Whereas, The favorable direct impact of education on health outcomes has been well documented for years, with improved outcomes at each additional level obtained from high school graduation to post graduate degrees; and

Whereas, The high school graduation rate in the lower socioeconomic group is <30% compared to an overall U.S. graduation rate of >80%; and

Whereas, The cost of a college degree is constantly rising with the average cost of a 4-year degree in the U.S. is presently on average $28,000 to $34,000. The former for public college, the latter for private colleges; and

Whereas, There are many environmental factors that impact health outcomes (e.g. a safe outdoor space to exercise, the concentration of fast food restaurants, the availability of fresh, affordable fruits and vegetables) in poor neighborhoods etc., in spite of the environmental circumstances educational attainment helps to mitigate the negative impact of these circumstances; and

Whereas, Personal behaviors informed by education leads to a decrease in unhealthy behaviors (e.g. smoking); and

Whereas, Educational attainment leads to improved rates of secondary prevention (e.g. age appropriate screenings); therefore be it

RESOLVED, That our American Medical Association work with the Health and Human Services Department (HHS) and Department of Education (DOE) to raise awareness about the health benefits of education (Directive to Take Action); and be it further

RESOLVED, That our AMA work with HHS and DOE to establish a meaningful health curriculum (including nutrition) for grades kindergarten through 12 which is required for high school graduation (Directive to Take Action); and be it further

RESOLVED, That our AMA work nationally toward the same goals and strategies to reduce health disparities. (Directive to Take Action)

Fiscal Note: Not yet determined

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