

## NEDA Invites You to a Virtual Congressional Briefing In Conjunction with the Congressional Mental Health Caucus

### *Preventing Disordered Eating, Weight Stigma, and Improving Mental Health in Schools*

Opening Remarks by Representatives Alma Adams (D-NC) and Vicky Hartzler (R-MO)

**DATE:** Tuesday, September 29  
**TIME:** 2:00 PM - 3:00 PM EST  
**LOCATION:** Zoom Webinar  
(A participation link will be sent to you once you have [registered to attend](#))

#### CO-HOSTING ORGANIZATIONS



#### PANELISTS



**Jameela Jamil**  
*Activist and Founder of I Weigh, Los Angeles, CA*

Jameela Jamil is Founder of activist platform I Weigh, a community of change makers who come together to share ideas, experiences and ultimately mobilize activism. Amplifying the voices of activists from across the globe, I Weigh has inspired industry policy change and legislative action generating awareness to protect the livelihoods of our youth and continue the fight for a radically inclusive world.

**Cynthia M. Bulik, PhD, FAED**  
*Founding Director, University of North Carolina Center of Excellence for Eating Disorders, Chapel Hill, NC*

**Lily O'Hara, MPH, PhD**  
*Associate Professor of Public Health, Qatar University, Qatar*

**Athena Nair**  
*Tufts University student, body positivity activist, Boston, MA*

**Moderated by Joslyn Smith**  
*Director of Public Policy & Community Relations, NEDA, Ithaca, NY*

# COVID-19, Mental Wellness, and Eating Disorders Prevention in Our Schools

**Cynthia M. Bulik, PhD FAED**

Founding Director, University of North Carolina Center of Excellence for Eating Disorders

Distinguished Professor of Eating Disorders, Department of Psychiatry, UNC School of Medicine

Professor of Nutrition, Gillings School of Global Public Health

Professor, Department of Medical Epidemiology and Biostatistics, Karolinska Institutet





## **SARS-CoV-2 has caused a physical and a mental health pandemic**

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- The illness has direct psychiatric effects
- Essential public health measures such as physical distancing can adversely affect mental wellbeing
- Those with pre-existing mental health problems are at increased risk for exacerbations and relapses
- Anxiety, isolation, and grief are pervasive

[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)



## School aged children are vulnerable and services are essential

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- Uncertainty and unpredictability are the norm
- Families are stressed
- Food choice, availability, and affordability have decreased
- Food insecurity has increased
- Messaging about the Quarantine-15 and the adverse impact of obesity on COVID-19 survival can drive dangerous weight control behaviors
- **Well-intentioned obesity prevention programs for youth can unintentionally encourage disordered eating behaviors**

[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)

# COVID-ED Survey

- Online survey
- U.S./Netherlands
- Impact of COVID-19 on:
  - Eating disorder symptoms
  - Eating disorder treatment
  - General well-being
- Monthly follow-up for 1 year





DOI: 10.1002/eat.23353

**ORIGINAL ARTICLE**

International Journal of  
**EATING DISORDERS** WILEY

**Early impact of COVID-19 on individuals with self-reported eating disorders: A survey of ~1,000 individuals in the United States and the Netherlands**

Jet D. Termorshuizen MSc<sup>1,2</sup> | Hunna J. Watson PhD<sup>3,4,5</sup>  |  
Laura M. Thornton PhD<sup>3</sup> | Stina Borg MSc<sup>1</sup> | Rachael E. Flatt MA<sup>3</sup> |  
Casey M. MacDermod BA<sup>3</sup> | Lauren E. Harper BS<sup>3</sup> | Eric F. van Furth PhD<sup>2,6</sup> |  
Christine M. Peat PhD<sup>3</sup> | Cynthia M. Bulik PhD<sup>1,3,7</sup> 

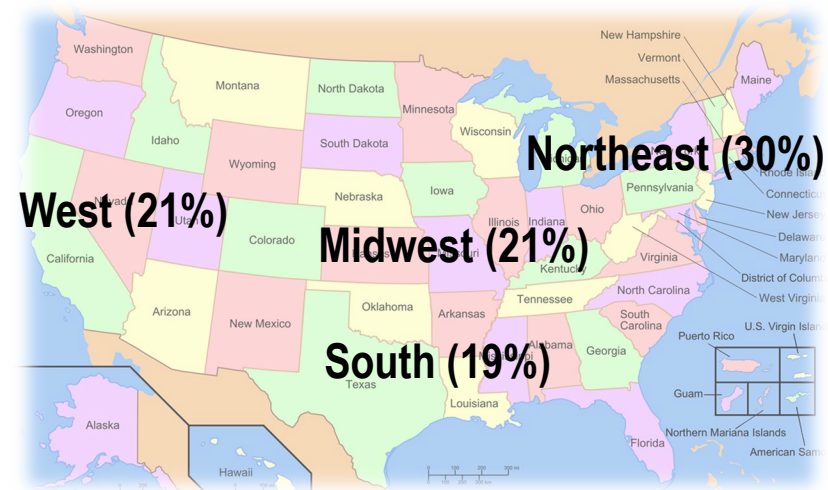
[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)





# US Respondents

- N=511
- Ages 16 to 50+
- Gender identity
  - 95% female
  - 3% male
  - 2% nonbinary/gender fluid
- April and August responses



By User:Wapcaplet, edited by User:Ed g2s, User:Dbenbenn - File:Map\_of\_USA\_with\_state\_names\_2.svg, CC BY-SA 3.0, <https://commons.wikimedia.org/w/index.php?curid=81990933>



# How directly have you been affected by COVID-19?

COVID exposure	April	August	Direction
COVID-19 diagnosis	1%	1%	→
COVID-19 exposure	6%	9%	↑
Family member physically ill from COVID-19	7%	23%	↑
Family member lost job because of COVID-19	25%	30%	↑

[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)



# How concerned are you about COVID-19? (somewhat/very)

Concern about impact of COVID-19 on..	April	August	Direction
Access to enough food	39%	10%	↓
Access to foods consistent with meal plan	61%	26%	↓
Worsening due to a <b>lack of structure</b>	79%	60%	↓
Worsening due to a <b>lack of social support</b>	59%	53%	→
Worsening due to living in a <b>triggering environment</b>	58%	45%	↓
Afford the food I need for recovery due to loss of income	18%	14%	→
Afford eating disorder treatment due to loss of income	21%	18%	→

