October 30, 2025

The Honorable Susan Collins
Chair, Senate Appropriations
S-128, The Capitol
Washington, D.C. 20510

The Honorable Patty Murray
Vice Chair, Senate Appropriations
S-128, The Capitol
Washington, D.C. 20510

The Honorable Tom Cole
Chairman, House Appropriations
H-307, The Capitol
Washington, D.C. 20515

The Honorable Rosa DeLauro
Ranking Member, House Appropriations
H-307, The Capitol
Washington, D.C. 20515

Dear Chair Collins, Chair Cole, Vice Chair Murray, and Ranking Member DeLauro:

On behalf of the **158** undersigned national, state, and local organizations, we urge you to address the increasingly critical public health issue of eating disorders in the United States, as our nation faces worsening mental health issues. Unfortunately, no community is spared from the devastating impact of eating disorders including our servicemembers, veterans, and children. We thank both Committees for their strong support for individuals and families impacted by eating disorders across the nation. Specifically, we thank the Committees for including continued funding for eating disorders research to help women and girls under OASH, funding for eating disorders identification, treatment, and recovery at SAMHSA, inclusion of eating disorders guidance and education within Local School Wellness Policies at FNS and inclusion of eating disorders as a topic area for research under the DoD's Peer Review Medical Research Program within the Senate.

As you finalize the Consolidated Appropriations Act for FY2026, we respectfully request that the final package supports the priorities outlined above. Specifically, we request the House LHHS' $5,000,000 in funding and report language to support SAMHSA's work on eating disorders, including the National Center of Excellence for Eating Disorders; and funding and language for the House LHHS report language for the OASH OWH eating disorders research; and the Senate Ag-FDA local school wellness policies report language to improve prevention education in schools.

Approximately 30 million Americans suffer from a clinically significant eating disorder during their lifetime.[1] Eating disorders cost $65 billion annually and experts estimate that only about 20% of individuals with an eating disorder receive treatment.[2] These conditions have the second highest mortality rate of any mental illness with a life lost every 52 minutes as a direct result of an eating disorder.[3] Recent data shows that those with an eating disorder have over a 300% increased risk of dying.[4] A troubling increase in eating disorders has developed within the pediatric population with research demonstrating a doubling in eating disorder emergency room admissions for adolescent females and rising increase of pediatric mental health

[1]National Eating Disorders Association. What are eating disorders? (2024).
[2]Penwell, Taylor, Bedard, Samantha., Eyre, Rebecca., and Levinson Cheri. Eating Disorders Treatment Access in the United States: Perceived Inequities Among Treatment Seekers. https://psychiatryonline.org/doi/full/10.1176/appi.ps.20230193 (2024).
[3]Facts About Eating Disorders. Eating disorders coalition: Facts about eating disorders. (n.d.). https://eatingdisorderscoalition.org/inner_template/facts_and_info/facts-about-eating-disorders.html
[4] Krug, I., Liu, S., Portingale, J., Croce, S., Dar, B., Obleada, K., Satheesh, V., Wong, M., & Fuller-Tyszkiewicz, M. (2025). A meta-analysis of mortality rates in eating disorders: An update of the literature from 2010 to 2024. *Clinical psychology review*, *116*, 102547. https://doi.org/10.1016/j.cpr.2025.102547

emergency room visits.[5,6] Amongst children who were hospitalized for an eating disorder, half of them had anxiety and depression, and close to a quarter were re-hospitalized within the same year.[7] These conditions can have lifelong health impacts on patients if they are not identified early or prevented.

