

111TH CONGRESS
1ST SESSION

H. R. 26

To amend title V of the Elementary and Secondary Education Act of 1965 to raise awareness of eating disorders and to create educational programs concerning the same, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

JANUARY 6, 2009

Mrs. BIGGERT introduced the following bill; which was referred to the Committee on Education and Labor, and in addition to the Committee on Energy and Commerce, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

A BILL

To amend title V of the Elementary and Secondary Education Act of 1965 to raise awareness of eating disorders and to create educational programs concerning the same, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Eating Disorders
5 Awareness, Prevention, and Education Act of 2009”.

6 **SEC. 2. FINDINGS.**

7 The Congress finds the following:

1 (1) An estimated 5,000,000 to 10,000,000
2 women and girls and 1,000,000 men and boys suffer
3 from eating disorders, including anorexia nervosa,
4 bulimia nervosa, and binge eating disorder, as well
5 as eating disorders that are not otherwise defined.

6 (2) Anorexia nervosa is an eating disorder char-
7 acterized by self-starvation and excessive weight loss.

8 (3) An estimated 0.5 to 3.7 percent of Amer-
9 ican women will suffer from anorexia nervosa in
10 their lifetime.

11 (4) Anorexia nervosa is associated with serious
12 health consequences including heart failure, kidney
13 failure, osteoporosis, and death.

14 (5) Anorexia nervosa has the highest mortality
15 rate of all psychiatric disorders. A young woman is
16 12 times more likely to die than other women her
17 age without anorexia.

18 (6) Bulimia nervosa is an eating disorder char-
19 acterized by excessive food consumption followed by
20 inappropriate compensatory behaviors, such as self-
21 induced vomiting, misuse of laxatives, fasting, or ex-
22 cessive exercise.

23 (7) Bulimia nervosa is common: an estimated
24 1.1 to 4.2 percent of American women will suffer
25 from this disorder in their lifetime.

1 (8) Bulimia nervosa is associated with cardiac,
2 gastrointestinal, and dental problems including ir-
3 regular heartbeats, gastric rupture, peptic ulcer, and
4 tooth decay.

5 (9) Binge eating disorder is characterized by
6 frequent episodes of uncontrolled overeating.

7 (10) Binge eating disorder is common: an esti-
8 mated 2 to 5 percent of Americans experience this
9 disorder in a 6-month period.

10 (11) Binge eating is associated with obesity,
11 heart disease, gall bladder disease, and diabetes.

12 (12) Eating disorders usually appear in adoles-
13 cence and are associated with substantial psycho-
14 logical problems, including depression, substance
15 abuse, and suicide.

16 (13) Forty-two percent of 1st through 3d grade
17 girls want to be thinner, and 81 percent of 10-year-
18 old children are afraid of being fat.

19 (14) Thirty-five percent of dieters progress to
20 pathological dieting, and 20 to 25 percent of these
21 individuals progress to partial or full syndrome eat-
22 ing disorders.

23 (15) Eating disorders can lead to death. Ac-
24 cording to the National Institute of Mental Health,
25 1 in 10 people with anorexia nervosa will die of star-

1 vation, cardiac arrest, or other medical complica-
2 tions.

3 (16) Eating disorders can have a negative im-
4 pact on the educational advancement of a student,
5 a situation often overlooked and rarely addressed in
6 the Nation's schools.

7 (17) Educational efforts to prevent eating dis-
8 orders are of primary importance to the health, well
9 being, and academic success of the Nation's stu-
10 dents.

11 (18) Females are much more likely than males
12 to develop an eating disorder. An estimated 5 to 15
13 percent of people with anorexia or bulimia and an
14 estimated 35 percent of people with binge eating dis-
15 order are male.

16 **SEC. 3. PURPOSES.**

17 The purposes of this Act are the following:

18 (1) To provide States, local school districts, and
19 parents with the means and flexibility to improve
20 awareness of, identify, and help students with eating
21 disorders.

22 (2) To help ensure that such individuals receive
23 a high-quality education and secure their chance for
24 a bright future.

1 **SEC. 4. INNOVATIVE ASSISTANCE FOR THE IDENTIFICA-**
2 **TION OF, TRAINING ON, AND EDUCATIONAL**
3 **AWARENESS OF EATING DISORDERS.**

4 Section 5131(a) of the Elementary and Secondary
5 Education Act of 1965 (20 U.S.C. 7215(a)) is amended
6 by adding at the end the following:

7 “(28) Programs to improve the identification of
8 students with eating disorders, increase awareness of
9 such disorders among parents and students, and
10 train educators (such as teachers, school nurses,
11 school social workers, coaches, school counselors,
12 and administrators) on effective eating disorder pre-
13 vention and assistance methods.”.

14 **SEC. 5. PUBLIC SERVICE ANNOUNCEMENTS.**

15 The Secretary of Education, in consultation with the
16 Secretary of Health and Human Services and the Director
17 of the National Institutes of Health, shall carry out a pro-
18 gram to develop, distribute, and promote the broadcasting
19 of public service announcements to improve public aware-
20 ness, and to promote the identification and prevention, of
21 eating disorders.

22 **SEC. 6. EATING DISORDER RESEARCH AND REPORT.**

23 Not later than 18 months after the enactment of this
24 Act, the National Center for Education Statistics and the
25 National Center for Health Statistics shall conduct a

1 study on the impact eating disorders have on educational
2 advancement and achievement. The study shall—

3 (1) determine the prevalence of eating disorders
4 among students and the morbidity and mortality
5 rates associated with eating disorders;

6 (2) evaluate the extent to which students with
7 eating disorders are more likely to miss school, have
8 delayed rates of development, or have reduced cog-
9 nitive skills;

10 (3) report on current State and local programs
11 to educate youth about the dangers of eating dis-
12 orders, as well as evaluate the value of such pro-
13 grams; and

14 (4) make recommendations on measures that
15 could be undertaken by the Congress, the Depart-
16 ment of Education, States, and local educational
17 agencies to strengthen eating disorder prevention
18 and awareness programs.

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