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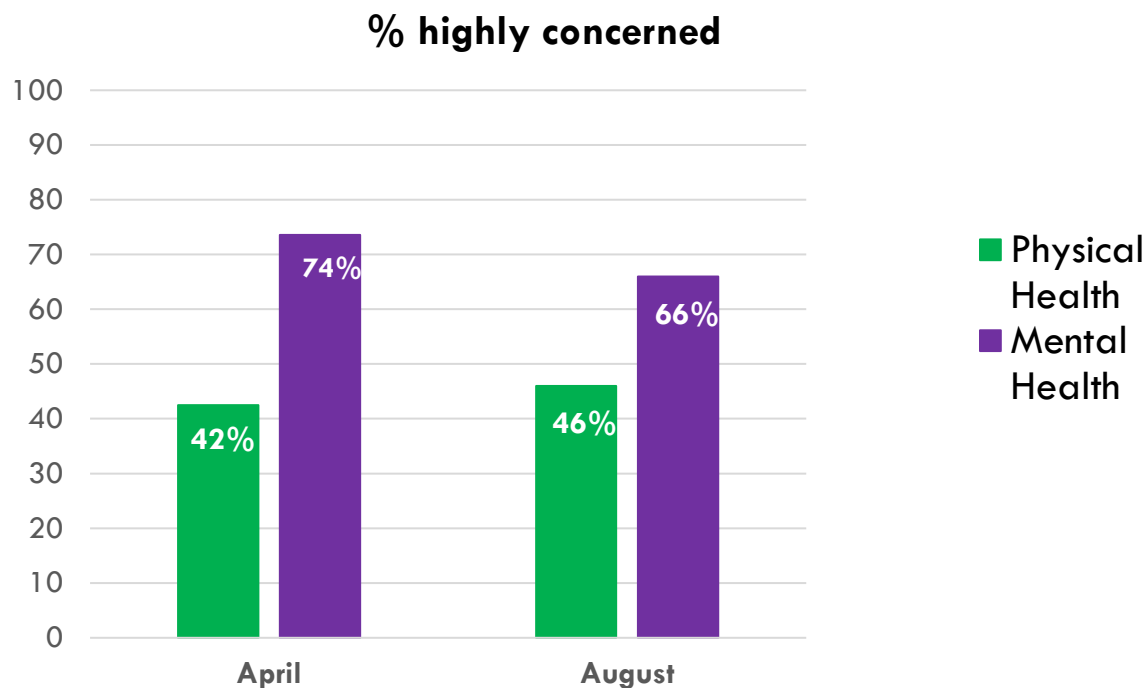


# Impact of COVID-19 on eating disorder behaviors

Items (% responding frequently or daily)	April	August	Direction
Binge eating on stockpiled foods	23%	13%	↓
Restricting food intake	48%	31%	↓
Compensatory behaviors (e.g., vomiting, excessive exercise, misuse of laxatives and/or water pills)	35%	27%	↓
Felt anxious about not being able to exercise	57%	44%	↓

[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)

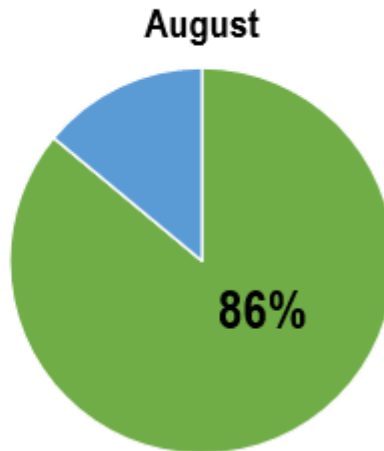
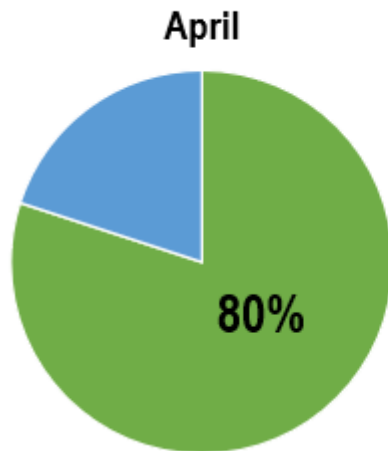
## How worried about the impact of COVID-19 on physical and mental health?



[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)



# Have your anxiety levels increased since 2019?



**99% attribute to COVID-19**



# Impact of COVID-19 on eating disorder treatment

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- **45% in April and 38% in August not receiving any treatment for their eating disorder**
- Acceptability of virtual therapy is improving. In April 47% said their treatment was worse than face-to-face, in August down to 30%
- The ability to do teletherapy is extremely beneficial for access to care—especially rural patients & those who live far from specialty centers. This should continue!
- Next important goal is authorizing treatment across state lines (all states do not have eating disorders specialist centers)

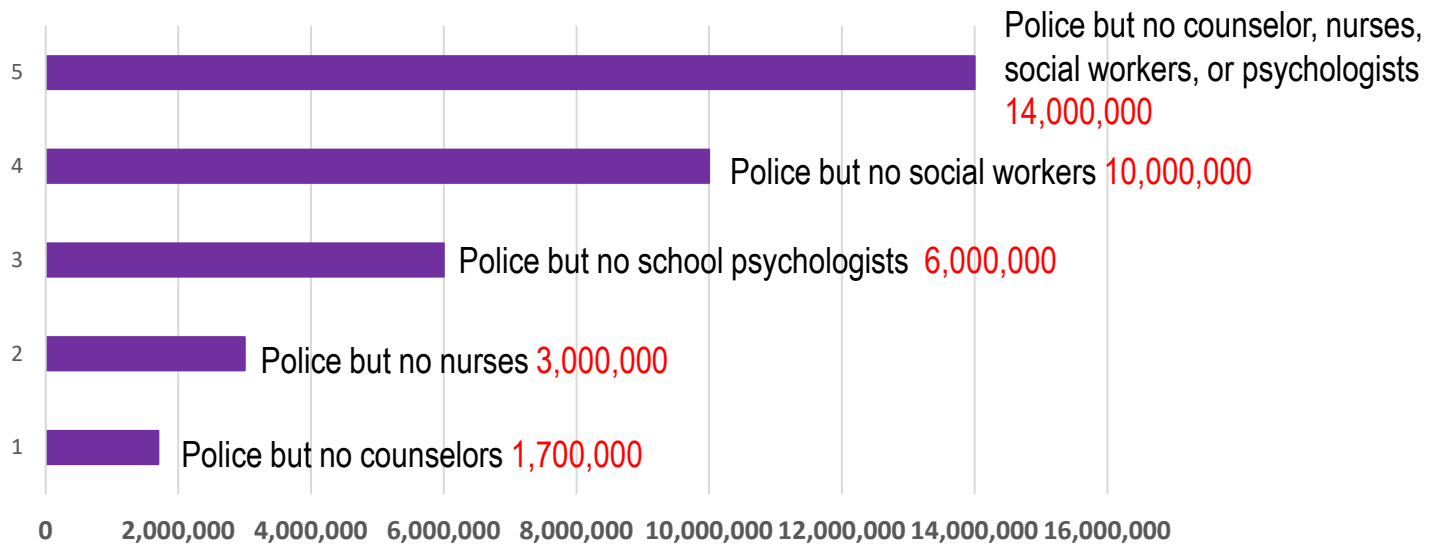
[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)

# Are our schools ready for the mental health pandemic?



**No!**

Who is looking after our children in school?



