

February 28, 2024

House Education Policy Committee  
Minnesota House of Representatives  
100 Rev. Dr. Martin Luther King Jr. Blvd. S  
Saint Paul, MN 55155

Senate Education Policy Committee  
Minnesota Senate  
95 University Avenue West  
Saint Paul, MN 55155

Members of the House and Senate Health Committees:

I am writing as a Regents, McKnight Presidential, and Mayo Professor in the Division of Epidemiology and Community Health, School of Public Health, and an Adjunct Professor in the Department of Pediatrics, both at the University of Minnesota. Additionally, I write as a mother of four adult children, and several grandchildren. All my children were heavily involved in organized sports, and now my grandchildren are continuing in the tradition of being physically active.

I am writing in support of legislation that would require the Minnesota State High School League (MSHSL) to require school coaches in the MSHSL to receive information and training on eating disorder prevention and risk mitigation, as well as a general overview of eating disorder signs and symptoms and what to do about it if spotted.

Professionally I have done a great deal of work in the field of eating disorders and obesity. Over the last few decades, I have led one of the largest research studies focusing on a broad spectrum of eating and weight-related outcomes including eating disorders, unhealthy weight control behaviors, body image, dietary intake, weight stigmatization, and obesity. Research done by my team and other colleagues in the field have found that adult role models have significant influence over a young person's environment, and in turn, play a very large role in whether or not a young person develops an eating disorder.

Adult role models (coaches, teachers, parents, doctors, etc.) set the tone and protect the space where young people are growing. What we say and model about body weight, size, shape, and the role of food has a large impact on a young person's risk for developing an eating disorder. This can be especially true as it relates to coaches for adolescents. During the pre-teen and teenage years of physical and emotional development, which is when we often see eating disorders starting to develop, a coach can have an important influence over a young person's body image and eating behaviors. As eating disorders are deadly and more prevalent than many understand, it is imperative we, as a state, take action to protect our youth.

The state of Minnesota has taken important strides to protect our children's physical safety with the development and enforcement of an all-encompassing concussion protocol. It is time to do the same with regard to the prevention of eating disorders and the promotion of mental and physical health. The proposed legislation will help increase awareness and dispel myths and misconceptions about eating disorders. This is very important as the misconceptions of shame and stigma have gone on for too long, at a cost to too many (including loss of life).

Please pass this legislation as soon as possible.

Sincerely,



Dianne Neumark-Sztainer, PhD, MPH, RD  
Regents Professor  
McKnight Presidential and Mayo Professor  
Division of Epidemiology and Community Health  
School of Public Health  
University of Minnesota

# Angie Murphy

19747 596th Street \* Kellogg, MN 55945

February 14, 2024

House Education Policy Committee  
Minnesota House of Representatives  
100 Rev. Dr. Martin Luther King Jr. Blvd.  
Saint Paul, MN 55155

Senate Education Policy Committee  
Minnesota Senate  
95 University Avenue West  
Saint Paul, MN 55155

Members of the House Education and Senate Education Committees:

My name is Angie Murphy, from Kellogg, MN, and I am writing to you today to **request your support of HF3660.**

Our daughter, Kayla, was diagnosed with anorexia nervosa in 2015 at the age of 15. There were a lot of signs that we missed because we didn't know a whole lot about eating disorders or for that matter what was happening to our little girl. Looking back, in addition to what we missed, there are things that I feel with awareness and education, Kayla's teachers and coaches could have helped spot, as well—before Kayla's eating disorder became so strong.

I am writing this letter because I know the importance of the legislation before you as I believe if Kayla's coaches had awareness and minimal education, they may have seen the signs and could have been another set of eyes that would have seen the signs.

In addition, for Kayla (and many other young people), there are things school coaches unintentionally did and said that increased Kayla's risk for developing an eating disorder—basic things, well-intentioned things, but things that we know today put kids who are predisposed to an eating disorder at much greater risk. For example, I remember one of her basketball coaches told all the girls they were not allowed to have sweets or pop during basketball. When you put that seemingly reasonable dietary rule in place for kids who are predisposed to eating disorders, it is very harmful.

Kids who are predisposed to eating disorders often (not always) have these traits (to name a few):

- Disciplined
- Strong rule followers,
- High achievers
- Self-exacting
- High pain tolerance

That's right –traits that are admired and commended in our great athletes and soldiers are also the traits that put them at risk for eating disorders.

But we have to be aware that for young people genetically predisposed to eating disorders—and we

## Angie Murphy

19747 596th Street \* Kellogg, MN 55945

can't know who those kids are, but there are many, many thousand in Minnesota and millions across the United States—these types of well-intentioned dietary comments from coaches—who are kids look up to and follow so much, especially in adolescent and teen years—these comments are the “match” that lights the fuse of the eating disorder.

This “rule” about no sweets or pop during basketball became, we now know, looking back, one of the first triggers for Kayla. She was so affected by this request, that she never had sweets or pop again.

I am praying this bill passes so that our children have school coaches who are aware of eating disorders and feel equipped with the knowledge and confidently able to support health around body image and food choices for young athletes. It may seem like a tall order, but the fact is basic awareness and simple information can help adults do so much to change the space our kids spend time in.

