September 30, 2020

The Honorable Bobby Scott
Chairman
Education and Labor Committee
1201 Longworth House Office Building
Washington, DC 20515

The Honorable Virginia Foxx
Ranking Member
Education and Labor Committee
2462 Rayburn House Office Building
Washington, DC 20515

The Honorable Pat Roberts
Chairman
U.S. Senate Committee on Agriculture, Nutrition, & Forestry
328A Russell Senate Office Building
Washington, DC, 20510

The Honorable Debbie Stabenow
Ranking Member
U.S. Senate Committee on Agriculture, Nutrition, & Forestry
328A Russell Senate Office Building
Washington, DC 20510

Dear Chairman Scott, Chairman Roberts, Ranking Member Stabenow, Ranking Member Foxx,

On behalf of the undersigned national organizations representing mental health and addiction providers, advocates, and other stakeholders committed to strengthening education and access to high-quality mental and behavioral health care, we write to express our strong support for the Eating Disorders Prevention in Schools Act (H.R. 6703) led by Representatives Vicky Hartzler (R-MO-04) and Alma Adams (D-NC-12).

Studies of past pandemics, such as Severe Acute Respiratory Syndrome (SARS), show that children experience high levels of stress, anxiety, and confusion as a direct result of community mitigation strategies designed to address public health pandemics. With the contributing risk factors children experience during pandemics, coupled with high rates of suicide and other risk factors including 31.9% of youth experiencing anxiety disorder\(^1\) and 13.3% of youth experiencing at least one major depressive disorder\(^2\), it is essential that we take comprehensive action to address the long-lasting mental health effects of COVID-19.

Further complicating efforts to provide supports for children and adolescents during this time are the rising rates of food insecurity. While research has consistently shown individuals from low socioeconomic and minority racial and ethnic groups are at increased risk for disordered eating and eating disorders, emerging research has now shown a correlation between disordered eating behaviors and food insecurity. For example, a recent study found that 39% of adolescents from ethnically diverse and largely low socioeconomic backgrounds experienced household food insecurity; 43% reported disordered eating; and 40% were overweight.\(^3\) Further, household food insecurity was associated with greater use of disordered eating behaviors. When researchers accounted for socioeconomic status and ethnicity or race, food insecurity was associated with higher prevalence of disordered eating behaviors.

Given what we know about the long-lasting mental health impacts from the previous SARS pandemic, coupled with recent findings linking food insecurity and disordered eating, fostering a supportive environment for children and adolescents is more critical than ever. The Eating Disorders Prevention in

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\(^2\)Ibid.

Schools Act (EDPSA) seeks to address the current gap in education around eating disorders prevention by integrating eating disorders prevention within existing Local School Wellness Policies (LSWP). Since the creation of LSWPs within the WIC Reauthorization Act of 2004 (Sec. 204 of P.L. 108-265), many schools have focused on obesity prevention programming without considering any adverse effects on children at-risk of or who experience disordered eating or eating disorders.

Studies show high rates of students meeting the criteria for high eating disorder risk or warranting clinical referral including 58% of reported overweight/obese students, 34% reported normal weight students, and 25% reported underweight students\(^4\). It is anticipated these rates will only increase with students’ return to schools during and after the pandemic. Further, research also demonstrates that a focus on appearance and weight can promote disordered eating behaviors, contribute to body dissatisfaction, dieting, low self-esteem, and reliably predict greater weight gain over time.\(^5\) This bill would aid schools in identifying already existing programs that can appropriate help them create school environments that reduce these risks.

To protect youth at-risk for or who experience an eating disorder, schools need to have the resources to properly address student wellness and include eating disorders prevention within their existing Local School Wellness Policies.

Thank you for your consideration.

Sincerely,

Alliance for Eating Disorders Awareness
American Art Therapy Association
American Association for Geriatric Psychiatry
American Association for Psychoanalysis in Clinical Social Work
American Association of Child and Adolescent Psychiatry
American Association of Suicidology
American Dance Therapy Association
American Foundation for Suicide Prevention
American Group Psychotherapy Association
American Psychological Association
Anxiety and Depression Association of America
Association for Behavioral Health and Wellness
Children and Adults with Attention-Deficit/Hyperactivity Disorder
Confederation of Independent Psychoanalytic Societies


Depression and Bipolar Support Alliance
Eating Disorders Coalition for Research, Policy & Action
Girls, Inc.
Global Alliance for Behavioral Health and Social Justice
International Federation for Eating Disorder Dietitians
Mental Health America
National Alliance on Mental Illness
National Association for Children’s Behavioral Health
National Association for Rural Mental Health
National Association of County Behavioral Health and Developmental Disability Directors
National Association of Social Workers
National Council for Behavioral Health
National Eating Disorders Association
National Federation of Families for Children’s Mental Health
Residential Eating Disorders Consortium
Sandy Hook Promise
School Social Work Association of America
The Kennedy Forum
The National Alliance to Advance Adolescent Health
The Trevor Project