<https://www.aclu.org/report/cops-and-no-counselors>

[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)

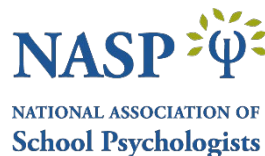


# How can we look after the physical and mental wellness of youth?

- Health and mental health workers in schools are rare and stretched
- School wellness programs are required to address nutrition and obesity prevention, but knowledgeable professionals are in short supply
- Mental health professionals and dietitians can provide valuable input into school wellness programs to ensure that they DO NO HARM
- Any wellness program that addresses weight must also address eating disorders



School Social Work  
Association of America



NATIONAL ASSOCIATION OF  
School Psychologists



AMERICAN  
SCHOOL  
COUNSELOR  
ASSOCIATION



National  
Association of  
School Nurses

[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)



National Eating Disorders Association

# You can't see an eating disorder

- Eating disorders can strike youth of:
  - All ages
  - All sexes
  - All sizes and shapes
  - All racial and ethnic backgrounds
  - All socioeconomic classes
- Schools can play a central role in detection and prevention





# Final messages



- COVID-19 has precipitated a mental health pandemic
- Our school children are vulnerable
- We must attend to physical AND mental wellness
- Nutrition education and obesity prevention programs need input from mental health professionals and dietitians to ensure that they DO NO HARM and do not unintentionally encourage eating disorders
- Early detection and intervention are associated with better outcome for eating disorders, and school-based prevention and detection can help us achieve that goal

Thank you!

[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)



# Information for Families and Caregivers



[www.nceedus.org](http://www.nceedus.org)  
SAMHSA

# Information for Healthcare Professionals

## Eating Disorders and COVID-19: What Individuals and Families/Caregivers Need to Know

The National Center of Excellence for Eating Disorders (NCEED) partnered with researchers at the University of North Carolina at Chapel Hill and Leiden University Medical Center to understand how COVID-19 is affecting individuals with eating disorders. This large-scale, international study (COVID-ED) of over 1,000 individuals was the first of its kind, and the full results can be read [here](#). As an overview of the early findings from the United States, NCEED has developed the following recommendations if you or your loved one has an eating disorder:

- **Keep a close eye on any changes in symptoms.** Some participants in the COVID-ED study reported that since the start of COVID-19, they have experienced increases in dietary restriction, binge eating, and overexercise, as well as fears about being able to find foods that fit in their meal plan. These results suggest that a worsening of your or your loved one's eating disorder might have been triggered by COVID-19 and public health measures to limit the spread of the virus such as physical distancing.
- **Look for ways to help make the home environment a safe place for eating disorder recovery.** Participants in the COVID-ED study reported that their eating disorder had gotten worse due to a lack of structure in daily routines and at mealtimes, a lack of social support, and spending increased amounts of time in an environment that was triggering. If you or your loved one has an eating disorder, you might want to consider:
  - Having regular meal and snack times throughout the day
  - Asking a family member or friend to provide support during video calls
  - Scheduling time for connection with loved ones when you are able
- **Stay connected with your treatment team if you have not currently in treatment.** Results from the COVID-ED study suggest that individuals who were not currently getting care for your eating disorder, please access the [National Eating Disorder Association \(NEDA\) helpline](#) to reach out to your provider—booster sessions can help get you back on track.
- **Find the bright spots when you can.** Participants in the COVID-ED study reported positive experiences during COVID-19 including: more family meals, more social support, and increased motivation to recover. If you or your loved one may be important find the positives during this time and make them a positive on a regular basis.
- **Looking for more information on how to care for yourself during COVID-19?**
  - Visit [NCEED's COVID-19 Resource Library](#) for more information
  - [NEDA](#) and [The Alliance for Eating Disorders](#) are also helpful resources



## Eating Disorders and COVID-19: What Healthcare Providers Need to Know

The National Center of Excellence for Eating Disorders (NCEED) partnered with researchers at the University of North Carolina at Chapel Hill and Leiden University Medical Center to examine the impact of COVID-19 on individuals with eating disorders. This large-scale, international study (COVID-ED) was the first of its kind to elucidate the ways in which individuals with eating disorders might be uniquely impacted by COVID-19 and public health measures to flatten the curve. The baseline data from over 1,000 participants are presented in full [here](#). Based on the initial findings from data collected in the United States, NCEED has developed the following recommendations for healthcare providers who are involved in eating disorders care.

- **Be aware that eating disorders and anxiety may worsen during the global pandemic.** COVID-ED participants reported that since the onset of the pandemic, they have experienced increases in behaviors like dietary restriction, binge eating, and compulsive/driven exercise. Additionally, 80% of participants reported increases in their overall anxiety levels.
- **Develop collaborative strategies with patients in 3 key areas:**
  - Lack of structure (particularly around daily schedules and meals)
  - Being in a triggering living environment
  - Lack of social support
- **Harness factors that may lead to positive changes.** COVID-ED participants identified that family mealtimes, connecting with loved ones, and opportunities for self-care have had a positive effect on their eating disorder. Thus, exploring and supporting positive factors may aid in creative treatment planning and facilitate progress toward goals.
- **Be flexible in the approach to delivering remote care and any modifications that might be necessary.** Early data from COVID-ED indicated that although the majority of respondents had transitioned to telehealth (83%), satisfaction with this mode of service delivery varied widely. We recommend frank discussions with patients about what does and does not work in remote care. Results suggest it is unwise to assume that telehealth sessions are automatically experienced as equivalent to in-person interventions. Open discussions may help improve retention and elevate the quality of care delivered.
- **Be mindful that even patients who are recovered or are in recovery are concerned about symptom resurgence or relapse.** Consistent eating disorder-related concerns were reported even among COVID-ED participants who were not currently symptomatic. These results suggest that COVID-19 could pose a risk for relapse, and patients with a history of eating disorders should be encouraged to seek care as needed.

For more information about how to manage eating disorders during COVID-19, please visit the [NCEED COVID-19 information page](#).

Are you new to managing eating disorders in your practice? Visit the [NCEED Healthcare Provider Resource Library](#) for helpful how-tos and the [NCEED Training Center](#) for webinars offering FREE continuing education credits.