I believe we can stop eating disorders before they take our children. Kayla passed away July 13, 2013, just before her 23<sup>rd</sup> birthday of complications from her eating disorder. A Minnesota law requiring the MN State High School League to inform coaches about eating disorders may well have saved Kayla's life.

Thank you for your consideration of this bill.

Please pass this legislation and make it a Minnesota law as quickly as humanly possible.

Thank you.

A handwritten signature in black ink, appearing to read 'Angie Murphy', written in a cursive style.

ANGIE MURPHY

# KATIE LOTH, PhD, MPH, RD, LD

Assistant Professor

Department of Family Medicine and Community Health

University of Minnesota Medical School

717 Delaware Street, Minneapolis MN 55455

February 28, 2024

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Minnesota House of Representatives  
100 Rev. Dr. Martin Luther King Jr. Blvd. S  
Saint Paul, MN 55155

Senate Education Policy Committee  
Minnesota Senate  
95 University Avenue West  
Saint Paul, MN 55155

Members of the House and Senate Health Committees:

My name is Katie Loth, I am an Assistant Professor and the Vice Chair for Faculty Affairs in the Department of Family Medicine and Community Health at the University of Minnesota Medical School. In this role I conduct research, teach family medicine residents and practice as a clinical dietitian at a full-spectrum family medicine clinic in Minneapolis. I am also the parent to three children ages 6, 12 and 14.

I am writing in support of legislation that would require the Minnesota State High School League to require school coaches to receive information and training on eating disorder prevention and risk mitigation, as well as a general overview of eating disorder signs and symptoms and what to do about it if spotted.

Professionally I have done a great deal of work in the field of eating disorder prevention. In particular, my program of research explores the social and environmental influences on child and adolescent dietary intake, eating behaviors and disordered eating behaviors. Specifically, I conduct research aimed at identifying ways that adults – parents, primary care providers, teachers, and coaches – can work to help the children in their care develop and maintain a healthy relationship with food and with their bodies. My research has led to well over 100 publications and contributed to changes in the ways that medical providers talk about food, weight and bodies to the young people in their care. And it is this body of work that contributes to my confidence that the legislation before you, if passed, could go a long way to protect the well-being of young people throughout the state of Minnesota.

The reason this legislation matters is because my research and the research of others has demonstrated that adult role models have great influence over a young person's (or many

KATIE LOTH, PhD, MPH, RD, LD

Assistant Professor

Department of Family Medicine and Community Health

University of Minnesota Medical School

717 Delaware Street, Minneapolis MN 55455

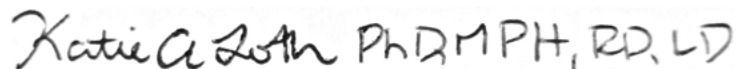
young people's) environment. And a young person's environment plays a very large role in whether or not a young person develops an eating disorder.

There are many adult role models (coaches, teachers, parents, doctors, etc.) that set the tone and protect the space where young people in which young people grow. What adults say and model about body weight, size, and shape, or the role of food has a very large impact on young people's risk for developing an eating disorder. This can be especially true as it relates to coaches for adolescents and teenagers. Indeed, my interest in understanding young people's relationship with food and with their bodies began during my time as a high school and college student-athlete; I recall being struck by the incongruity between the incredible athleticism of the young men and women with whom I swam and the devastatingly low satisfaction they felt with their shape and weight. Although I was very young at the time, it seemed clear to me that when young people do not love their body, they struggle to care for it properly, often failing to provide their body adequate support through proper nutrition, adequate sleep, and other types of self-care. A coach can be the adult with the greatest influence over a young person's views and beliefs about their body weight, shape and size as well as their understanding about how to properly care for themselves as they grow.

As eating disorders are deadly and more prevalent than many understand (they are at least as prevalent as concussions) it is imperative we, as a state, take action to protect our kids. This legislation will ensure that the coaches who help to shape the lives of the children in our state are equipped with the information they need to help support children to develop and maintain a positive relationship with food and their bodies.

Please pass this legislation as soon as possible.

Sincerely,



Katie A. Loth, PhD, MPH, RD, LD

Assistant Professor

Department of Family Medicine and Community Health, University of Minnesota Medical School

# KAREN KRYGIER

8026 W. 111<sup>th</sup> St., Bloomington, MN 55438

February 25, 2024

House Education Policy Committee  
Minnesota House of Representatives  
100 Rev. Dr. Martin Luther King Jr. Blvd.  
Saint Paul, MN 55155

Senate Education Policy Committee  
Minnesota Senate  
95 University Avenue West  
Saint Paul, MN 55155

Members of the House and Senate:

I am writing in support of legislation that would require the Minnesota State High School League to require school coaches to receive information and training on eating disorder prevention and risk mitigation, as well as a general overview of eating disorder signs and symptoms and what to do about it if spotted.

My personal experience with eating disorders is nearly lifelong. It all started at around age 9 being influenced primarily by my sport of figure skating – the perfect storm of other young and adolescent girls, the loving but often critical moms, and the “ideal image” of a figure skater all trying to fit into the perfect skating dress body.