Although people with eating disorders can recover and live healthy lives, there are bipartisan steps to improve the lives of the 30 million Americans impacted by eating disorders. This will not only address the rising rate of eating disorders among vulnerable communities, but it will save countless lives. We request the following elements within the FY 2026 LHHS and Ag-FDA packages:

I. SAMHSA's Eating Disorders Center of Excellence

Congress passed the *Consolidated Appropriations Act of 2023* (P.L. 117-328), which included the bipartisan, bicameral *Anna Westin Legacy Act* (H.R. 7249/S. 3686), reauthorizing the Center of Excellence for Eating Disorders (ED-CoE) through 2027. The Center provides training and technical assistance to health care professionals to screen, briefly intervene, and refer patients to specialty treatment for eating disorders (SBIRT-ED). The ED-CoE, started under the first Trump Administration to ensure more health care providers are trained and patients are identified early for eating disorders treatment. We respectfully request the inclusion of the House LHHS' $5,000,000 and corresponding report language for SAMHSA's eating disorders work, including the report language on a public service announcement for eating disorders with the purpose of raising awareness about identifying, preventing, and treating eating disorders (pages 146-147) in the FY26 package:

> ***Eating Disorders***. — The Committee provides $5,000,000 to improve the availability of health care providers to respond to the needs of individuals with eating disorders including the work of the National Center of Excellence for Eating Disorders to increase engagement with primary care providers, including pediatricians, to provide specialized advice and consultation related to the screening and treatment of eating disorders. The Committee encourages SAMHSA to conduct a public service announcement with the purpose of raising awareness about identifying, preventing, and treating eating disorders.

II. OASH's Eating Disorders Research

While eating disorders occur in both men and women, females are at higher risk with research indicating by age 40, 1 in 5 women will have experienced an eating disorder.[8] In less than a decade, the number of eating disorders among adolescents has increased by 119%.[9] In response to this alarming rise, OASH awarded $1,000,000 in discretionary grants in 2022 to improve early detection and prevention of eating disorders in adolescent girls. This funding is critical to improve early intervention protocols for eating disorders to aid recovery. We applaud the Committees for providing continued funding for this research, including an increase of $250,000 in the FY26 House bill. We respectfully request the House funding and report language (page 214) in the FY26 package:

---

[5] Leeb RT, Bitsko RH, Radhakrishnan L, Martinez P, Njai R, Holland KM. Mental Health Related Emergency Department Visits Among Children Aged <18 Years During the COVID-19 Pandemic. (2020).
[6] Radhakrishnan, Lakshmi, Leeb, Rebecca, Bitsko, Rebecca. & Anderson, Kayla. Pediatric Emergency Department Visits Associated with Mental Health Conditions Before and During the COVID-19 Pandemic. Centers for Disease Control and Prevention Morbidity and Mortality Weekly Report 71. (2022).
[7] David I. Rappaport, Michael O'Connor, Cara Reedy, Megen Vo; Clinical Characteristics of US Adolescents Hospitalized for Eating Disorders 2010–2022. *Hosp Pediatr* January 2024; 14 (1): 52–58. https://doi.org/10.1542/hpeds.2023-007381
[8] Ward ZJ, Rodriguez P, Wright DR, Austin SB, Long MW. Estimation of Eating Disorders Prevalence by Age and Associations With Mortality in a Simulated Nationally Representative US Cohort. *JAMA Netw Open.* 2019;2(10):e1912925. doi:10.1001/jamanetworkopen.2019.12925
[9] Eating Disorders Coalition, Facts About Eating Disorders: What the Research Shows.

Eating Disorders Research.—*The Committee remains concerned that eating disorders have one of the highest fatality rates of any psychiatric illness, with girls and women at heightened risk for developing an eating disorder during their lifetime. The Committee recognizes OWH's efforts to address the rise in eating disorders among adolescent girls. The Committee continues funding and urges focus on early detection and treatment protocols for women and girls with or at-risk of developing an eating disorder. The Committee encourages OWH to prioritize projects to address the lack of pediatric and adolescent screening in the primary care and pediatrics settings. The Committee urges OWH to coordinate with outside organizations, eating disorders specialists, and other groups as necessary to identify research needs of eating disorders among women and girls.*

