

RESOLUTION GUIDELINES

The Guidelines for Resolutions found below are intended to assist ASHA members with the submission of resolutions to the American School Health Association for consideration. Following the guidelines increases the timely consideration of the resolution. Please submit all new and revised resolutions electronically to the American School Health Association at asha@ashaweb.org. To be considered, all resolutions must contain the cover page review and checklist which can be downloaded from the ASHA website: www.ashaweb.org/ResolutionChecklist

Author:	The Advocacy Committee and other reviewers frequently need clarification as a resolution is reviewed. Acknowledging that most resolutions are the result of many voices, please identify a primary author who can provide necessary information. The primary author's contact information should be included at the top of the document, but will not be included in the final published resolution.
Sponsoring Group:	New resolutions or revisions may be initiated by any ASHA member and must be sponsored by a governing body of the Association (e.g. Sections, Councils, Committees, etc). The sponsoring group shall be included at the top of the document. The sponsoring group shall engage in scholarly discussion with other internal and/or external stakeholders prior to submitting and include notes about their discussion in the space provided on the submission form (cover page).
Co-Sponsoring Group:	Sponsors are encouraged to collaborate with other ASHA groups, on which a resolution may have significant impact or who may have knowledge and/or expertise which may strengthen a resolution proposal. Please document any co-sponsoring group within ASHA with whom the sponsoring group has collaborated.
Type of Resolution:	Indicate the type of resolution you are submitting <ul style="list-style-type: none"> ▪ New Resolution: Resolution addresses a topic not addressed by a currently posted ASHA resolution. ▪ Non-Substantive Revision: Provides minor edits and updates to a current ASHA resolution. This is usually limited to updates to the citations and statistics. ▪ Substantive Revision: Provides substantial edits to an existing resolution. ▪ Emergency: A new resolution or substantive revision that addresses an urgent matter where the resolution requires action or response by the American School Health Association in a timely manner.
Title of Resolution:	The resolution should be given a short descriptive title.
Submitting Instructions:	After writing your resolution following the guidelines on the next page, attach the cover page that can be found on the ASHA website at www.ashaweb.org/ResolutionChecklist . Revised resolutions should be documented using track changes allowing reviewers to easily identify suggested edits. Submit all new and revised resolution proposals electronically to the American School Health Association at asha@ashaweb.org . For assistance, please contact the ASHA office.
Guidelines/Example	Follow the format as outlined on the next page including Whereas Statements, Therefore Statements, and References. The examples listed are from the approved ASHA resolution ASHA Encourages Healthy Fundraising Alternatives .

RESOLUTION GUIDELINES

WHEREAS Statements

- Begin the resolution with "WHEREAS" statements. "WHEREAS" statements justify a resolution and provide the rationale as to why the resolution is held by ASHA.
- "WHEREAS" statements build the argument for the conclusion of the resolution. The conclusion of the resolution are the "THEREFORE, BE IT RESOLVED" statements.

Examples:

WHEREAS, in 2006, 76% of elementary schools, 78% of middle schools and 84% of high schools sold food or beverages at school or in the community to raise funds for the school;¹

WHEREAS, the Association of Fundraising Distributors and Suppliers (AFRDS) estimates that school groups net approximately 1.4 billion dollars in annual sale through product fundraising;²

THEREFORE, BE IT RESOLVED Statements

- End the resolution with one or more "THEREFORE, BE IT RESOLVED" statements.
- Each "THEREFORE, BE IT RESOLVED" should be numbered sequentially.
- "THEREFORE BE IT RESOLVED" statements are intended to suggest, in most cases, a specific action to be completed by a specific group(s) of school health professionals or other stakeholders.
- "THEREFORE BE IT RESOLVED" actions are based upon the need or issue identified in the "WHEREAS" statements.

Examples:

THEREFORE BE IT RESOLVED, that the American School Health Association encourages schools to:

- 1) Incorporate guidelines and procedures for healthy fundraising in their federally mandated wellness policy;
- 2) Adopt fundraising campaigns that support and promote healthy lifestyle choices for their students, staff and communities; and
- 3) Strive to replace all food-based fundraising campaigns with either non-food fundraising activities or ensure that all foods sold meet science-based nutrition guidelines.