By age 15 and entering high school, the eating disorder took control of my life and in fact, a very caring nurse at the school called my parents in after observing me in gym class. I praise this angel now but disdained her at that time.

The reason this legislation would make a difference is because it only takes one caring adult to have a tremendous impact on a young person’s life. I believe that compassionate adult role models have great influence over a young person's (or many young people’s) environment through their words, behaviors, and actions related to food and eating concepts. A young person’s environment plays a very large role in whether or not a young person develops an eating disorder.

Adult role models (coaches, teachers, parents, school nurses, doctors, etc.) set the tone and protect the space where young people are growing and developing their views about health and healthy eating habits. What we say or what we model about body weight, size, and shape, or the role of food has a very large impact on a young person’s risk for developing an eating disorder. This can be especially true as it relates to coaches for adolescents and teenagers. During the pre-teen and teenage years of physical and emotional development (incidentally the time we often see eating disorders starting to develop), a coach can be the adult with the greatest influence over a young person’s views and beliefs about what is important about the child’s body and food behaviors. As eating disorders are deadly and more prevalent than many understand (they are at least as prevalent as concussions) it is imperative we, as a state, take action to protect our kids.

**KAREN KRYGIER**

8026 W. 111<sup>th</sup> St., Bloomington, MN 55438

In addition, this legislation will help increase awareness and dispel myths and misconceptions about eating disorders for those directly affected, those at risk for development, educators, and social media. This is very important as the misconceptions of shame and stigma have gone on for too long, at a cost to too many (including loss of life).

Please pass this legislation as soon as possible.

Best regards,

A handwritten signature in black ink, appearing to read 'KSK' followed by a long horizontal flourish.

Karen Krygier



# CHAD GREENWAY

February 12, 2024

House Education Policy Committee  
Minnesota House of Representatives  
100 Rev. Dr. Martin Luther King Jr. Blvd.  
Saint Paul, MN 55155

Senate Education Policy Committee  
Minnesota Senate  
95 University Avenue West  
Saint Paul, MN 55155

Members of the House Education and Senate Education Committees:

As a retired NFL player, having had the privilege of spending my entire career, 11 seasons, with the Minnesota Vikings, and now as a Minnesota youth sports coach, and father to four young Minnesota athletes, I'm writing to express my **enthusiastic support for legislation require school coaches receive eating disorder prevention information and resources**. I respectfully request that you pass this legislation as soon as possible for the sake of Minnesota kids.

I have been aware of eating disorders for a long time, and I have seen too often how disordered eating behaviors harm young athletes, both in adolescence and later, as those young athletes become adults.

I'm writing this letter because more than ever before we are seeing young people trying to force their bodies to fit an impossible ideal and the consequences range from unsettling to sad to tragic. Too many young people, and too many well-intended coaches, equate a body or weight ideal with success in sports. This is a big problem because while there may be some size or weight advantage for professional or Olympic athletes, this is a harmful (even deadly) belief for youth sports and young athletes.

I've personally witnessed young athletes—with all the potential in the world—feeling they must fit a body ideal to truly succeed in sports. I've watched them trying to "drop weight," seeing their energy and fitness plummet, and then seeing them no longer able to participate in their sport because they are too weak. And, on the other side of the spectrum, I've seen young people consuming thousands of calories a day of only protein with the goal of "bulking up", not recognizing they are malnourished (no nutritional diversity) and overnourished (consuming more calories than they need) and not aware that this disordered food behavior is causing them serious harm, in the short- and long-term. But they do it because they believe this is necessary for them to achieve their sports dreams.

**Believing they are doing what it takes to achieve their dreams, these behaviors are cutting at our kids' lives, resulting in very harmful patterns and habits, or even death.**

Most young people will not fit the "body ideal" they may see on TV or online. Trying to fit that body ideal in childhood is very harmful or even deadly. And for those young people who don't develop a clinical eating disorder, their weight loss/gain attempts amount to harmful disordered eating. Disordered eating, if unrecognized and untreated, often continues into adulthood, causing real harm to mental and physical health.

# CHAD GREENWAY

As adults in Minnesota, we must take action to stop these preventable harms. This legislation does that by increasing awareness and knowledge for school coaches on what they should know about risk mitigation and prevention of disordered eating and eating disorders. We are lucky to have such a strong organization as the Minnesota State High School League which can serve as the bridge between this public health imperative and school coaches.

This legislation won't solve eating disorders, to be sure, but it will bring us a big and very important step forward—recognizing eating disorders as a health condition school coaches need to have on their radar and providing them with information, so they know where to go to learn more and to help.

Please pass this legislation for Minnesota kids.

Thank you.

A handwritten signature in black ink, appearing to read 'Chad Greenway', written in a cursive style.

CHAD GREENWAY

# Jessie Diggins

February 19, 2024

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Members of the House Education and Senate Education Committees:

I'm writing to express my **enthusiastic support for legislation to require the Minnesota State High School League require school coaches to receive educational information on eating disorder prevention and risk mitigation. I respectfully request that you pass this legislation as soon as possible .**

As a former Minnesota student-athlete and a proud graduate of Stillwater High School, I participated competitively in multiple sports. Today I am a professional cross-country ski racer where I represent the United States in events across the globe.

