

Learning Outcome 7: Evaluate contemporary principles of health policy, laws, regulations, and costs in the US and other countries to better understand the essential components of delivering health and nutrition services in urban and other settings.

NUTR: SNHP 8000: Trends Affecting Health Policy

Artifacts: PDF: Debate Groups and Guidelines for Debates; Trends Assignment #6

The world of nutrition is extremely far-reaching and is equipped with professionals who have varying opinions regarding anything from fad diets, to the latest nutrition research, to what position the Academy of Nutrition and Dietetics holds on topics such as the Kids Eat Right and Kraft cheese collaboration earlier this year. No matter what sector of the nutrition world you work in, there will always be debate and the public will always have questions regarding the latest nutrition buzz. Some of these topics may be ones you feel very passionate about and others may cause an immediate feeling of irritation. While some topics may push your buttons, I believe it is important for nutrition professionals, and myself as a future registered dietitian nutritionist (RDN), to delve into the research and respond to inquiries with evidence-based answers and without emotion. Debating has the potential to open others eyes to the scientific evidence-based truth regarding topics you strongly believe in and are passionate about. Debating draws together critical thinking and effective communication with research and teamwork to deliver a free and lively exchange of ideas and has the ability to allow opposing views to collaborate and connect rather than divide.

As a part of the coursework for SNHP 8000: Trends Affecting Health Policy, my classmates and myself were given separate topics to debate towards the end of the semester. The purpose of the assignment was to gain in-depth knowledge on current issues that impact health care in the United States (US) and to gain skills in developing and voicing opinions proficiently and professionally by taking positions on healthcare issues based on current knowledge and opinion as well as on evidence-based research. My partner and I were to debate in favor of the statement, “Health care is not a right because it is up to the individual to take care of their health.” The one drawback to this assignment was not being able to sign up as either ‘for’ or ‘against’ the topic and instead it was mandated to provide whichever side of the debate you were assigned. Immediately upon reading my topic and ‘my’ stance on the issue I was concerned and conflicted. I was mostly intimidated because I did not know how I felt about the topic I was assigned and wondered how I would be able to debate something I was not sure I agreed with.

Our debates were to last 10-15 minutes with an additional 10-15 minutes for questions and comments. Each group member was expected to contribute at least one perspective supporting his or her side’s position on the topic. My partner and I worked together before the debate to divide the workload by deciding what main points we wanted to discuss and how we would collaborate with the opposing side rather than acting as if our side was the only correct position. Researching the topic allowed me to overcome some of my anxiety and helped shape my stance on the issue. Although it was predetermined I was to be ‘for’ our topic, the research gave me insight into the big picture and how both sides were able to make valid points; I could see myself supporting either. We argued that healthcare is difficult to define and is a broad term. For example, does healthcare mean you have the basic right to clean water and adequate food?

Or does everyone have the right to expensive medicine, organ transplantation, and cosmetic surgery? We not only looked at healthcare in the US, but abroad as well, focusing our opposition in response to the increased wait time for medical services in Canada, Norway and Sweden and an increase in taxes in the United Kingdom and other countries where universal healthcare is practiced. With the increased cost of insurance, the rise in the national deficit, and the increased need for doctors, hospitals, and equipment, we argued that healthcare is not a right, but a service that should be paid for by the individual not the government. Our opponent was also well prepared and came into the debate with strong conviction. Looking back, we focused so much on the points we wanted to make that we failed to research all the pros and cons for both sides and were not equipped to counter their argument. While my partner and I were successful in receiving an A on the debate, in the future I will be better prepared by understanding the pros and cons of the issue in order to successfully debate my stance.

My final written assignment for SNHP 8000 was to choose a debate we heard in class and provide an opposition or support for the statement. The topic I chose to support in my discussion was, “The US government could help fund healthcare through a soda (sugar sweetened) tax.” I located journal articles to support my stance that sugar sweetened beverages contribute to poor health outcomes including diabetes and obesity. We were also asked to discuss a middle ground or solution to our debate topic. Although it may be a long shot, the US government could implement a gradual tax on sugar sweetened beverages to fund the implementation of community nutrition education programs taught by RDNs and other healthcare professionals focusing on a healthy, balanced diet and physical activity. This assignment was beneficial to me in that it gave me the opportunity to research a topic I was already opinionated about. It allowed me to support my opinions with the facts and receiving an A on the assignment evidenced my work.

Nutrition and health care are debated constantly and often times without the support of evidence-based research. There is a growing body of evidence to support the importance of good nutrition. Good nutrition is broad and means different things to different people. Being a professional in the field of nutrition is more important than ever to the public health sector. My ability to participate in the group debate, discuss my stance on topics in written format, and listen to other group’s debate various topics was an enriching learning experience. The assignments provided insight into the art of debate and exposure to powerful opinions paired with evidence-based research on topics in health care policy, laws, regulations, and costs related to nutrition. Mahatma Gandhi is historically quoted, “Honest disagreement is often a good sign of progress.” I believe practicing by this mantra when debating with peers or colleagues can remind everyone that progress does not come from arguing, but occurs when we agree to disagree and work together to find common ground. Combining effective communication skills with evidence-based research as the backbone of debate can allow RDNs to convey the facts and allow their patients and clients to make informed nutritional decisions that lead them to a healthier lifestyle.