[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)



# Q&A

[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)

# Preventing Disordered Eating, Weight Stigma and Improving Mental Health in Schools

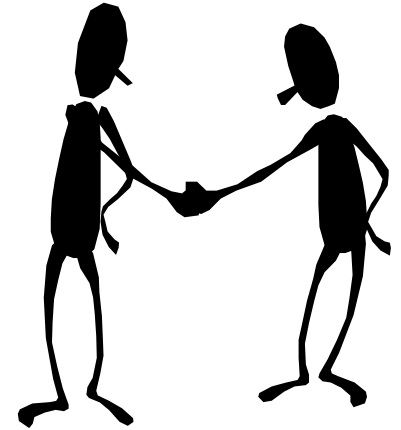
School-based prevention and weight  
inclusivity within the context of overall  
health promotion

Lily O'Hara, MPH PhD



# Health promotion

- Comprehensive social and political process
- Involves working in a collaborative relationship with people
- Includes actions to change the conditions that impact on health and health equity
- And actions to strengthen the skills and capabilities of people



[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)

# Health promotion

- A process – a verb
- Enhancement
- Improvement
- Advancement
- Moving to a higher level



[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)

# Health promotion is not

Marketing health behaviors



A promotional flyer for a 'MEGA BIG SALE'. The top section features the text 'MEGA BIG SALE' in large, bold, black letters on an orange background. To the right is a black messenger bag with a 'SALE 70% OFF' badge. Below this, there are two rows of product cards, each with a 'SALE' badge and a price tag. The first row includes: a red 'Pector Bag' for \$2.00, a black 'Bag Isolated' for \$8.00, and an orange 'Bag Collection' for \$5.00. The second row includes: blue 'Woodsen Sandal' for \$2.00, pink 'Child Shoes' for \$2.00, and black 'Sandall Bank' for \$2.00. At the bottom, there is contact information for NEDA: 'Address: 447 Jersey Avenue, Jersey Gardens, NJ 07033', 'Phone: 908-733-4344', 'www.yourmailaddress.com', and a QR code.

[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)





World Health Organization, 2016

[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)

# Determinants of health at the population level

## Social determinants of health

Socioeconomic status: education, income, employment +

Social, cultural, economic, political, natural, built environments

School wellness policy

Weight stigma

Discrimination

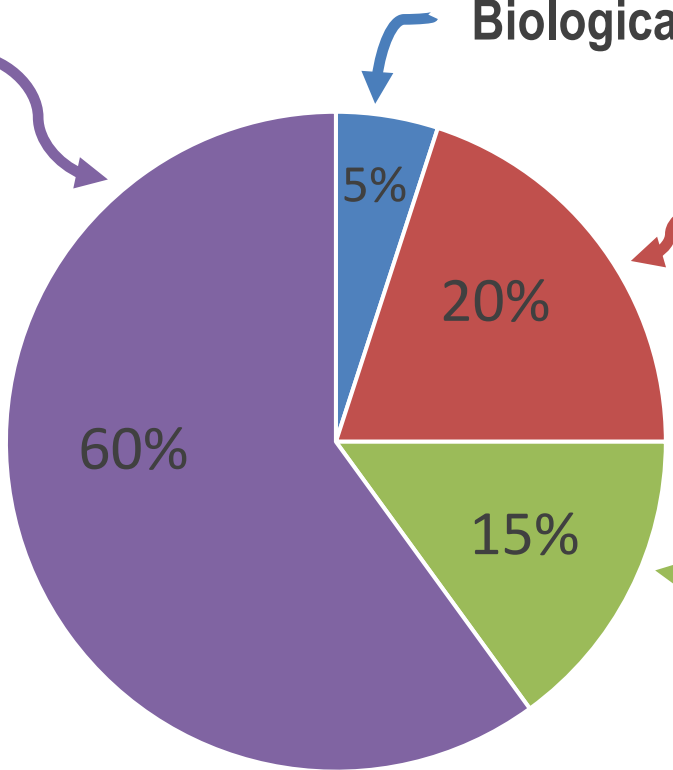
## Biological factors age, sex, genetics

## Health behaviours

Sleep, physical activity, socialising, meditation, food consumption, volunteering, smoking, etc.

## Medical care

Primary health care, inpatient treatment etc.



[www.cdc.gov/nchhstp/socialdeterminants/faq.html](http://www.cdc.gov/nchhstp/socialdeterminants/faq.html)

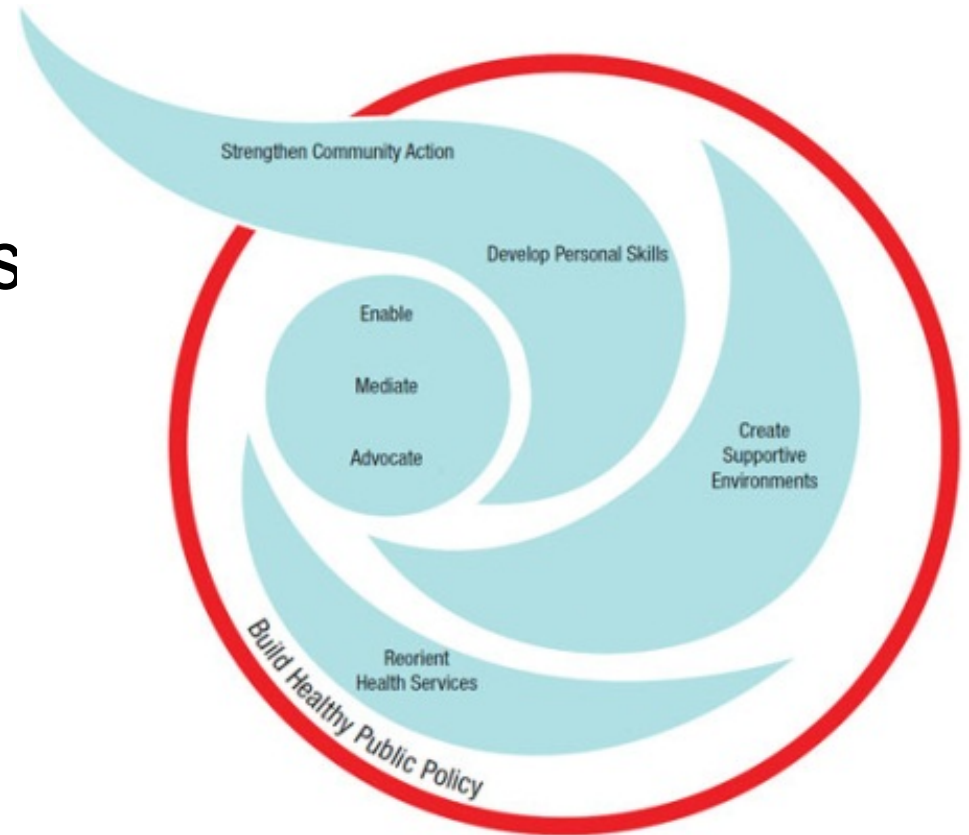
[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)