In 2018, a teammate and I won the United States' first-ever cross-country skiing gold medal in the PyeongChang Winter Olympic Games. In 2020-21, following months of grueling competition and travel, I won the FIS Cross-Country World Cup Ski Championships. At the 2022 Beijing Olympic Winter Games, I won the silver medal in 30k freestyle, and the bronze medal in the individual sprint race. Today I am competing in the 2023-24 FIS CC World Cup Ski Championships, participating in races in various countries throughout the world since September. With three more weeks of competition to go, I am in that top spot.

As has been reported in the media, when I race, I can work through conditions that would cause most people to stop. Sometimes I black out, or my body goes numb, but I keep going. In 2022, the day before the 30k freestyle event at the Beijing Winter Olympics, I endured food poisoning. 18 hours later I skied 30k (about 18 miles) against the fastest skiers in the world, and I won the Silver medal. The fact is, my teammates and I train for hours and hours year-round. We struggle, we work, we break down our bodies and our minds, we fight, we get stronger, we get faster, and we race our hearts, minds, and bodies out. We rest for a minute, and then we do it all over again. Year after year. And we do this in the public spotlight, often removed from our families and loved ones. It is an arduous grind, for which I am grateful.

I share all the above with you for one reason: **Everything I have ever worked toward and achieved in sports pales in comparison to the strength, grit, and perseverance that I have needed to work through an eating disorder. If I had to choose only ONE thing to accomplish in my professional career, it would not be medals or records. I would choose to have my words or actions help Minnesota youth avoid, to the extent possible, the path to an eating disorder.**

# Jessie Diggins

I can personally attest to the importance of HF3660 and how it will benefit Minnesota youth. In high school, I remember well a probably well-intended but uninformed coach saying things to me about my body and food that my adolescent brain heard as “gospel truth.” As a teenager, I did not yet have the cognitive ability to discern that what this coach was saying was not helpful or the best for me. My young brain never questioned what a coach said. So, when a coach said it looked like I had gained weight, for my adolescent brain, it sent me into a spiral that deepened my disordered eating and pushed me further into the thinking and behaviors that were at the heart of my eating disorder.

HF3660 will mean the Minnesota High School League has the support it needs to put eating disorder prevention and education at the top of the list of health conditions coaches should be educated on. **This matters.** Minnesota kids need adults to create environments that do not increase the risk for those of us genetically vulnerable to eating disorders. (Because we can't know who those kids are ahead of time.)

Additionally, HF3660 will be a big step toward increasing basic awareness of some hard facts that have been too quiet for too long: eating disorders have the second highest mortality rate of any mental illness (second to Opioid Use Disorder), and they are the 3<sup>rd</sup> most chronic health issue among adolescents. These statistics are for clinical eating disorders. Add to those statistics that 30% of our girls (and 19% of our boys) are engaged in “disordered eating” (“subclinical” eating disorders, or harmful actions related to food and body to lose weight or “bulk up”). This is all happening at a time when young people's bodies and brains are forming.

We simply must move beyond eating disorders as a subject people whisper about. **Too many of us for too long have gone through too much for secrecy, ignorance, or shame to continue.** As I have tried hard to do in my career, for Minnesota's youth (and adults) we need to make clear to everyone that eating disorders are not a personal failing—they are a health condition that those with a genetic predisposition are vulnerable to.

Please pass this legislation to require the League to require coaches to receive this information as quickly as possible. You're doing so will give me another great reason to feel so proud to be from Minnesota.



JESSIE DIGGINS

- Minnesota kids experience eating disorders at least as often as concussions.<sup>1</sup>
- Eating disorders are the 3<sup>rd</sup> most common chronic illness in adolescent females.<sup>2</sup>
- Eating disorders are the 2<sup>nd</sup> deadliest mental health condition (after Opioid Use Disorder).<sup>3</sup>
- Nearly 200,000 Minnesotans have a clinical eating disorder, and 95% of them are between 12–25 years old.<sup>4</sup>
- Eating disorders cost the American economy \$64.7 billion every year.<sup>5</sup>
- 30% of girls and 17% of boys have “subclinical” eating disorders – harmful body and food thoughts and behaviors that hurt them mentally and physically.<sup>6</sup>
- Rates of eating disorders: female athletes 6–45%; 1–19% in male athletes.<sup>7</sup>
- A study of competitive athletes showed over 86% met the criteria for an eating disorder/subthreshold eating disorder.<sup>8</sup>
- The Minnesota Legislature has never taken formal action to address eating disorders.

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<sup>1</sup> Dungan, Seymour, Roesler, Glover, and Kinde *Minnesota Medicine* “This is Your Brain on Sports: Measuring Concussions in High School Athletes in the Twin Cities Metropolitan Area,” September 2014; and Deloitte Access Economics “Social and economic cost of eating disorders in the United States of America” Report for the Strategic Training Initiative for the Prevention of Eating Disorders and the Academy for Eating Disorders (June 2020). <https://www.hsph.harvard.edu/striped/wp-content/uploads/sites/1267/2020/07/Social-Economic-Cost-of-Eating-Disorders-in-US.pdf>; and U.S. Census Bureau <https://www2.census.gov/programs-surveys/popest/tables/2010-2019/national/asrh/nc-est2019-agesex.xlsx>

<sup>2</sup> Children’s Hospital of Philadelphia PolicyLab, Jan 10, 2017 <https://policylab.chop.edu/blog/understanding-eating-disorders-qa-chop%E2%80%99s-alix-timko-phd>

<sup>3</sup> Graber, Eric *American Society for Nutrition* “Eating Disorders Are on the Rise” February 2021

<sup>4</sup> McCarthy, Claire, M.D., “Eating disorders spike among children and teens: What parents should know “ *Harvard Health Publishing*, April 21, 2022; and *Ibid*, Deloitte Access Economics.

