



## DEPARTMENT OF THE NAVY

UNITED STATES NAVAL ACADEMY  
121 BLAKE ROAD  
ANNAPOLIS, MARYLAND 21402-5000

COMDTMIDNINST 6100.1

22 Apr 99

### COMMANDANT OF MIDSHIPMEN INSTRUCTION 6100.1

From: Commandant of Midshipmen

Subj: PREVENTION AND MANAGEMENT OF EATING DISORDERS

1. Purpose. To provide guidance for the prevention and management of eating disorders and disordered eating in the Brigade of Midshipmen, and to implement the Eating Disorders Program.

#### 2. Background

a. Disordered Eating and Eating Disorders. Disordered eating and eating disorders are often first identified among college age persons. Diagnosable eating disorders are prevalent among college students, and episodes of less severe "disordered eating" and unhealthy eating habits are far more frequent. Eating disorders are much more likely to occur among women than among men. Often individuals with these problems are among the most successful and productive young adults, whose performance indicates great potential for successful military service. Conscientious and effective prevention and intervention programs that address disordered eating and eating disorders are in the best interest of the individuals affected and the Navy and Marine Corps.

b. Over-the-Counter Nutritional Supplements. Closely related to the issue of eating disorders is the increasing use and abuse of food supplements to augment performance, physical appearance, or psychological functioning. Since the Food and Drug Administration deregulated the food supplement industry manufacturers are not required to verify any claims they make about their products, and ingredients that are listed on labels are often wrong and misleading. Many substances in food supplements are banned by the National Collegiate Athletic Association (NCAA) and the U.S. Olympic Committee (USOC). In some circumstances, the experimentation or use of food supplements can be physically harmful and can adversely impact future career choices.

#### 3. Policy

a. Prevention of Problems Associated with Disordered Eating. Our policy is to encourage midshipmen experiencing eating disorder symptoms to use available services at the Naval Academy to minimize the likelihood of progression of their symptoms and to fully prepare them for service in the Fleet and Fleet Marine Force. The medical diagnosis of an eating disorder (i.e., Bulimia, Anorexia, and Eating Disorder Not Otherwise Specified) shall not, in and of itself, be cause for a recommendation for separation.

b. Over-the-Counter Nutritional Supplements. Midshipmen should not use over-the-counter food supplements without first consulting with a physician at the Naval Medical Clinic, a dietician assigned to the Academy, a coach, and/or an athletic trainer.

4. Mission Statement for the Eating Disorders Program. Consistent with the above policy guidance and the mission of the Naval Academy, the mission of the

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Eating Disorders Program is to provide the best possible medical, psychological, and support services to the Brigade of Midshipmen for the prevention and treatment of potentially harmful eating behaviors.

5. Goals of the Eating Disorders Program. The goals of the Eating Disorders Program are:

- a. To promote healthy attitudes about food, nutritional supplements, exercise and body image;
- b. To decrease the incidence of potentially harmful eating behaviors;
- c. To help faculty, staff and midshipmen develop a greater awareness of disordered eating so they will recognize and assist midshipmen who are struggling with such problems; and, in the case of midshipmen, take that knowledge into commissioned service;
- d. To identify and intervene effectively with midshipmen when risks or problems are identified.

6. Responsibility

a. Eating Disorders Program Coordinator. The Eating Disorders Program Coordinator has primary responsibility for all prevention and treatment efforts at the Naval Academy related to eating disorders and disordered eating, and reports to the Commandant of Midshipmen via the Director of the Midshipmen Counseling Center on these matters. The Coordinator serves as chairperson of the Eating Disorders Prevention Team and the Eating Disorders Treatment Team. The Coordinator will normally be a psychologist assigned to the Midshipmen Counseling Center who has specialized training in eating disorders.

b. Eating Disorders Prevention Team. The interdepartmental Eating Disorders Prevention Team provides oversight for the Eating Disorders Program. The members of this team provide a forum for policy review, monitor the incidence of disordered eating in the Brigade, develop education and prevention programs and oversee their implementation, and advise the Commandant on matters related to disordered eating. Membership will include the following:

- (1) Eating Disorders Program Coordinator, chairperson.
- (2) Deputy Commandant.
- (3) Senior Medical Officer/Brigade Medical Officer.
- (4) Character Development representative.
- (5) NMCL Health Promotions representative.
- (6) Women Midshipmen Study Group representative.
- (7) Clinical Dietician.
- (8) Physical Education representative.