# Ottawa Charter for Health Promotion

## Health promotion strategies

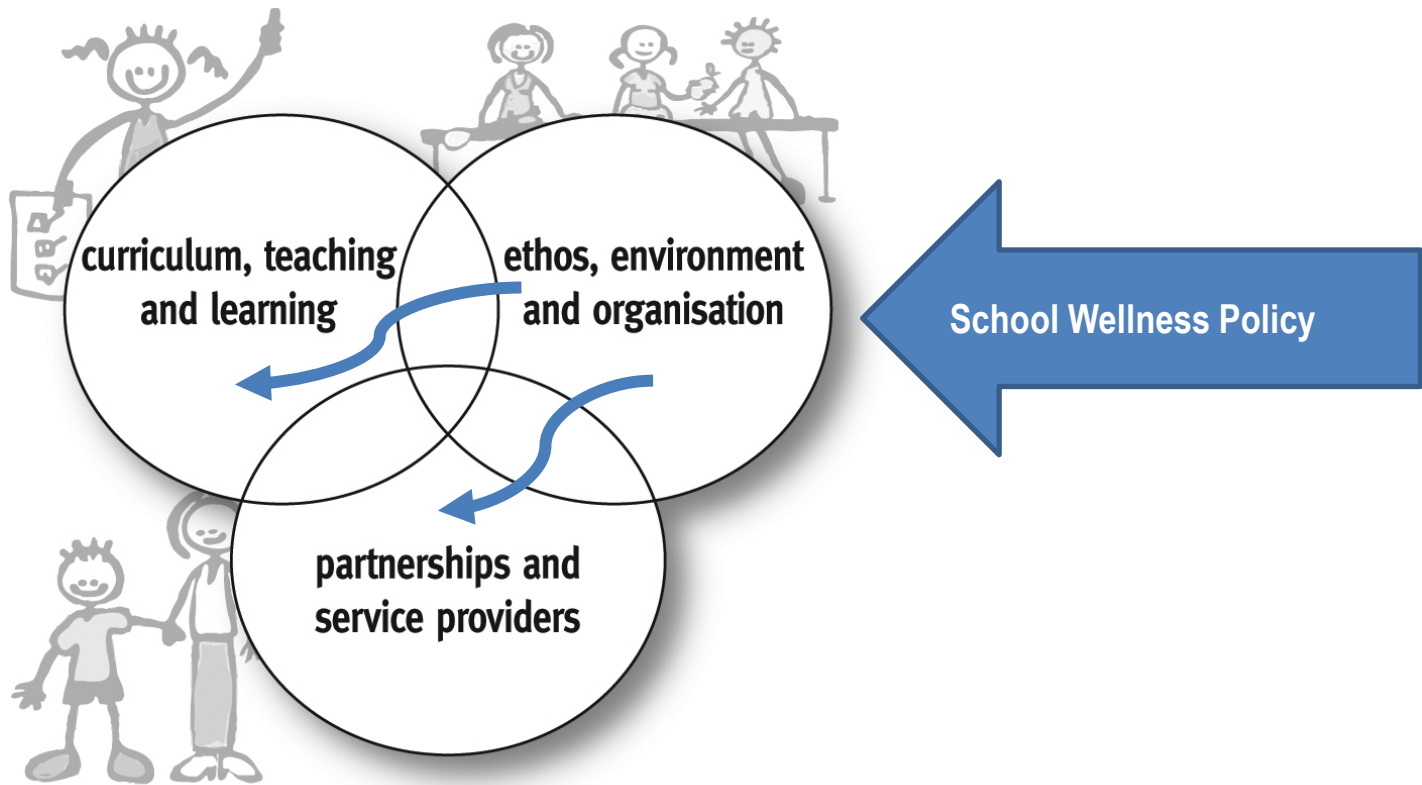
- Building healthy public policy
- Creating supportive environments
- Strengthening community action
- Developing personal skills
- Reorienting health services



World Health Organization, 1986

[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)

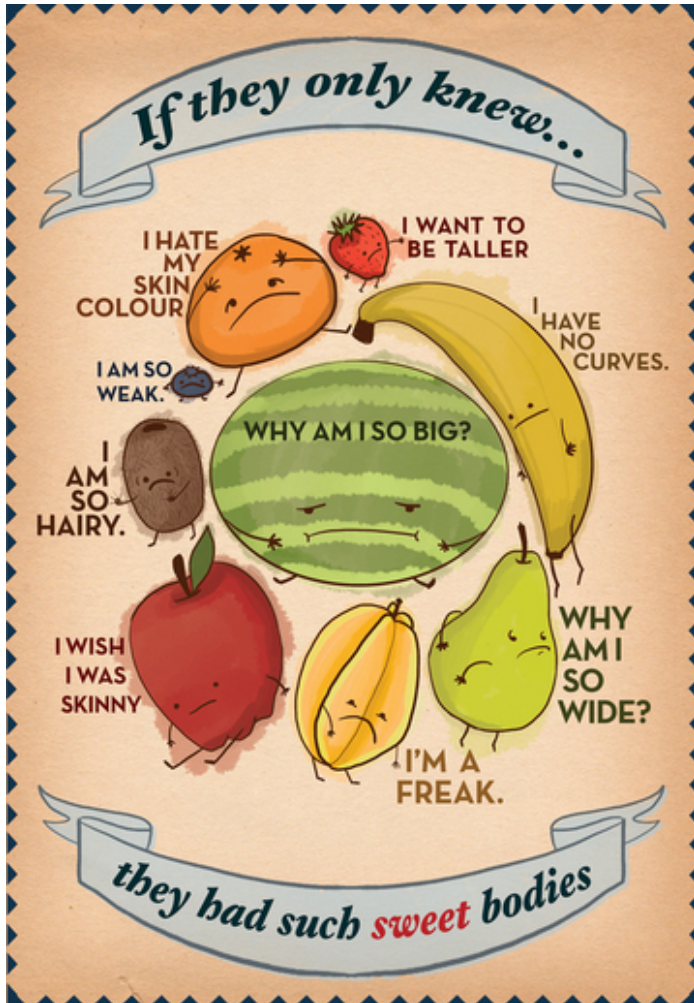
# Health Promoting School Model



World Health Organization, 1995







<http://gentleangryblogger.blogspot.ae/2012/05/celebrating-body-diversity-with.html>



Exacerbate weight stigma, dissatisfaction, disordered eating and eating disorders

[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)

The school nurse weighed me and said I was 'overw\*ight' and now my brother teases me and calls me fatty



[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)





My Mum got a letter from school saying I was 'ob\*se'. I felt really sad because kids pick on other kids who are fat

When I hear at school  
that you want to prevent  
childhood ob\*sity, I feel  
like you want to eliminate  
kids like me

