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# **DACOWITS RFI #5**

## **Physical Fitness Standards and Eating Disorders**

### **December 2024**

**Navy Physical Readiness Program  
Navy Culture & Force Resilience  
Office (OPNAV N17)**

**Office of Women's Health  
Bureau of Medicine & Surgery**



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In 2016 and 2023, DACOWITS recommended that the Military Services should review and update the DoD Physical Fitness and Body Fat Program Procedures (DoDI 1308.03). The DACOWITS' 2016 recommendation was supported by a meta-analysis that reported military weight standards and fitness tests contribute to eating disorder symptoms in the military. In 2023, a Military Healthcare System (MHS) study, reported that from 2017-2021 the annual incident rate of eating disorders continued to increase year-over-year, and the incidence rate of eating disorders among military women is almost double that of civilian women. In 2023, DACOWITS' focus group participants reported that disordered eating was prevalent, as an effort to meet body composition standards. Eating disorders affect Total Force Fitness (TFF) and impact mental health, physical fitness, and military performance and readiness.

The Committee requests a **briefing** from the **Defense Health Agency (DHA) and the Military Services (Army, Navy, Marine Corps, Department of the Air Force (Air & Space), and Coast Guard)** to address the following:



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- a. **The prevalence rate (broken down by number and percent, gender, and paygrade groupings of E1-E5, E6-E9, O1-O4/W1-W3 and O5-O9/W4-W5) of diagnosed eating disorders and incidences of disordered eating from 2016 to present. In addition to providing prevalence rates, please provide information on the following:**
  - Diagnosis and treatment of eating disorders and disordered eating most often occurs during care provided at the Military Treatment Facility. The Navy defers to the data collected by the Defense Health Agency (DHA) as to the prevalence rate of diagnosed eating disorders and incidences of disordered eating from 2016 to present. The Navy's Bureau of Medicine and Surgery's Office of Women's Health (BUMED OWH) remains in routine collaboration with the DHA to continuously evaluate healthcare data and identify key trends related to women's health to inform priorities and optimize the health of female Sailors and Marines.
  - i. **How is the prevalence rate measured (e.g., surveys, encounter data).**
    - BUMED defers to the DHA as to the measurement approach to determine the prevalence rate.



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  - ii. What screening tools are used to determine if a Service member is experiencing disordered eating?
    - The most recent recommendation from the US Preventative Services Task Force (USPSTF) in 2022 is that current evidence is insufficient to recommend for or against routine screening of eating disorders in adults. The American Psychiatric Association recommends screening for eating disorders as part of every initial psychiatric evaluation. Navy and Marine Corps psychiatric providers can use questionnaires, such as the SCOFF questionnaire to screen Service members for disordered eating behaviors.<sup>1</sup> This questionnaire consists of five questions that address core features of disordered eating. The five questions are as follows, with each bolded letter correlating to the SCOFF acronym:
      - Do you make yourself **S**ick because you feel uncomfortably full?
      - Do you worry that you have lost **C**ontrol over how much you eat?
      - Have you recently lost more than **O**ne stone (14 lb.) in a 3-month period?
      - Do you believe yourself to be **F**at when others say you are too thin?
      - Would you say that **F**ood dominates your life?

<sup>1</sup>SCOFF Questionnaire



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- ii. **What screening tools are used to determine if a Service member is experiencing disordered eating? (cont.)**

In addition to psychiatric screening, providers can use laboratory testing and bloodwork (i.e., blood glucose monitoring, protein levels) to identify biometric indicators of disordered eating if suspected. Also, the BUMED OWH and Female Force Readiness Navy Medicine Operational Clinical Community (FFR NMOCC) collaborated to develop a Provider Guide on Disordered Eating to aid providers in identifying and treating Service members who may be displaying disordered eating behavior.<sup>2</sup>

<sup>2</sup>Provider Guide for Disordered Eating



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  - iii. What treatment options are available for Service members experiencing disordered eating and/or diagnosed with an eating disorder?
    - Service members can request treatment for disordered eating and/or an eating disorder at regular intervals including during (1) healthcare visits during pre-deployment, (2) annual well-woman visits, (3) physical exams, (4) if referred following completion of the PHA, and (5) at any time upon member outreach to their Primary Care Manager (PCM) or an Embedded Mental Health (EMH) provider. Depending on the evaluation and diagnosis of their provider, Service members will be referred for the appropriate care either within the Military Treatment Facilities (MTFs) or civilian sites that specialize in behavioral health and/or eating disorder treatment options. TRICARE covers services necessary to treat eating disorders if the facilities meet certification requirements.<sup>3</sup>