III. Food and Nutrition Service's Local School Wellness Policies

Local School Wellness Policies (LSWPs) are housed within USDA's Food and Nutrition Service (FNS) to support school's implementation of student wellness plans. These policies allow for schools to tailor their outreach to their specific communities' needs and support overall student well-being. Despite LSWPs focusing on physical wellness, healthy nutrition, and obesity prevention, a critical component is missing – eating disorders prevention. LSWPs can serve as an early intervention tool for schools and parents to identify students that may be at risk, as well as ensure elements within existing LSWPs are not unintentionally placing a student at higher risk of developing an eating disorder. We thank both Committees for including strong language for this no cost language and respectfully request the Senate report language (page 111) in the FY26 end of year package:

Local School Wellness Policies.—*The Committee acknowledges that difficulty accessing a variety of foods can cause significant issues, including poor physical health and eating disorders. The Committee directs the Secretary to update local school wellness policy guidance to incorporate eating disorder prevention and education into the existing local school wellness policy framework. The Committee requests a report within 120 days of the enactment of this act on the agency's progress to update State Education Agencies on the inclusion of eating disorders education and prevention within Local School Wellness Policies.*

Again, we thank the Committee for your commitment to supporting individuals and families with eating disorders and urge you to include this critical funding and report language in both FY26 appropriations packages. Please contact Christine Peat, PhD, President, Eating Disorders Coalition for Research, Policy, & Action at president@eatingdisorderscoalition.org or (919) 445-0818 should you have any questions.

Sincerely,

National

Academy for Eating Disorders
American Association for Psychoanalysis in Clinical Social Work
American Association of Child and Adolescent Psychiatry
American Foundation for Suicide Prevention
American Psychological Association Services
American Youth Association
Bannister Consultancy
Be Real USA
Clinical Social Work Association
Eating Disorders Coalition for Research, Policy & Action
Eating Disorder Provider Education Network
Eating Disorder Registered Dietitians & Professionals LLC
Educate and Empower Kids
Equip
Evolve Psychotherapy
Inseparable
Maternal Mental Health Leadership Alliance
National Alliance for Eating Disorders
National Association of Pediatric Nurse Practitioners
National Association of Social Workers
National Eating Disorders Association
Project HEAL

Psychotherapy Action Network
Recovery Record, Inc.
REDC Consortium
SEA WAVES
Strategic Training Initiative for the Prevention of Eating Disorders
The Body Activists
The International Federation of Eating Disorder Dietitians
Up Against Eating Disorders
WithAll

Alaska
Alaska Eating Disorders Alliance

Alabama
Katie's Truth

California
Bay Area Nutrition, LLC
Core Wellness Living and Family Therapy Inc., Palo Alto
Eating Disorders Resource Center, Silicon Valley
Eating Recovery Center, Irvine
Eating Recovery Center, Sacramento
Fitness N Mind, Avila Beach
Monte Nido Clementine, Agoura Hills
Monte Nido Clementine, Yorba Linda
Monte Nido Day Treatment, Brentwood
Monte Nido Treatment Center, Agoura
Monte Nido Treatment Center, Calabasas
Monte Nido Treatment Center, Lafayette
Olson Counseling Services Inc., Santa Clara
The Healthy Teen Project, San Francisco
The Healthy Teen Project, Santa Clara
Therapy with KB, Los Angeles
Valley Federation of Eating Disorder Professionals

Colorado
Eating Recovery Center, Denver

Florida
Monte Nido Clementine, Palmetto Bay
Monte Nido Clementine, South Miami
Monte Nido Day Treatment, South Miami
Monte Nido Treatment Center, South Miami
The Renfrew Center, Coconut Creek
The Renfrew Center, Orlando
The Renfrew Center, West Palm Beach

Georgia
Monte Nido Clementine, Sandy Springs
Monte Nido Treatment Center, Sandy Springs
The Emily Program, Atlanta
The Renfrew Center, Atlanta

Iowa
Eating Disorder Coalition of Iowa

Illinois
Eating Recovery Center, Chicago
Eating Recovery Center, Northbrook
Eating Recovery Center, Oak Brook
Monte Nido Clementine, Naperville
Monte Nido Day Treatment, Lombard
Monte Nido Treatment Center, Winfield
SunCloud Health, Chicago
SunCloud Health, Naperville
SunCloud Health, Northbrook