<sup>4</sup>*Ibid*, Deloitte Access Economics “Social and economic cost of eating disorders in the United States of America”

<sup>5</sup> *Ibid*.

<sup>6</sup> (López-Gil JF, et al. *JAMA Pediatr.* 2023;doi:10.1001/jamapediatrics.2022 Global Proportion of Disordered Eating in Children and Adolescents **A Systematic Review and Meta-analysis**

<sup>7</sup> Bratland-Sanda, S., & Sundgot-Borgen, J. (2013). Eating disorders in athletes: Overview of prevalence, risk factors and recommendations for prevention and treatment. *European Journal of Sport Science*, 13(5), 499–508. <https://doi.org/10.1080/17461391.2012.740504>

<sup>8</sup> Flatt, R. E., Thornton, L. M., Fitzsimmons-Craft, E. E., Balantekin, K. N., Smolar, L., Mysko, C., Wifley, D. E., Taylor, C. B., DeFreese, J. D., Bardone-Cone, A. M., & Bulik, C. M. (2021). Comparing eating disorder characteristics and treatment in self-identified competitive athletes and non-athletes from the National Eating Disorders Association online screening tool. *The International journal of eating disorders*, 54(3), 365–375. <https://doi.org/10.1002/eat.23415>

# Jessie Diggins

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HF3660 will mean the Minnesota High School League has the support it needs to put eating disorder prevention and education at the top of the list of health conditions coaches should be educated on. **This matters.** Minnesota kids need adults to create environments that do not increase the risk for those of us genetically vulnerable to eating disorders. (Because we can't know who those kids are ahead of time.)

Additionally, HF3660 will be a big step toward increasing basic awareness of some hard facts that have been too quiet for too long: eating disorders have the second highest mortality rate of any mental illness (second to Opioid Use Disorder), and they are the 3<sup>rd</sup> most chronic health issue among adolescents. These statistics are for clinical eating disorders. Add to those statistics that 30% of our girls (and 19% of our boys) are engaged in “disordered eating” (“subclinical” eating disorders, or harmful actions related to food and body to lose weight or “bulk up”). This is all happening at a time when young people's bodies and brains are forming.

We simply must move beyond eating disorders as a subject people whisper about. **Too many of us for too long have gone through too much for secrecy, ignorance, or shame to continue.** As I have tried hard to do in my career, for Minnesota's youth (and adults) we need to make clear to everyone that eating disorders are not a personal failing—they are a health condition that those with a genetic predisposition are vulnerable to.

Please pass this legislation to require the League to require coaches to receive this information as quickly as possible. You're doing so will give me another great reason to feel so proud to be from Minnesota.



JESSIE DIGGINS

# CHAD GREENWAY

February 12, 2024

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I'm writing this letter because more than ever before we are seeing young people trying to force their bodies to fit an impossible ideal and the consequences range from unsettling to sad to tragic. Too many young people, and too many well-intended coaches, equate a body or weight ideal with success in sports. This is a big problem because while there may be some size or weight advantage for professional or Olympic athletes, this is a harmful (even deadly) belief for youth sports and young athletes.

I've personally witnessed young athletes—with all the potential in the world—feeling they must fit a body ideal to truly succeed in sports. I've watched them trying to "drop weight," seeing their energy and fitness plummet, and then seeing them no longer able to participate in their sport because they are too weak. And, on the other side of the spectrum, I've seen young people consuming thousands of calories a day of only protein with the goal of "bulking up", not recognizing they are malnourished (no nutritional diversity) and overnourished (consuming more calories than they need) and not aware that this disordered food behavior is causing them serious harm, in the short- and long-term. But they do it because they believe this is necessary for them to achieve their sports dreams.

**Believing they are doing what it takes to achieve their dreams, these behaviors are cutting at our kids' lives, resulting in very harmful patterns and habits, or even death.**

Most young people will not fit the "body ideal" they may see on TV or online. Trying to fit that body ideal in childhood is very harmful or even deadly. And for those young people who don't develop a clinical eating disorder, their weight loss/gain attempts amount to harmful disordered eating. Disordered eating, if unrecognized and untreated, often continues into adulthood, causing real harm to mental and physical health.



# CHAD GREENWAY

As adults in Minnesota, we must take action to stop these preventable harms. This legislation does that by increasing awareness and knowledge for school coaches on what they should know about risk mitigation and prevention of disordered eating and eating disorders. We are lucky to have such a strong organization as the Minnesota State High School League which can serve as the bridge between this public health imperative and school coaches.

