



Bipartisan Senators Urge Department of Defense to Implement the SERVE Act

WASHINGTON, D.C. (March 27, 2023) - Last week, nine Senators, led by Senators Jeanne Shaheen (D-NH) and Thom Tillis (R-NC), sent a [congressional letter](#) to the Department of Defense (DOD) again urging them to implement the SERVE Act ([S.194/H.R.2767](#)), which passed in 2021. The SERVE Act was signed into law as part of the Fiscal Year 2022 National Defense Authorization Act (NDAA) to expand access to eating disorders care for military family members over 20 years old and improve eating disorder identification and treatment for servicemembers. To the detriment of military families and U.S. military readiness, the DOD has neglected to implement the SERVE Act for the past 16 months.

Servicemembers and their families are disproportionately affected by eating disorders,¹ with the Defense Health Agency revealing significant impacts on active-duty servicewomen's readiness and health.² Military spouses and children also suffer from eating disorder symptoms at rates three times higher than their civilian counterparts.³ According to the DOD, 19,468 dependents were diagnosed with an eating disorder from FY 2014 through FY 2018.⁴ Meanwhile, eating disorders carry the second highest mortality rate of any psychiatric condition,⁵ with suicide occurring 23 times more often among individuals with eating disorders.⁶

Despite these disturbing rates, the DOD has still not implemented the law to cover residential eating disorders care for adult active-duty dependents between the ages of 21 and 64 years old. "It is our understanding that residential treatment for eating disorders is a generally accepted medical standard of evidence-based care effective in weight restoration and reduction of disordered behaviors for adult patients," **said Senator Shaheen (D-NH)**. "Thus, congressional intent with the SERVE Act was to address this gap in coverage and to provide comprehensive care equivalent to what is provided for civilians. We have requested the DOD to provide clinical

¹ Bartlett, B. and Mitchell, K., 2015. Eating disorders in military and veteran men and women: A systematic review. *International Journal of Eating Disorders*, 48(8), pp.1057-1069.

Waasdorp, C. E., Caboot, J. B., Robinson, C. A., Abraham, A. A., & Adelman, W. P. (2007). Screening Military Dependent Adolescent Females for Disordered Eating. *Military Medicine*, 172(9), 962-967. doi:10.7205/milmed.172.9.962

² Parkinson, M., 2021. Decision Brief: ActiveDuty Women'S Health Care Services. [online] Health.mil. Available at: <https://health.mil/Reference-Center/Presentations/2020/11/05/ADWHDecision-Brief>

³ Higgins Neyland MK, Shank LM, Burke NL, et al. Parental deployment and distress, and adolescent disordered eating in prevention-seeking military dependents. *Int J Eat Disord*. 2019;1-9. <https://doi.org/10.1002/eat.231806>.

⁴ Armed Forces Health Surveillance Branch, Diagnoses of Eating Disorders, Active Component Service Members, U.S. Armed Forces, 2013-2017, Medical Surveillance Monthly Report, (Silver Spring, MD: June 2018), p. 18

⁵ Arcelus, J., Mitchell, A.J., Wales, J., & Nielsen, S. (2011). Mortality rates in patients with anorexia nervosa and other eating disorders. A meta-analysis of 36 studies. *Archives of General Psychiatry*, 68(7),724-731.

⁶ Harris, E.C. & Barraclough, B. (1997). Suicide as an outcome for mental disorders: a meta-analysis. *British Journal of Psychiatry*, 170(3), 205-228.

justification or further information on why the DOD has made the decision to not cover services provided at residential treatment centers no later than April 21, 2023.”

“Unfortunately, our brave servicemembers and their families suffer from eating disorders at an alarmingly high rate,” **said Senator Tillis (R-NC)**. “That is why I was proud to lead the passage of the SERVE Act as part of the NDAA, which expands access to eating disorder care for our military families. However, the DOD is failing to implement the law as Congress intended. My colleagues and I will not stop until the DOD expands and builds infrastructure to identify, treat, and rehabilitate servicemembers and military families affected by eating disorders.”

“Throughout my deployment overseas, I was constantly being punished for my eating disorder and mental health concerns,” **said Athena McDowall, EDC Ambassador and former servicemember of the New Jersey Army National Guard**. “My mental health was not the true concern and that was made abundantly clear to me from the very beginning. I was told that eating disorders in the military were not common, which was the reason for my delay in treatment, but upon admission to a treatment program I realized that was not true. I met several members of the military who were also suffering from eating disorders. This was one of the only eating disorder treatment programs that accepted Tricare as a form of insurance, so many of us had nowhere else to go. It is time that those in leadership positions in the military take notice of the struggles that their soldiers are going through, especially when it comes to eating disorders. Whether or not they want to admit it, eating disorders are extremely prevalent in military communities.”

“We can’t wait any longer,” **said Jillian Lampert, PhD, RD, LD, MPH, FAED, EDC Board Member and Chief Officer of Accanto Health**. “The SERVE Act is federal law. Each day the law is not implemented, servicemembers and their dependents are denied access to eating disorders treatment— treatment they’re supposed to receive under law. These illnesses have the second highest mortality rate of all mental health diagnoses – there is no more time to wait. We thank all the Senators who have signed onto this letter to ensure those fighting to protect our nation are treated with the utmost care and respect they deserve.”

The EDC is hopeful that the DOD will swiftly act to implement the SERVE Act that was passed by Congress and signed by President Biden.