Dear Chair Baldwin and Ranking Member Capito:

As you begin to work on the Fiscal Year 2025 (FY25) Senate Labor, Health and Human Services, and Education (LHHS) appropriations bill, we urge you to address the increasingly critical public health issue of eating disorders in the United States, especially as our nation faces worsening mental health issues. Unfortunately, no community is spared from the devastating impact of eating disorders, including our constituents. For these reasons, we have included 4 requests for your consideration in the FY25 LHHS appropriations bill.

Approximately 30 million Americans suffer from a clinically significant eating disorder during their lifetime.1 Experts estimate that only one in ten people receive treatment.2 Unfortunately, in recent years, there has been an increase in eating disorders, especially amongst pediatric populations. Research has shown a 25 percent increase in pediatric emergency room admissions for mental health conditions and a doubling in eating disorder emergency room admissions for female adolescents.3,4 The Substance Abuse and Mental Health Services Administration (SAMHSA), Centers for Disease Control and Prevention (CDC), Office of the Secretary at the U.S. Department of Health and Human Services (HHS), and the Office on Women’s Health (OWH) at HHS all play critical roles in monitoring and studying eating disorder prevalence and enhancing access to early intervention and prevention.

Congress has continued to work in a bipartisan, bicameral way to address the devastating impacts of eating disorders. 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. Her story led to the passage of the first federal legislation on eating disorders, the Anna Westin Act, that passed within the 21st Century Cures Act (P.L. 114-1

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2 South Carolina Department of Mental Health. Eating Disorder Statistics.
This historic passage marked the first step to raising awareness and treatment barriers of eating disorders on the federal level. We can continue to 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 comprehensive treatment, there are bipartisan steps to improve the lives of more than 30 million Americans impacted by eating disorders. This will not only address the current rising rate of eating disorders amongst vulnerable communities, but most importantly it will save countless lives. For these reasons we ask that you consider the requests below for inclusion in the FY25 LHHS appropriations bill.

**Substance Abuse and Mental Health Services Administration (SAMHSA)**
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), which reauthorized the Center of Excellence for Eating Disorders. The Center provides training and technical assistance to health care professionals to screen, briefly intervene and refer patients to treatment (SBIRT), including patient populations in the military and veterans. The reauthorization will expand eating disorder early detection through the creation of a pediatric SBIRT model, which currently does not exist today. We respectfully request that you provide strong funding in FY25 for the SAMHSA Center of Excellence for Eating Disorders to help increase training for primary health care professionals to screen, briefly intervene, and refer patients to treatment (SBIRT).

**National Center of Excellence for Eating Disorders** - The Committee continues to support SAMHSA’s Center of Excellence for Eating Disorders to increase trainings for health professionals to screen, briefly intervene, and refer patients to treatment for the severe mental illness of eating disorders, as authorized under section 1131 of the Consolidated Appropriations Act, 2023 (P.L. 117–328). The Committee provides SAMHSA up to $1,000,000 to maintain the National Center of Excellence for Eating Disorders and to train health care providers on eating disorders, including screening, brief intervention, referral, and treatment (SBIRT) training for health care professionals treating adults, adolescents, and children with eating disorders. The Committee asks for an update in the 2026 Congressional Budget Justification on the number, geographical location, and specialty type of trainings SAMHSA has conducted for health care professionals, how SAMHSA has coordinated with the Department of Defense and Veterans Affairs on training health care professionals on SBIRT, an update on the pediatric SBIRT training model for eating disorders, and resources and activities designed to support early interventions and care coordination for adults, adolescents and children with eating disorders.

**U.S. Centers for Disease Control and Prevention (CDC)**
The Centers for Disease Control and Prevention continues to be a critical agency in monitoring eating disorder prevalence in youth and adults through their multiple surveys. However, in 2015 eating disorder questions were removed from the Youth Risk Behavior Survey (YRBS) after collecting this public health information since 1991. Considering that eating disorders can increase the risk of suicide amongst teenagers by 32 times, including a question on unhealthy weight control behaviors is critical. Additionally, in recent years emergency room admissions

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5 *Five statistics behind anorexia and its consequences*. Center For Discovery. (2019, October 22).
for eating disorders doubled in girls ages 12 to 17. Social media may also perpetuate body dissatisfaction, disordered eating behaviors, social comparison, and low self-esteem, especially among adolescent girls. The most recent YRBS data shows the youth mental health crisis continues to worsen, with one in three girls reporting to have seriously considered suicide, up 60 percent from a decade ago. Without comprehensive YRBS questionnaires, the troublingly findings highlighted in this recent report leave public health professionals with an incomplete picture of co-occurring mental health conditions, including eating disorders that continue to plague children and adolescents. We respectfully request you include the following report language in the FY25 LHHS appropriations bill.