This legislation won't solve eating disorders, to be sure, but it will bring us a big and very important step forward—recognizing eating disorders as a health condition school coaches need to have on their radar and providing them with information, so they know where to go to learn more and to help.

Please pass this legislation for Minnesota kids.

Thank you.

A handwritten signature in black ink, appearing to read 'Chad Greenway', written in a cursive style.

CHAD GREENWAY

February 28, 2024

House Education Policy Committee  
Minnesota House of Representatives  
100 Rev. Dr. Martin Luther King Jr. Blvd. S  
Saint Paul, MN 55155

Senate Education Policy Committee  
Minnesota Senate  
95 University Avenue West  
Saint Paul, MN 55155

Members of the House and Senate Health Committees:

I am writing as a Regents, McKnight Presidential, and Mayo Professor in the Division of Epidemiology and Community Health, School of Public Health, and an Adjunct Professor in the Department of Pediatrics, both at the University of Minnesota. Additionally, I write as a mother of four adult children, and several grandchildren. All my children were heavily involved in organized sports, and now my grandchildren are continuing in the tradition of being physically active.

I am writing in support of legislation that would require the Minnesota State High School League (MSHSL) to require school coaches in the MSHSL to receive information and training on eating disorder prevention and risk mitigation, as well as a general overview of eating disorder signs and symptoms and what to do about it if spotted.

Professionally I have done a great deal of work in the field of eating disorders and obesity. Over the last few decades, I have led one of the largest research studies focusing on a broad spectrum of eating and weight-related outcomes including eating disorders, unhealthy weight control behaviors, body image, dietary intake, weight stigmatization, and obesity. Research done by my team and other colleagues in the field have found that adult role models have significant influence over a young person's environment, and in turn, play a very large role in whether or not a young person develops an eating disorder.

Adult role models (coaches, teachers, parents, doctors, etc.) set the tone and protect the space where young people are growing. What we say and model about body weight, size, shape, and the role of food has a large impact on a young person's risk for developing an eating disorder. This can be especially true as it relates to coaches for adolescents. During the pre-teen and teenage years of physical and emotional development, which is when we often see eating disorders starting to develop, a coach can have an important influence over a young person's body image and eating behaviors. As eating disorders are deadly and more prevalent than many understand, it is imperative we, as a state, take action to protect our youth.

The state of Minnesota has taken important strides to protect our children's physical safety with the development and enforcement of an all-encompassing concussion protocol. It is time to do the same with regard to the prevention of eating disorders and the promotion of mental and physical health. The proposed legislation will help increase awareness and dispel myths and misconceptions about eating disorders. This is very important as the misconceptions of shame and stigma have gone on for too long, at a cost to too many (including loss of life).

Please pass this legislation as soon as possible.

Sincerely,



Dianne Neumark-Sztainer, PhD, MPH, RD  
Regents Professor  
McKnight Presidential and Mayo Professor  
Division of Epidemiology and Community Health  
School of Public Health  
University of Minnesota

# KATIE LOTH, PhD, MPH, RD, LD

Assistant Professor

Department of Family Medicine and Community Health

University of Minnesota Medical School

717 Delaware Street, Minneapolis MN 55455

February 28, 2024

House Education Policy Committee  
Minnesota House of Representatives  
100 Rev. Dr. Martin Luther King Jr. Blvd. S  
Saint Paul, MN 55155

Senate Education Policy Committee  
Minnesota Senate  
95 University Avenue West  
Saint Paul, MN 55155

Members of the House and Senate Health Committees:

My name is Katie Loth, I am an Assistant Professor and the Vice Chair for Faculty Affairs in the Department of Family Medicine and Community Health at the University of Minnesota Medical School. In this role I conduct research, teach family medicine residents and practice as a clinical dietitian at a full-spectrum family medicine clinic in Minneapolis. I am also the parent to three children ages 6, 12 and 14.

I am writing in support of legislation that would require the Minnesota State High School League to require school coaches to receive information and training on eating disorder prevention and risk mitigation, as well as a general overview of eating disorder signs and symptoms and what to do about it if spotted.

Professionally I have done a great deal of work in the field of eating disorder prevention. In particular, my program of research explores the social and environmental influences on child and adolescent dietary intake, eating behaviors and disordered eating behaviors. Specifically, I conduct research aimed at identifying ways that adults – parents, primary care providers, teachers, and coaches – can work to help the children in their care develop and maintain a healthy relationship with food and with their bodies. My research has led to well over 100 publications and contributed to changes in the ways that medical providers talk about food, weight and bodies to the young people in their care. And it is this body of work that contributes to my confidence that the legislation before you, if passed, could go a long way to protect the well-being of young people throughout the state of Minnesota.

The reason this legislation matters is because my research and the research of others has demonstrated that adult role models have great influence over a young person's (or many

KATIE LOTH, PhD, MPH, RD, LD

Assistant Professor

Department of Family Medicine and Community Health

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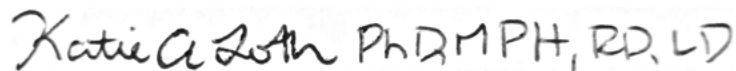
young people's) environment. And a young person's environment plays a very large role in whether or not a young person develops an eating disorder.