BE IT FURTHER RESOLVED Statements

- If the resolution applies to a number of audiences such as a school district and a state government, a different "therefore" statement should be written identifying each audience using BE IT FURTHER RESOLVED.

Examples:

BE IT FURTHER RESOLVED, that the American School Health Association calls on the product fundraising industry to support schools in their efforts to promote healthier lifestyles for their students, staff and communities by:

- 1) Limiting the availability and promotion of food-based fundraising products for PreK-12 schools;
- 2) Making available non-food fundraising products that yield the same or better profit margins than food products used in fundraising campaigns; and
- 3) Ensuring that food products, when available for school fundraisers, support a healthy lifestyle by including only those products that meet science-based nutrition guidelines.

REFERENCES

- References for each "WHEREAS" statement are recommended using the AMA style for citing material.
- References should be noted at the end of the 'WHEREAS' statements via superscript with citations included at the end of the document.
- References must come from scholarly journals, government reports or other reputable sources.

Examples:

REFERENCES

- 1) O'Toole TP, Anderson S, Miller C, Guthrie J. Nutrition services and foods and beverages available at school: results from the School Health Policies and Programs Study 2006. *J Sch Health*. 2007; 77: 500-521.
- 2) Association of Fundraising Distributors and Suppliers (AFRDS). "Product Sales Schools, Non-Profits Net Nearly \$1.7 Billion." Atlanta, GA: AFRDS, 2006.

COMPLETE EXAMPLE RESOLUTION

Title: ASHA Encourages Healthy Fundraising Alternatives

WHEREAS, the Association of Fundraising Distributors and Suppliers (AFRDS) estimates that school groups net approximately 1.4 billion dollars in annual sales through product fundraising;²

WHEREAS, school fundraisers provide a flexible source of funding often used for programs and supplies such as field trips, assemblies, athletic equipment, general overhead, textbooks, art programs, computer and technology equipment and staff development;⁴

WHEREAS, many subgroups within any school including the school food service department, parent teacher associations, booster clubs, student clubs, music and art departments, athletic departments and sport teams among others, may contribute to the number and amount of fundraising campaigns conducted in any school;³

WHEREAS, school fundraising efforts often include vending machines; a la carte food sales in the cafeteria; school stores and snack bars; concessions at school events; fundraising events such as silent auctions, fun runs or car washes; and product sales such as candy, discount cards and wrapping paper;³

WHEREAS, in 2006, 76% of elementary schools, 78% of middle schools and 84% of high schools sold food or beverages at school or in the community to raise funds for the school;¹

WHEREAS, in 2006, chocolate, candy, cookies, crackers, cakes, pastries or other baked goods were commonly sold to raise funds for school activities;¹

WHEREAS, selling foods of low nutritional value to raise funds for school sends a message to students that good nutrition is unimportant;⁶

WHEREAS, the sale of foods of low nutritional value in schools through vending machines, a la carte sales, school stores and other venues competes with the nutritionally balanced school meal, and can play a part in stigmatizing the school meal program;⁶

WHEREAS, foods commonly used as fundraisers provide unneeded calories and displace healthier food choices leading to serious health consequences, such as increased incidence of type 2 diabetes and high blood pressure;⁷

WHEREAS, the number of obese children and adolescents ages 6-19 has nearly tripled since 1980;⁵

WHEREAS, many examples of alternatives to selling food to raise funds are available to schools;^{2, 8, 9, 10, 11, 12}

WHEREAS, opportunities exist for schools to raise funds while promoting positive health behaviors, this includes walk-a-thons or jog-a-thons, jump rope contests, basketball tournaments and recycling programs among others.^{2, 8, 9, 10, 11, 12}

WHEREAS, many schools that have replaced the sale of unhealthy foods with non-food fundraising campaigns or sales of foods that meet strict nutrition guidelines have maintained or increased the amount of revenue available to the school;^{3, 12, 13}

WHEREAS, the percentage of schools that sold cookies or other baked goods not low in fat as part of fundraising decreased from 67% in 2000 to 54% in 2006,¹ indicating that some schools are beginning to eliminate sales of unhealthy foods for fundraising.