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- (9) Chaplain.
- (10) Commandant's Training Officer.
- (11) Institutional Research representative.
- (12) Midshipman representatives.

c. Eating Disorders Treatment Team. The multi-disciplinary Eating Disorders Treatment Team provides medical, nutritional, and psychological services for the Brigade in general, and assessment, treatment, and aftercare of midshipmen with disordered eating and eating disorders. The Eating Disorders Program Coordinator will ensure that all members receive appropriate training. Membership will include the following:

- (1) Eating Disorders Program Coordinator, Chairperson.
- (2) Physician designated by the Commanding Officer, Naval Medical Clinic Annapolis, to provide medical evaluation, referral, and treatment services, and serve as liaison with Naval Medical Clinic Annapolis to ensure adequate medical resources and support are available for the Eating Disorders Program.
- (3) Clinical Dietician to provide nutritional counseling for the Brigade of Midshipmen, and to assist with the assessment, treatment, and aftercare of midshipmen with disordered eating and eating disorders.
- (4) Staff member from the Physical Education Department (e.g., exercise physiologist or coach), as needed for individual midshipmen.
- (5) Additional mental health provider, as needed for individual midshipmen.

7. Eating Disorders Prevention Program. Outreach, prevention, and educational programs will be implemented by the Eating Disorders Prevention Team and will be provided primarily through the Physical Education Department in support of the athletic programs and the Brigade as a whole. Programs will focus on a wide range of issues including attitudes toward eating, the healthy use of food and supplements, the signs, symptoms, and progression of eating disorders, the Naval Academy policy on eating disorders, the resources that are available, and how best to intervene with midshipmen suspected of having an eating problem. Presentations will be ongoing and systematic.

a. Outreach, Prevention and Education. Coordinate all outreach, prevention, and education programs for midshipmen and staff. Educate the Brigade, faculty, and staff about eating disorders. Foster healthy attitudes toward eating and the use of food supplements to discourage the development eating disorders.

b. Consultation. Assist the chain of command with referral and disposition decisions; provide information and resources to midshipmen, peers, staff, faculty, and family members.

c. Assessment. Evaluate the incidence and severity of eating disorders in the Brigade. Periodically assess the entire Brigade through surveys and

other means to monitor attitudes of midshipmen and the prevalence and severity of disordered eating in the Brigade.

8. Eating Disorders Treatment Program. All midshipmen suspected of disordered eating behavior shall be referred to the Midshipmen Counseling Center where evaluation and intervention, as needed, will be provided by the Eating Disorders Treatment Team. The scope of services of the treatment team and policies regarding the treatment of disordered eating behavior are as follows:

a. Assessment. Provide comprehensive evaluation of individual midshipmen who experience dietary or nutritional difficulties. Provide a full range of assessment methodologies including medical, dietary, and psychological evaluations, DEXA bone density scans, other laboratory screening, and exercise evaluations. Monitor the effectiveness of treatment and other interventions for disordered eating and eating disorders.

b. Treatment. Provide multidisciplinary support and treatment for midshipmen identified with disordered eating behaviors to restore them to healthy eating attitudes and behavior. This treatment should provide a full range of treatment methodologies including nutritional and psychological counseling, physical training, medications, and referral to military medical facilities, as needed. Treatment will be followed by a period of aftercare to provide ongoing services and support to the midshipmen.

c. Management. Regardless of where a problem is first identified (e.g., chain of command, NMCL, dietary, or Midshipmen Counseling Center), all midshipmen with identified eating disorders will be referred to the Eating Disorders Treatment Team and will be monitored by the Eating Disorders Treatment Coordinator throughout treatment and aftercare to ensure the provision of optimal treatment services and to coordinate all aspects of the midshipmen's care.