Indiana
Farrington Specialty Centers, Fort Wayne
Farrington Specialty Centers, Indianapolis
Farrington Specialty Centers, Plymouth

Kansas
Free State Nutrition, Lawrence

Kentucky
Kentucky Eating Disorder Council

Massachusetts
Monte Nido Treatment Center, Medford
Multi-Service Eating Disorders Association, Inc.
The Renfrew Center, Boston

Maryland
Eating Recovery Center, Bethesda
Eating Recovery Center, Hunt Valley
SunCloud Health, Gaithersburg
The Renfrew Center, Bethesda
The Renfrew Center, Towson

Michigan
Michigan Eating Disorders Alliance

Minnesota
The Emily Program, Duluth
The Emily Program, Minneapolis
The Emily Program, St. Louis Park

The Emily Program, St. Paul

Missouri
ACCESS Lab at Washington University, St. Louis
Monte Nido Clementine, St. Louis

North Carolina
Greenhouse Psychology and Wellness, PLLC, Durham
The Emily Program, Charlotte
The Emily Program, Douglas
The Emily Program, Durham
The Renfrew Center, Charlotte

New Jersey
Healing on Hudson LLC, Hoboken
Monte Nido Clementine, Cherry Hill
Monte Nido Clementine, Skillman
Monte Nido Day Treatment, Parsippany-Troy Hills
Rest and Digest Nutrition LLC, Highland Park
The Renfrew Center, Mount Laurel
The Renfrew Center, Paramus

New York
Balance Eating Disorder Treatment, Manhattan
Monte Nido Clementine, Briarcliff Manor
Monte Nido Clementine, South Salem
Monte Nido Clementine, West Nyack
Monte Nido Day Treatment, New York
Monte Nido Day Treatment, White Plains
Monte Nido Treatment Center, Glen Cove
Monte Nido Treatment Center, Irvington
Monte Nido Treatment Center, New City
Monte Nido Treatment Center, Victor
The Emilee Connection, Rochester
The Renfrew Center, New York
The Renfrew Center, White Plains

Ohio
Eating Recovery Center, Cincinnati
The Emily Program, Cleveland
The Emily Program, Columbus

Oregon
Monte Nido Clementine, West Linn
Monte Nido Day Treatment, Eugene
Monte Nido Day Treatment, Portland
Monte Nido Treatment Center, Springfield
Monte Nido Treatment Center, West Linn

Pennsylvania
Carpe Diem Nutrition, Hershey
Monte Nido Day Treatment, Villanova
Pennsylvania Nutrition Counseling, LLC
The Emily Program, Pittsburgh
The Renfrew Center, Philadelphia
The Renfrew Center, Philadelphia- Spring Lane
The Renfrew Center, Pittsburgh
The Renfrew Center, Radnor

South Dakota
Victus Counseling, Sioux Falls

Tennessee
The Renfrew Center, Brentwood

Texas
Eating Recovery Center, Austin
Eating Recovery Center, Houston
Eating Recovery Center, Plano
Eating Recovery Center, San Antonio
Eating Recovery Center, The Woodlands
Monte Nido Clementine, Conroe
Monte Nido Day Treatment, Houston
Monte Nido Treatment Center, Conroe
Wilco Therapist, Georgetown

Virginia
Monte Nido Clementine, Clifton
Monte Nido Clementine, Fairfax Station
Monte Nido Day Treatment, Mclean
Prosperity Eating Disorders and Wellness, Norfolk
Prosperity Eating Disorders and Wellness, Reston
Rock Recovery, Arlington
Stay Strong Virginia

Washington
Eating Recovery Center, Bellevue
The Emily Program, Seattle
The Emily Program, South Sound
The Emily Program, Spokane

Wisconsin
Mastalarz Counseling, LLC, Milwaukee
Project Maria, Milton
PsyCare Milwaukee LLC

CC: Chairwoman Capito, Ranking Member Baldwin, Chairman Aderholt, Chairman Hoeven, Ranking Member Heinrich, Chairman Harris, Ranking Member Bishop