as when a person or household does not have regular, reliable access to the foods needed for good health;

Whereas communities of color, across all age groups, are disproportionately likely to experience both food insecurity and malnutrition;

Whereas Black children are almost 3 times more likely to live in a food-insecure household than White children;

Whereas infants, older adults, people with chronic diseases, and other vulnerable populations are particularly at risk for malnutrition;

Whereas the American Academy of Pediatrics has found that failure to provide key nutrients during early childhood may result in lifelong deficits in brain function;

Whereas disease-associated malnutrition affects between 30 and 50 percent of patients admitted to hospitals, and the medical costs of hospitalized patients with malnutrition can be 300 percent more than the medical costs of properly nourished patients;

Whereas, according to the “National Blueprint: Achieving Quality Malnutrition Care for Older Adults, 2020 Update”, as many as half of older adults living in the United States are malnourished or at risk for malnutrition;

Whereas, according to recent Aging Network surveys, 76 percent of older adults receiving meals at senior centers and other congregate facilities report improved health outcomes, and 84 percent of older adults receiving home-delivered meals indicate the same;

Whereas disease-associated malnutrition in older adults alone costs the United States more than \$51,300,000,000 each year; and

Whereas the American Society for Parenteral and Enteral Nutrition established “Malnutrition Awareness Week” to raise awareness and promote prevention of malnutrition across the lifespan: Now, therefore, be it

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

3 (1) supports the designation of “Malnutrition
 4 Awareness Week”;

5 (2) recognizes registered dietitian nutritionists
 6 and other nutrition professionals, health care pro-
 7 viders, school food service workers, social workers,
 8 advocates, caregivers, and other professionals and
 9 agencies for their efforts to advance awareness,
 10 treatment, and prevention of malnutrition;

11 (3) recognizes the importance of existing Fed-
 12 eral nutrition programs, like Older Americans Act of
 13 1965 (42 U.S.C. 3001 et seq.) nutrition programs
 14 and the Federal child nutrition programs, for their
 15 role in combating malnutrition, and supports in-
 16 creased funding for these critical programs;

1 (4) recognizes—

2 (A) the importance of medical nutrition
3 therapy under the Medicare Program under
4 title XVIII of the Social Security Act (42
5 U.S.C. 1395 et seq.); and

6 (B) the need for vulnerable populations to
7 have access to nutrition counseling;

8 (5) recognizes the importance of the innovative
9 research conducted by the National Institutes of
10 Health on—

11 (A) nutrition, dietary patterns, and the
12 human gastrointestinal microbiome; and

13 (B) how those factors influence the preven-
14 tion or development of chronic disease through-
15 out the lifespan;

16 (6) supports access to malnutrition screening
17 and assessment for all patients;

18 (7) encourages the Centers for Medicare &
19 Medicaid Services to evaluate the implementation of
20 newly approved malnutrition electronic clinical qual-
21 ity measures; and

22 (8) acknowledges the importance of healthy
23 food access for children, especially in childcare set-

- 1 tings and schools, and the benefits of evidence-based
- 2 nutrition standards.