THEREFORE BE IT RESOLVED, that the American School Health Association encourages schools to:

- 1) Incorporate guidelines and procedures for healthy fundraising in their federally mandated wellness policy;
- 2) Adopt fundraising campaigns that support and promote healthy lifestyle choices for their students, staff and communities; and
- 3) Strive to replace all food-based fundraising campaigns with either non-food fundraising activities or ensure that all foods sold meet science-based nutrition guidelines.

BE IT FURTHER RESOLVED, that the American School Health Association calls on the product fundraising industry to support schools in their efforts to promote healthier lifestyles for their students, staff and communities by:

- 1) Limiting the availability and promotion of food-based fundraising products for PreK-12 schools;
- 2) Making available non-food fundraising products that yield the same or better profit margins than food products used in fundraising campaigns; and
- 3) Ensuring that food products, when available for school fundraisers, support a healthy lifestyle by including only those products that meet science-based nutrition guidelines.

REFERENCES

- 1) O'Toole TP, Anderson S, Miller C, Guthrie J. Nutrition services and foods and beverages available at school: results from the School Health Policies and Programs Study 2006. *J Sch Health*. 2007; 77: 500-521.
- 2) Association of Fundraising Distributors and Suppliers (AFRDS). "Product Sales Schools, Non-Profits Net Nearly \$1.7 Billion." Atlanta, GA: AFRDS, 2006.
- 3) Sweet Deals: School Fundraising Can Be Healthy and Profitable. Center for Science and the Public Interest. February 2007. Washington, DC. Available at: www.cspinet.org/schoolfundraising.pdf.
- 4) Government Accountability Office (GAO). School Meal Programs: Competitive Foods and Beverages Available and Generate Substantial Revenues for Schools. Washington, DC. GAO, 2005.
- 5) Hedley, A. A., C. L. Ogden, C. L. Johnson, M. D. Carroll, L. R. Curtain, and K. M. Flegal. 2004. "Prevalence of Overweight and Obesity among U.S. Children, Adolescents, and Adults, 1999- 2002." *Journal of American Medical Association* 291: 2847-2850.
- 6) U.S. Department of Agriculture. Foods Sold in Competition with USDA School Meal Programs: A Report to Congress. Washington, DC. USDA. 2001.
- 7) Center for Science and the Public Interest (CSPI). *Dispensing Junk: How School Vending Undermines Efforts to Feed Children Well*. Washington, DC. CSPI, 2004.
- 8) Action for Healthy Kids (AFHK). Healthy Fundraisers for Schools: Tips from AFHK Team Members. 2003. Available at: <http://www.actionforhealthykids.org/filelib/resources/fundraisingtips.pdf>.
- 9) Alabama Department of Public Health, Nutrition and Physical Activity Unity, Alabama Action for Healthy Kids. Guide to Healthy School Fundraising. 2004. Available at: <http://www.actionforhealthykids.org/filelib/toolsforteam/recom/N&PA%2031%20-%20Fundraising.pdf>.
- 10) California Project LEAN, California Department of Health Services. Creative Financing and Fundraising. 2002. Available at: <http://www.fwps.org/dept/nutrition/fundraiser.pdf>.
- 11) Connecticut State Department of Education, Bureau of Health and Nutrition Services and Child/Family/School Partnerships. Healthy Fundraising: Promoting a Healthy School Environment. 2005. Available at: http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Student/NutritionEd/Healthy_Fundraising_BW.pdf.
- 12) Food and Nutrition Service, U.S. Department of Agriculture; Centers for Disease Control and Prevention, U.S. Department of Health and Human Services; U.S. Department of Education. FNS-374, Making It Happen! School Nutrition Success Stories. Alexandria, VA, January 2005.
- 13) Action for Healthy Kids (AFHK). Healthy Foods and Healthy Finances: How Schools Are Making Nutrition Changes That Make Financial Sense. 2003. AFHK. Available at: <http://www>.