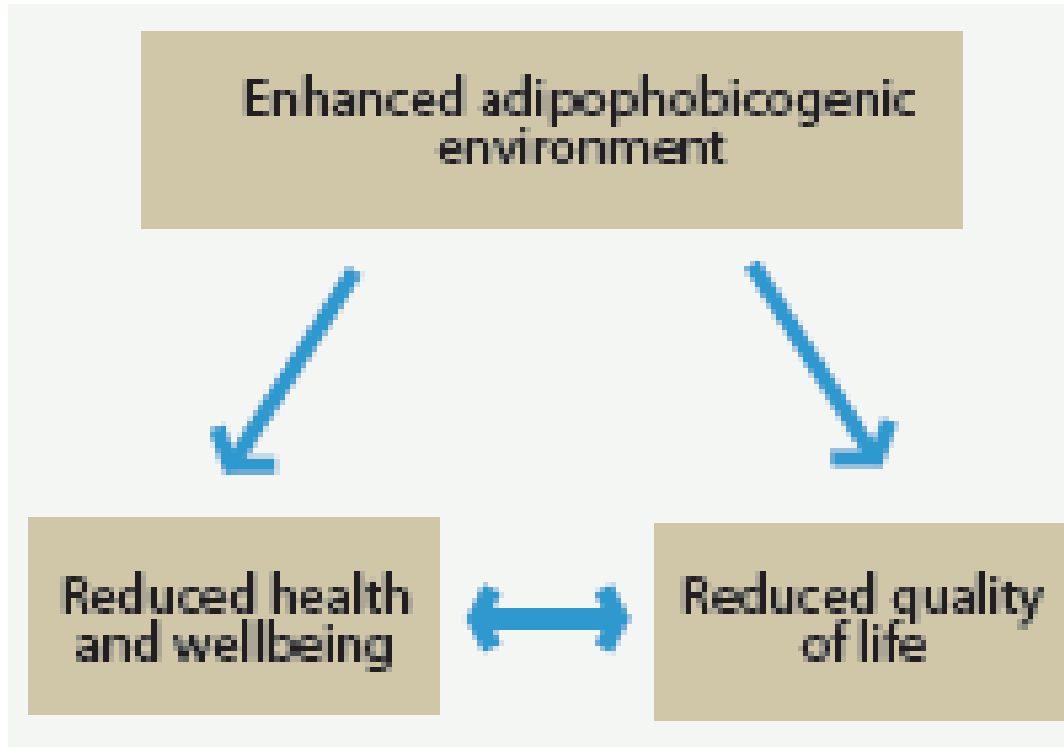


[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)



Mum, the nurse at school told me I am 'ob\*se'. Does that mean I'm too fat?

# Effect of School Wellness Policies

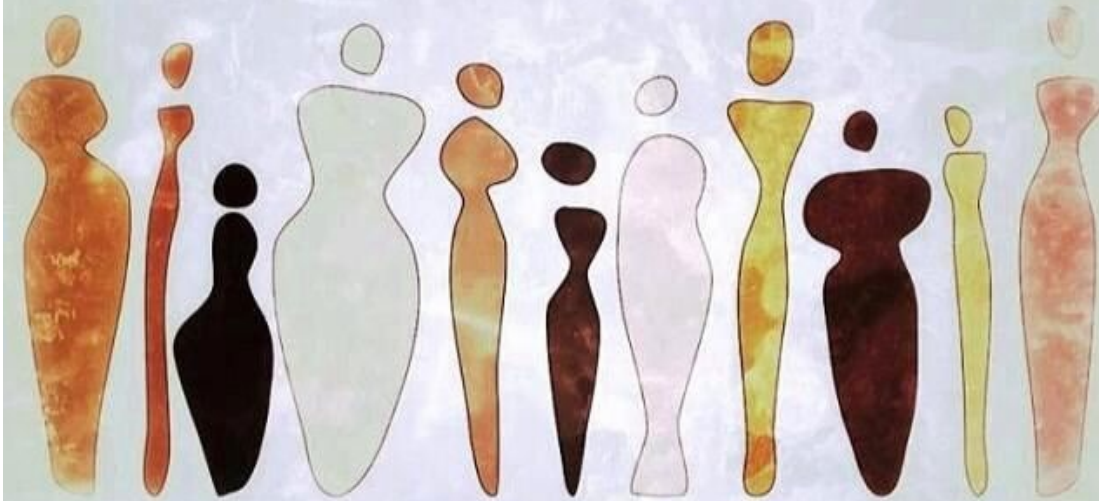


Adipo = fat  
Phobic = fear  
Genic = creation

O'Hara & Taylor 2018 What's Wrong with the War on Obesity, Sage Open, <https://doi.org/10.1177/2158244018772888>

[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)

Contrary to what you see  
in the media



We are not all  
supposed to look the same.

[www.facebook.com/notadiet](http://www.facebook.com/notadiet)

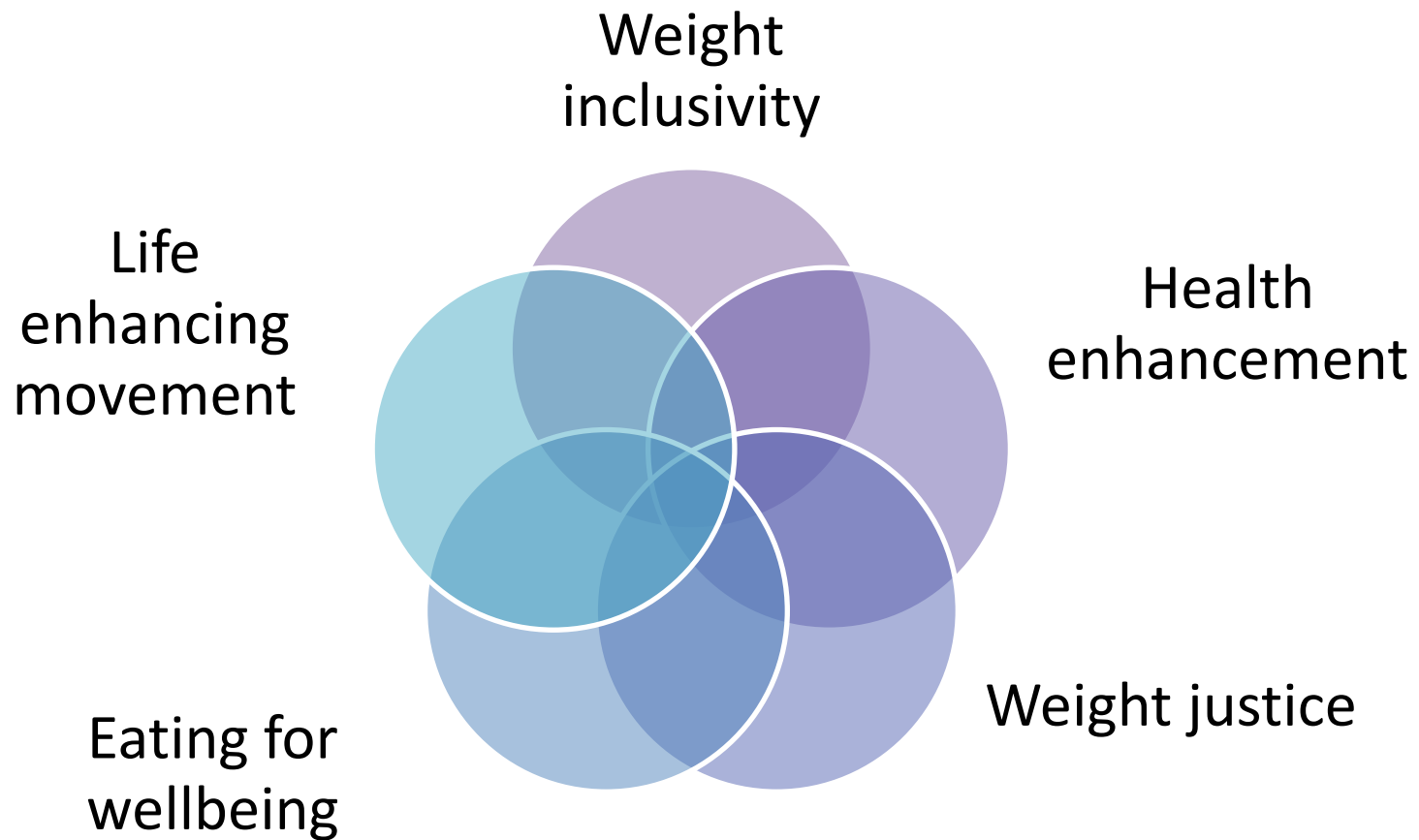
[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)