There are many adult role models (coaches, teachers, parents, doctors, etc.) that set the tone and protect the space where young people in which young people grow. What adults say and model about body weight, size, and shape, or the role of food has a very large impact on young people's risk for developing an eating disorder. This can be especially true as it relates to coaches for adolescents and teenagers. Indeed, my interest in understanding young people's relationship with food and with their bodies began during my time as a high school and college student-athlete; I recall being struck by the incongruity between the incredible athleticism of the young men and women with whom I swam and the devastatingly low satisfaction they felt with their shape and weight. Although I was very young at the time, it seemed clear to me that when young people do not love their body, they struggle to care for it properly, often failing to provide their body adequate support through proper nutrition, adequate sleep, and other types of self-care. A coach can be the adult with the greatest influence over a young person's views and beliefs about their body weight, shape and size as well as their understanding about how to properly care for themselves as they grow.

As eating disorders are deadly and more prevalent than many understand (they are at least as prevalent as concussions) it is imperative we, as a state, take action to protect our kids. This legislation will ensure that the coaches who help to shape the lives of the children in our state are equipped with the information they need to help support children to develop and maintain a positive relationship with food and their bodies.

Please pass this legislation as soon as possible.

Sincerely,



Katie A. Loth, PhD, MPH, RD, LD

Assistant Professor

Department of Family Medicine and Community Health, University of Minnesota Medical School

# Angie Murphy

19747 596th Street \* Kellogg, MN 55945

February 14, 2024

House Education Policy Committee  
Minnesota House of Representatives  
100 Rev. Dr. Martin Luther King Jr. Blvd.  
Saint Paul, MN 55155

Senate Education Policy Committee  
Minnesota Senate  
95 University Avenue West  
Saint Paul, MN 55155

Members of the House Education and Senate Education Committees:

My name is Angie Murphy, from Kellogg, MN, and I am writing to you today to **request your support of HF3660.**

Our daughter, Kayla, was diagnosed with anorexia nervosa in 2015 at the age of 15. There were a lot of signs that we missed because we didn't know a whole lot about eating disorders or for that matter what was happening to our little girl. Looking back, in addition to what we missed, there are things that I feel with awareness and education, Kayla's teachers and coaches could have helped spot, as well—before Kayla's eating disorder became so strong.

I am writing this letter because I know the importance of the legislation before you as I believe if Kayla's coaches had awareness and minimal education, they may have seen the signs and could have been another set of eyes that would have seen the signs.

In addition, for Kayla (and many other young people), there are things school coaches unintentionally did and said that increased Kayla's risk for developing an eating disorder—basic things, well-intentioned things, but things that we know today put kids who are predisposed to an eating disorder at much greater risk. For example, I remember one of her basketball coaches told all the girls they were not allowed to have sweets or pop during basketball. When you put that seemingly reasonable dietary rule in place for kids who are predisposed to eating disorders, it is very harmful.

Kids who are predisposed to eating disorders often (not always) have these traits (to name a few):

- Disciplined
- Strong rule followers,
- High achievers
- Self-exacting
- High pain tolerance

That's right –traits that are admired and commended in our great athletes and soldiers are also the traits that put them at risk for eating disorders.

But we have to be aware that for young people genetically predisposed to eating disorders—and we

## Angie Murphy

19747 596th Street \* Kellogg, MN 55945

can't know who those kids are, but there are many, many thousand in Minnesota and millions across the United States—these types of well-intentioned dietary comments from coaches—who are kids look up to and follow so much, especially in adolescent and teen years—these comments are the “match” that lights the fuse of the eating disorder.

This “rule” about no sweets or pop during basketball became, we now know, looking back, one of the first triggers for Kayla. She was so affected by this request, that she never had sweets or pop again.

I am praying this bill passes so that our children have school coaches who are aware of eating disorders and feel equipped with the knowledge and confidently able to support health around body image and food choices for young athletes. It may seem like a tall order, but the fact is basic awareness and simple information can help adults do so much to change the space our kids spend time in.

I believe we can stop eating disorders before they take our children. Kayla passed away July 13, 2013, just before her 23<sup>rd</sup> birthday of complications from her eating disorder. A Minnesota law requiring the MN State High School League to inform coaches about eating disorders may well have saved Kayla's life.

Thank you for your consideration of this bill.

Please pass this legislation and make it a Minnesota law as quickly as humanly possible.

Thank you.

A handwritten signature in black ink, appearing to read 'Angie Murphy', with a large, stylized flourish at the end.

ANGIE MURPHY

Deborah Christakos  
1650 Dupont Ave S  
Minneapolis MN 55403

February 28, 2024

House Education Policy Committee  
Minnesota House of Representatives  
100 Rev. Dr. Martin Luther King Jr. Blvd  
St. Paul, MN 55155

Senate Education Policy Committee  
Minnesota Senate  
95 University Ave W  
St. Paul, MN 55155

Members of the House and Senate Committees,

I am writing in support of legislation that would require the MN State High School League to require that school coaches receive information and training on eating disorder prevention, a general overview of eating disorder signs and symptoms, and what to do about it.