d. Reporting Requirements and Confidentiality. If midshipmen are command-referred, the Deputy Commandant will be apprised of the conclusions of the assessment and will inform the appropriate levels of the chain of command. If midshipmen are self-referred and not at imminent risk of serious health problems, the Director, Midshipmen Counseling Center will determine whether or not notification of the Deputy Commandant is warranted. However, if the severity of the problem should progress beyond the scope of services the treatment team can and should provide, outside medical referrals can be made and the Deputy Commandant will be notified.

e. Retention and Commissioning Issues. A diagnosis of an eating disorder will not, in and of itself, preclude commissioning as an Unrestricted Line Officer. However, special duty communities (e.g., aviation, nuclear power, diving) require further screening external to the Naval Academy and may have more restrictive policies regarding candidates for commissioning who have been diagnosed with an eating disorder. Midshipmen will be considered for separation only if an eating disorder is either 1) sufficiently pervasive and persistent enough to cause medical problems that would preclude being commissioned, or 2) so severe and unresponsive to available intervention as to have caused their military and/or academic performance to be unsatisfactory without any reasonable expectation of resolution.

9. Action

a. Commandant of Midshipmen. Encourage attitudes, policies, and practices that are conducive to the prevention, early identification, referral, and resolution of eating problems. Ensure that the Commandant's Staff and the Brigade are trained in the recognition of warning signs and the proper handling of potential eating problems. Provide adequate resources to the Midshipmen Counseling Center to support an effective Eating Disorders Program.

b. Director, Physical Education Department. Encourage midshipmen healthy attitudes toward eating and weight control, monitor high risk groups of midshipmen for eating problems, and make appropriate referrals for evaluation and intervention, as needed. Designate a qualified Physical Education Department staff member to be on the Eating Disorders Prevention Team. Oversee and provide adequate resources for the eating disorders outreach, prevention, and education programs in the Physical Education Department to include instruction on wellness, personal conditioning, healthy nutrition, disordered eating, food supplements, and substance use and abuse. Coordinate these efforts with the Eating Disorders Program Coordinator.

c. Senior Medical Officer/Brigade Medical Officer. As part of their general responsibilities, the SMO/BMO screen admission applicants for pre-existing eating disorders, ensure appropriate medical care and support are provided to midshipmen with identified problems with disordered eating, monitor the medical care that is provided to them, evaluate their fitness for commissioning, provide medical recommendations and consultation to the chain of command on issues related to eating disorders, and serve as liaison between supporting military medical facilities and the Naval Academy. The SMO/BMO shall liaison with other commands on the issues of eating disorders, especially with respect to approval for commissioning in respective warfare communities.

d. Director, Midshipmen Counseling Center. Assign an MCC staff member as the Eating Disorders Program Coordinator, and provide necessary clinical and administrative support to the Eating Disorders Program.

e. Eating Disorders Program Coordinator. Coordinate all prevention and treatment efforts at the Naval Academy related to eating disorders and disordered eating, specifically:

(1) Facilitate the coordination, collaboration, and information flow among all USNA staff who have a role in the prevention and treatment of eating disorders;

(2) Oversee the activities of the Eating Disorders Prevention Team to ensure adequate prevention and education programs are provided to USNA staff and midshipmen about disordered eating and eating disorders;

(3) Conduct ongoing assessment of education, prevention, and treatment efforts to monitor the effects of interventions;

(4) Ensure of the Eating Disorders Treatment Team are properly trained to carry out their duties;

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(5) Serve as clinical consultant to the Eating Disorders Treatment Team to assist the team in the management and treatment of midshipmen with eating disorders;

(6) Assist the Commandant of Midshipmen in the formulation and implementation of policies that support the goals of the Eating Disorders Program;

(7) Access internal and external resources (e.g., professional expertise, written and audio-visual materials, prevention programs, etc.) to assist in these efforts;

(8) Represent USNA in appropriate conferences and working groups related to disordered eating and eating disorders;

(9) Ensure the chain of command is provided important information relevant to the execution of these responsibilities.

  
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