# Health at Every Size approach

A social justice approach to  
improving environmental supports and actions that  
enhance the health and wellbeing of  
people at every size  
and reduce health inequities

[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)

# Health at Every Size principles



[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)



Accepting and respecting the inherent diversity of body shapes and sizes and rejecting the idealizing or pathologizing of specific weights



## Weight inclusivity



[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)

# Health enhancement



Enacting policies and practices that improve human wellbeing, including a focus on physical, economic, social, spiritual, emotional, and other needs

[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)

# Weight justice

Working to end weight discrimination,  
weight stigma and weight bias



[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)



# Eating for wellbeing



Promoting flexible eating based on hunger, satiety, nutritional needs and pleasure

[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)

# Life enhancing movement

Supporting physical activities that  
allow all people to engage in  
enjoyable movement



[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)



# Health At Every Size approach



Weight inclusive not weight centered

Respect not shame

Social determinants not individual blame

Evidence not assumptions

Health enhancing not health harming

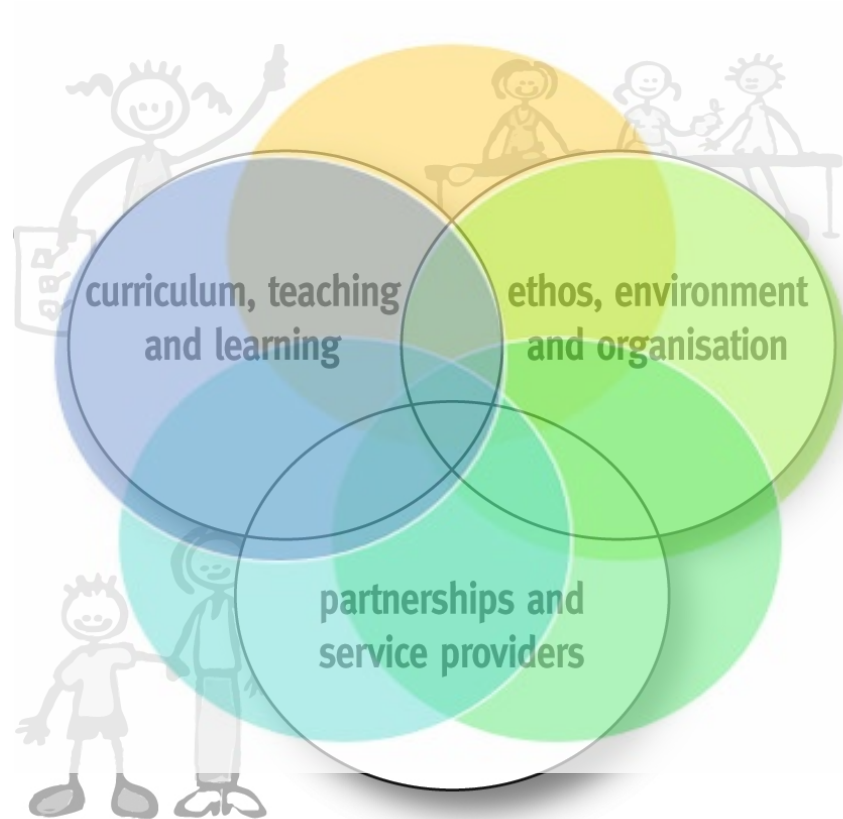


[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)



# Health and wellbeing of school children

Health Promoting  
Schools Model



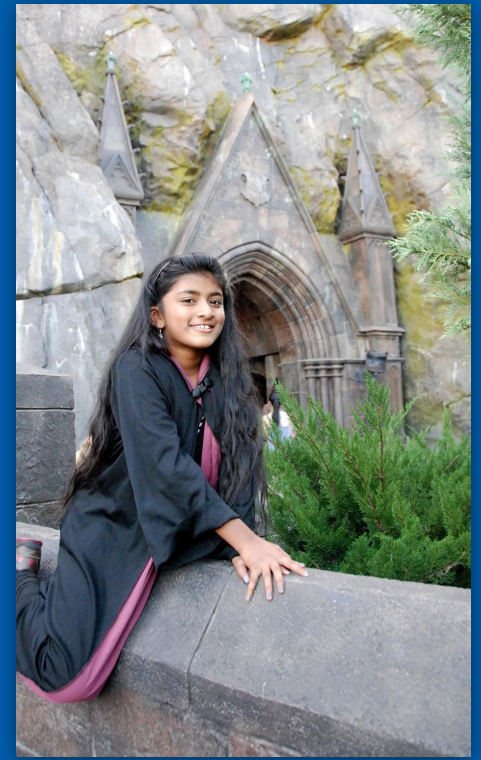
Eating Disorder Prevention in  
Schools Act of 2020

Health at Every  
Size approach

[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)

# Q&A

[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)