My 21 year old daughter first became ill with anorexia when she was only a 10 year old 5th grader. It took us a while to know what was happening to her, not understanding that this could happen to a girl so young. We thought she might have cancer or some other illness. Years later, she told me that a seemingly small thing, a mean boy calling her chubby when she was 7-8 years old, was what started the ball rolling.

This illness is all-consuming for patients and families. It's terrifying. Our daughter's recovery journey has been long and excruciating, lasting 8 years in and out of structured treatment at the Emily Program and Melrose Institute, including several times in inpatient treatment, partial hospitalization, outpatient treatment, diligent Family Based Therapy, and private eating disorder therapists. I am happy to say that she is in a very good place as a college student today, despite a short relapse her first semester. It will never quite be "over" for her. She will always have to look for the first signs of relapse and seek immediate help to avoid going back to that hideous dark place.

It might seem intuitive for a role model, such as a coach, not to mention body shape, weight or diet, but it is not. People simply do not know how their comments can "get the ball rolling" for that vulnerable kid. In high school our daughter, becoming wiser, noticed comments that even female coaches sometimes made about girls bodies. It happens to boys, too. In our years



going to "Parent Night" group therapy with our daughter, I learned that I was naive- there were boys in every program.

Alternatively, some of our daughter's coaches became allies when we were open about her illness and told them what we needed from them in order for our daughter to stay on the team. Their support was key, and was the result of giving them simple information, as we ask for his legislation to do.

Two of the kids in ED programs my daughter attended have passed away. This illness is no joke.

This legislation would be a no-brainer! This could be a relatively inexpensive, easy to execute, and easily digestible addition to training coaches already receive. It could become a national model, and save lives!

Please, please, pass this legislation!

Thank you!

Debby Christakos

# Eating disorders spike among children and teens: What parents should know

April 21, 2022

By [Claire McCarthy, MD](#), Senior Faculty Editor, Harvard Health Publishing

During the pandemic, we have seen many more children and teens [go to the emergency room with mental health problems](#). And there has been a notable rise in eating disorders, particularly among adolescent girls. Eating disorders include a range of unhealthy relationships with food and concerns about weight.

Unfortunately, eating disorders are common. In fact, one in seven men and one in five women [experiences an eating disorder by age 40](#), and in 95% of those cases the disorder begins by age 25. [Many kinds of eating disorders](#) may affect children and teens:

- **Anorexia nervosa** is an eating disorder characterized by an extreme fear of gaining weight. People with anorexia nervosa often see themselves as overweight when they are at a healthy weight, and even when they are greatly underweight. There are two forms of anorexia nervosa: The [restrictive](#) form is when people greatly limit what and how much they eat in order to control their weight. In the [binge-purge](#) type, people limit what and how much they eat, but also binge and purge – that is, they will eat a large amount at once and try to get rid of the extra calories through vomiting, laxatives, diuretics, or excessive exercise.
- **Bulimia nervosa** involves bingeing and purging but without limiting what and how much a person eats.
- **Binge eating disorder** is when people binge eat but don't purge or restrict. This is actually the most common eating disorder in the United States.
- **Avoidant restrictive food intake disorder** is most common in childhood. The person limits the amount or type of food they eat, but not because they are worried about their weight. For example, someone with inflammatory bowel disease may associate eating with pain and discomfort, and so may avoid eating. Children with sensory issues may find the smell, texture, or taste of certain foods deeply unpleasant, and so will refuse to eat them. This is more than just "picky eating" and can lead to malnutrition.

## Misunderstandings about eating disorders

When most people think of eating disorders, they think of someone who is overly thin. However, you can have an eating disorder and have a normal weight, or even be overweight. The most important thing that many people don't realize about eating disorders is that they are a serious mental health issue and can be very dangerous. They can affect and damage many parts of the body – and can even be lethal. Of all the kinds of eating disorders, anorexia nervosa is the one that is most likely to lead to death.

## What parents need to know: Signs of eating disorders

It's not surprising that eating disorders have been on the rise in children and teens during the pandemic, given the disruption, isolation, and stress – and excessive time on social media – that it has brought. It's important that parents watch for possible signs that their child or teen could have an eating disorder, including:

- changes in what, when, and how much they eat
- being restrictive or regimented about their eating
- unusual weight fluctuations
- expressing unhappiness with their body or their weight
- exercising much more than usual
- spending a lot of time in the bathroom.

If it even crosses your mind that your child might have an eating disorder, remember that eating disorders are not about choice. Mental health problems such as anxiety and depression play a big role; emotional suffering often underlies eating disorders. And research shows that when you undereat or overeat, [it affects the brain processes that control hunger and food intake](#), reinforcing the eating disorder.

If you have concerns, talk to your child – and talk to your doctor. Even if you are wrong, it may lead to an important conversation about healthy eating and body image that could help prevent a future eating disorder. And if you are right, the sooner your child gets help, the better.

### About the Author

**Claire McCarthy, MD**, Senior Faculty Editor, Harvard Health Publishing

Claire McCarthy, MD, is a primary care pediatrician at Boston Children's Hospital, and an assistant professor of pediatrics at Harvard Medical School. In addition to being a senior faculty editor for Harvard Health Publishing, Dr. McCarthy writes about health and parenting for Boston Children's Hospital.