

# Congress of the United States

Washington, DC 20515

April 28, 2021

The Honorable Rosa DeLauro Chairwoman,  
Subcommittee on Labor, Health and Human  
Services, Education and Related Agencies  
United States House of Representatives  
Washington, D.C. 20515  
The Honorable Tom Cole

Ranking Member, Subcommittee on Labor,  
Health and Human Services, Education and  
Related Agencies United States House of  
Representatives  
Washington, D.C. 20515

Dear Chairwoman DeLauro and Ranking Member Cole:

Over 30 million Americans suffer from a clinically significant eating disorder during their lifetime, but experts estimate that only one in ten people receive treatment. The 21st Century Cures Act was a significant step to support those struggling with an eating disorder by improving the prevention, treatment, and diagnosis of the associated medical conditions. The Health Resources and Services Administration (HRSA), Centers for Disease Control and Prevention (CDC), and National Institutes of Health (NIH) all play critical roles in monitoring and studying eating disorder prevalence in youth and adults and improving access to care. We thank you for your bipartisan commitment to supporting eating disorders programs in Fiscal Year (FY) 2021 appropriations and request that you continue to support sustained funding for these efforts as you prepare the Labor, Health and Human Services, Education and Related Agencies (LHHS) FY 2022 appropriations bill.

Congress passed the 21st Century Cures Act with large, bipartisan majorities in the House and Senate in December 2016. The bill placed a strong emphasis on improving our broken mental health care system, including the mental illness with the highest mortality rate—eating disorders. The eating disorder provisions included in the law, derived from the bipartisan Anna Westin Act of 2015 (H.R. 2515/S. 1865), were designed to improve eating disorder early detection by our health professionals, increase access to quality and affordable treatment for eating disorders under mental health parity, and provide the public with resources to help prevent and identify these conditions.

Early detection is particularly critical to get help for people like Anna Westin, a young woman from Chaska, Minnesota, who took her own life after struggling with anorexia for several years. We can and must do more to identify these conditions so that people with eating disorders can get the care they need. Although many people with eating disorders can live healthy lives when their conditions are identified and they receive treatment, there is a shortage of evidence-based training and education programs that prepare health professionals to recognize and provide proper care to these individuals.

## **Health Resources and Services Administration (HRSA)**

The Anna Westin Act was intended to improve early detection and access to care. As you prepare the LHHS FY 2022 appropriations bill, we respectfully request that you continue to provide strong funding for Primary Care Training and Enhancement programs at the Health Resources and Services Administration (HRSA), including enhanced funding for the Education

and Training on Eating Disorder program authorized by the Anna Westin Act provisions in Section 13006 of the 21st Century Cures Act. We thank you for including the following report language in the FY 2019 appropriations bills and we urge you to do again in your FY 2022 appropriations bill to further support and enable HRSA to facilitate evidence-based trainings for health professionals to identify patients with eating disorders and refer them for the appropriate treatment.

*Primary Care Training and Enhancement – COVID-19 worsened eating disorders across the nation with one study reporting up to 76% of respondents engaging in eating disorder behaviors. Despite the medical and psychiatric acuity associated with eating disorders, many patients remain undetected and untreated as only 20% of surveyed medical residency programs offer elective training in eating disorders and 6% require such training. Within this total, the Committee provides up to \$1,000,000 for the program, in coordination with SAMHSA’s National Center of Excellence for Eating Disorders, to provide trainings for primary care health professionals to screen, briefly intervene, and refer patients to treatment for the severe mental illness of eating disorders, as authorized under section 13006 of the 21st Century Cures Act (Public Law 114–255).*

### **U.S. Centers for Disease Control and Prevention (CDC)**

Understanding that the CDC utilizes a number of public health surveillance measures to monitor eating disorder prevalence, we were disappointed to see the removal of eating disorders surveillance questions from the Youth Risk Behavior Surveillance System (YRBSS) in 2015, especially since a teen with anorexia nervosa has ten times the risk of dying than a same-age peer. We thank you for including the following report language in your FY 2021 appropriations bill, and we urge you to do so again in your FY 2022 appropriations bill to support and enable CDC to track, collect, and assess important data on eating disorders among youth and adults:

*Eating Disorders – The Committee directs CDC to assist States in collecting data by including standard questions on unhealthy weight control practices for eating disorders, including binge eating, through the Youth Risk Behavior Surveillance System and the Behavioral Risk Factor Surveillance System.*

### **National Institutes of Health (NIH)**

Finally, we respectfully request the highest level of funding possible for the NIH to increase eating disorders research funding across the NIH Institutes and Centers through the NIH Office of the Director. Eating disorders research at the NIH was actually reduced by an estimated 12.5 percent from FY 2019 to FY 2020, despite the fact that eating disorders affect nine percent of the U.S. population during their lifetime. Accordingly, we urge you to also include the following report language in your FY 2022 appropriations bill to increase the level and breadth of funding for eating disorders research at the NIH and to require a report on these efforts:

*Eating Disorders – The Committee commends NIH for supporting multi-Institute research on the chronic, fatal, and serious mental illnesses encompassing eating disorders that affect 30 million*

*Americans during their lifetimes, and its association with other conditions such as diabetes, infertility, heart disease, PTSD, substance use, co-morbid mental illnesses, and tooth decay. The Committee encourages NIH to increase support for eating disorders research and directs NIH to establish a task force of eating disorders researchers, advocates, and Institutes and Centers, including NIMH, NIDDK, NIMHD, NICHD, and NIDA, to create a Strategic Plan to address research gaps in genetics, prevention, diagnosis, and treatment of eating disorders.*

A strong commitment to fund and prioritize these programs would make a profound difference for the millions of American families affected by eating disorders.

Thank you for your consideration of this request.

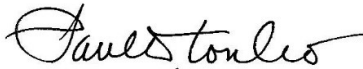
Sincerely,



Ted Deutch  
MEMBER OF CONGRESS



Brian Fitzpatrick  
MEMBER OF CONGRESS



Paul D. Tonko  
MEMBER OF CONGRESS



Abigail Spanberger  
MEMBER OF CONGRESS

/s/

Nanette Diaz Barragán  
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/s/

Sean Casten  
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Lisa Blunt Rochester  
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Kathy Castor  
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G. K. Butterfield  
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Gerald E. Connolly  
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Zoe Lofgren  
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Stephen F. Lynch  
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Doris Matsui  
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A. Donald McEachin  
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Seth Moulton  
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Grace F. Napolitano  
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/s/  
Joe Neguse  
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April 28, 2021  
Re: FY22 Eating Disorders Funding

/s/  
Donald Norcross  
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/s/  
Eleanor Holmes Norton  
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/s/  
Jimmy Panetta  
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Chellie Pingree  
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Jamie Raskin  
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Kathleen M. Rice  
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Mary Gay Scanlon  
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Jan Schakowsky  
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Elissa Slotkin  
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Jackie Speier  
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Marilyn Strickland  
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Jeff Van Drew  
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Nydia M. Velázquez  
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