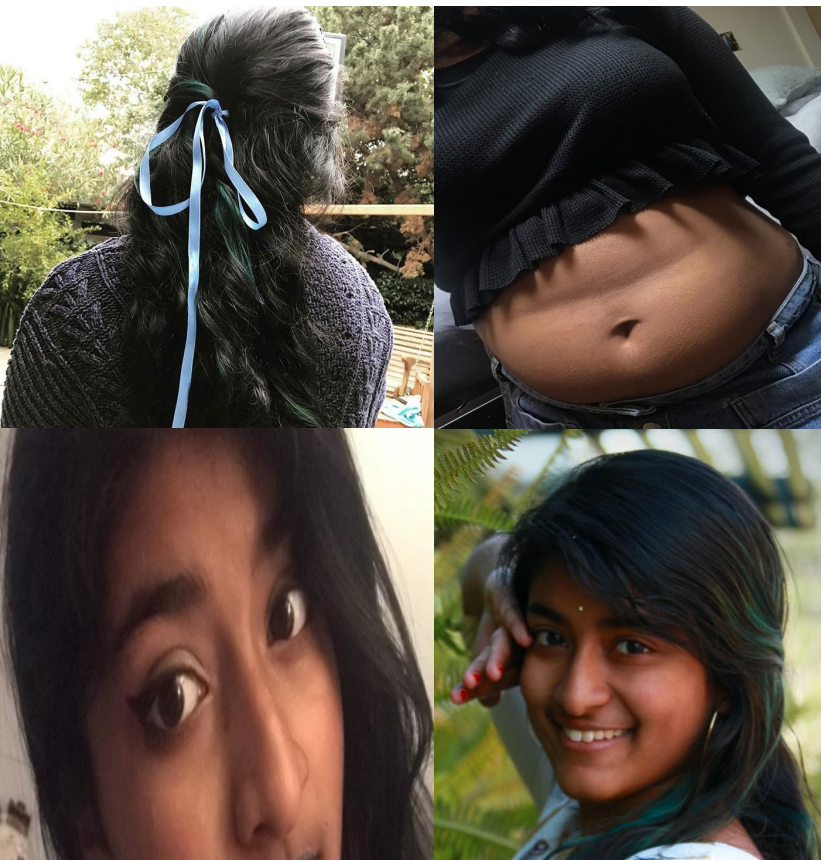


# Athena Nair, Tufts University Student & Body Positive Activist

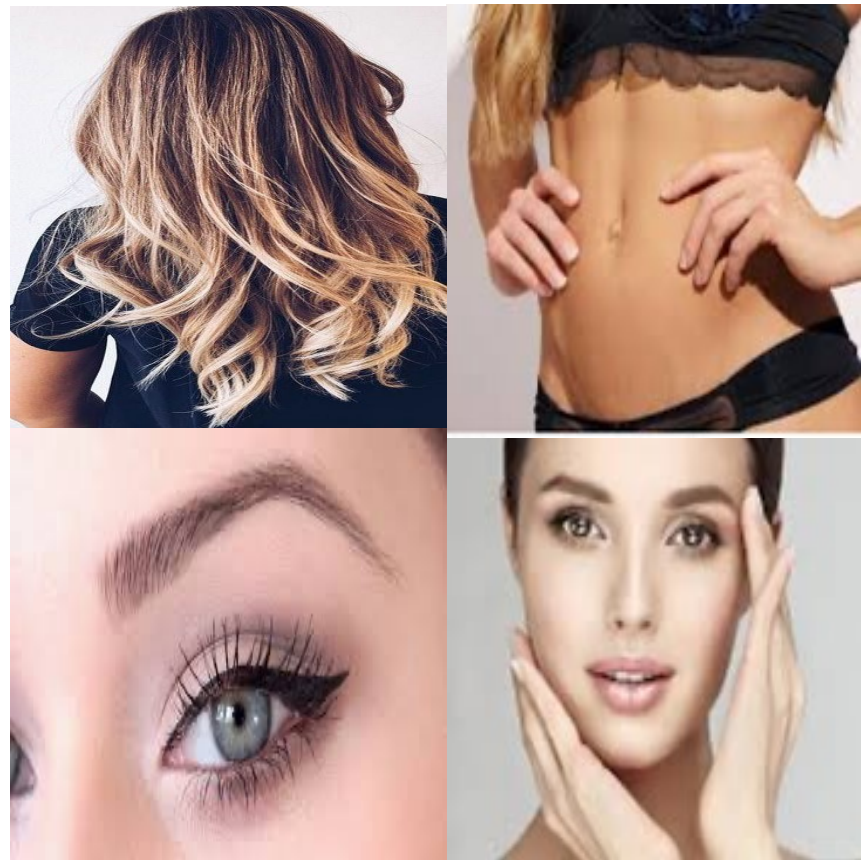




## My external beauty

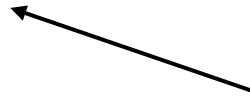


## “Ideal” external beauty



[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)

“I gotta burn off these calories after eating this cookie!”



Phrases that were symptomatic of my eating disorder (and of many people with EDs)

“I’m trying this new workout to target my belly fat”



**ALSO**

“I can’t wear that, everyone will see my stomach rolls!”



Phrases that are normalized and rewarded in our everyday life



Source: Change.org

[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)



That's the awful part—people who restrict and torture themselves—their behaviors are reinforced and rewarded for their effort to not become fat.

#589

Tell Me I'm Fat  
thisamericanlife.org

THIS  
AMERICAN  
LIFE



Source: Youtube, Amazon

[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)



**FAT** IS NOT  
A **BAD**  
**WORD**

Source: 180 Strength

[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)



## **LISTEN TO YOUR BODY, LEARN, AND THRIVE.**

Since 1996, we have been helping people develop balanced, joyful self-care and a relationship with their bodies that is guided by love, forgiveness, and humor.

[thebodypositive.org](http://thebodypositive.org)

[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)



1) It doesn't need to be the norm to hate my body.

2) Being fat is not a bad thing.

[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)

# *Diet Culture*

**A SYSTEM THAT VALUES WEIGHT, SHAPE, AND  
SIZE OVER HEALTH AND WELL-BEING.**

[WWW.MYSIGNATURENUTRITION.COM](http://WWW.MYSIGNATURENUTRITION.COM)

[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)

# Habits matter...

“A 2016 study that followed participants for an average of 19 years found that **unfit skinny people were twice as likely to get diabetes as fit fat people.**” -HuffPost, 2018

...Not weight

[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)



1) Fat  $\neq$  unhealthy

- Regardless -

2) Unhealthy  $\neq$  undeserving of love and worth

Unhealthy

Out of control

Morally deviant

[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)

45% of adults are preoccupied with their weight some or all of the time

*Half of 3- to 6- year old girls say they're scared of being fat*  
-HuffPost, 2018

[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)

## Change starts with educating our youth

- Prevention is key
- Learning Health at Every Size, focus on access to healthy habits, not weight
- Learning intuitive eating and trusting their bodies
- Embracing their worth beyond just their bodies
- Having role models

[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)

Changing lives, ushering in a new generation, starts with educating our youth. It starts with EDPSA.

[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)



# Q&A

[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)