**Eating Disorders** - The Committee remains concerned that mental health problems amongst youth are at an all-time high, with eating disorders-related emergency room admissions for youth doubling during the pandemic. For 23 years, CDC conducted surveillance of the signs and symptoms of eating disorders within the Youth Risk Behavior Surveillance System but ended that data collection in 2015. The resulting gap in data collection has left public health experts and research with limited data to address the current eating disorders crisis among youth. The Committee directs the CDC to assist states in collecting data by including one standard question on unhealthy weight control practices for eating disorders through the Youth Risk Behavior Surveillance System.

**Office of the Secretary**

With the enactment of various pieces of eating disorders legislation over the past decade including the *Anna Westin Legacy Act* (H.R.7249/S.3686 included in P.L. 117-3285) and the *Supporting Eating Disorders Recovery Through Vital Expansion* (SERVE) *Act* (S.194/H.R. 1309 included in the FY22 *National Defense Authorization Act*, P.L. 117-21), federal agencies have been conducting critical work, research and training to address the rising rate of eating disorders in the United States. With the large support for eating disorders research, treatment, and prevention has also come the need to ensure federal agencies are efficiently collaborating across agencies to increase policy effectiveness. For these reasons, we ask that you include the following request in the FY25 LHHS appropriations bill.

**Interagency Coordinating Committee on Eating Disorders** - The Committee remains concerned about the rising rate of eating disorders in the United States. Eating disorders have the second highest mortality rate of any mental illness, however, one in three individuals affected remain undetected and untreated. The total economic cost of eating disorders is almost $65 billion annually. The Committee has supported eating disorders research, prevention, intervention, and

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treatment across the federal government in previous fiscal years. The Committee includes $750,000 for the Secretary to convene an Interagency Coordinating Committee on Eating Disorders to unify federal efforts to support eating disorders research, prevention, intervention, and treatment. The Coordinating Committee shall meet regularly and include the Administrators of HRSA, SAMHSA, CMS, Indian Health Service, Department of Agriculture Food and Nutrition Service, the Directors of the CDC and the NIH, and the Secretaries of the Department of Labor, Department of Veterans Affairs, and Department of Defense. The Coordinating Committee shall produce a report to the Committee on activities and outcomes, of the programs directed toward improving the lives of patients with eating disorders, supporting eating disorders research, eating disorders treatment and coverage, and educating providers on identifying eating disorders, including recommendations for the future. In developing the report, the Coordinating Committee shall consult with outside stakeholders with a specialty or demonstrated expertise in eating disorders, on recommendations for better administration of existing federal programs to include eating disorders.

Office on Women’s Health (OWH)

While eating disorders occur in both men and women, females have a higher risk of eating disorders. In less than a decade, the number of eating disorders among adolescents has increased by 119 percent. In response to the alarming rise in eating disorders amongst adolescent girls, the Office on Women’s Health awarded $1,000,000 in discretionary grants in 2022 to improve early detection and prevention of eating disorders in adolescent girls. Additionally, in FY24 Congress provided an additional $750,000 to support this research. This funding is critical to improve early intervention in eating disorders to help with recovery. For these reasons, we urge you to include the following language in the FY25 LHHS appropriations bill to continue this funding but also broaden the scope of the grants to reach women across the life course.

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 the efforts of the Office on Women’s Health to address the rise in eating disorders amongst adolescent girls. The Committee provides $1,500,000 with a focus on early detection and treatment protocols for women and girls with or at-risk of developing an eating disorder. The Committee encourages the Office to prioritize research projects to address the lack of pediatric and adolescent screening in the primary care and pediatrics settings. The Committee directs the Office to coordinate with outside organizations, eating disorders specialists, and other groups as deemed necessary by the Secretary to identify research needs of eating disorders amongst women and girls.

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 these requests.


Sincerely,

Amy Klobuchar
United States Senator

Thom Tillis
United States Senator

Michael F. Bennet
United States Senator

Richard Blumenthal
United States Senator

Mark R. Warner
United States Senator

Cory A. Booker
United States Senator

Kirsten Gillibrand
United States Senator

Debbie Stabenow
United States Senator