<sup>3</sup>Eating Disorder Treatment



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- b. **Training or tools provided to all Service members on nutritional fitness, maintaining a healthy weight, and dangers of disordered eating. Describe how often and in what setting training is provided.**
- The BUMED OWH and FFR NMOCC have developed multiple health education resources focused on nutritional fitness, maintain a healthy weight, and dangers of disordered eating. The Nutrition Guidelines and Recommendations for Service Women provides general nutrition guidelines for Service women including information on the nutrition in Meals Ready to Eat (MREs), optimal nutrition for intense physical training, and prioritizing healthy choices in dining facilities.<sup>4</sup> Additionally, the Deployment Readiness Education for Service Women (DRES) Handbook offers nutrition guidance and indicators of disordered eating.<sup>5</sup> To further educate Service women on the prevalence and dangers of disordered eating, the BUMED OWH developed the Disordered Eating Patient Guide to explain the most common eating disorders and their common signs and symptoms.<sup>6</sup> The Recognizing and Addressing Disordered Eating as a Service Member Guide resource helps Service women understand the difference between disordered eating and eating disorder symptoms as well as common myths about eating disorders.<sup>7</sup> Further, healthy eating information and nutrition guidance for Service women is included in additional BUMED OWH resources related to mental health, postpartum recovery, pre-conception, and neuromusculoskeletal health.

<sup>4</sup>Nutrition Guidelines and Recommendations for Service Women; <sup>5</sup>DRES Handbook; <sup>6</sup>Disordered Eating Patient Guide; <sup>7</sup>Recognizing and Addressing Disordered Eating as a Service Member Guide



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- b. Training or tools provided to all Service members on nutritional fitness, maintaining a healthy weight, and dangers of disordered eating. Describe how often and in what setting training is provided (cont.).**
- OPNAV Physical Readiness Program Guide 10
    - Details nutrition education options available at no costs to the Sailor:
      - Registered Dietitian Nutritionist consult
      - ShipShape Program
      - Mission Nutrition Course
      - Nutrition Self-Study Course (in Official Navy PFA App)
      - Navy Operational Fitness and Fueling Series (NOFFS) Performance Nutrition Guidelines
    - Resources that apply evidence-based research into practical lifestyle approaches
    - Weight management program selection worksheet
    - Personal goals and milestones tracker template
    - Food log template
  - Surgeon General's "Blue H" (Health Promotion and Wellness) award
  - Public Health Center Healthy Living toolbox





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- c. **Provide an overview of the relationship between the height/weight and the fitness test, and whether it is tied specifically to the fitness test.**
- Nov NAVADMIN – BCA Exemption: Sailors not meeting Navy BCA standards or Age-Adjusted Standards and have exceptional performance on the Physical Readiness Test will not receive an overall PFA failure and/or will not be enrolled in FEP
    - IAW DoDI 1308.03
  - Official BCA weight tied to PRT only when Sailor elects to use the bike as an alternate cardio modality
    - Weight required to convert caloric burn on the bike to an equivalent 1.5-mile run/walk time
  - Otherwise, BCA results are not specifically tied to the PRT



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- d. Number of Service members (broken down by number and percent, gender, and paygrade groupings of E1-E5, E6-E9, O1-O4/W1-W3 and O5-O9/W4-W5) on a weight management program:

|                                    | <u>E1-E5</u>  | <u>E6-E9</u> | <u>O1-O4/W1-W3</u> | <u>O5-O9/W4-W5</u> | <u>Total</u>  |
|------------------------------------|---------------|--------------|--------------------|--------------------|---------------|
| <b>Male</b>                        | 11771 (47.1%) | 4726 (18.9%) | 1143 (4.6%)        | 226 (0.9%)         | 20394 (81.7%) |
| <b>Female</b>                      | 2963 (11.9%)  | 705 (2.8%)   | 255 (1%)           | 59 (0.2%)          | 4573 (18.3%)  |
| <b>Total</b>                       | 14734 (59%)   | 5431 (21.8%) | 1398 (5.6%)        | 285 (1.1%)         | 24967         |
| *3119 (12.5%) Sailors without rank |               |              |                    |                    |               |

- i. What criteria are used to determine if a Service member is placed on a weight management program?
- Not meeting Navy BCA or Age-Adjusted Standards (AAS)
- ii. What criteria are used to remove a Service member from a weight management program?
- Must pass a mock or official PFA, and must be within AAS
- iii. What type of nutritional fitness counseling or training is provided to Service members on a weight management program?
- All Sailors must complete one of the following after FEP enrollment: Consult with RDN/RD, ShipShape, Mission Nutrition, Nutrition Self-Study Course, NOFFS Performance Nutrition Guidelines, Commercial Weight Management Program



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- e. Describe any ongoing efforts to revise current height, weight, and body fat composition standards.

### **“Evaluation of Alignment of Current Navy Body Composition Analysis (BCA) Methods by Sex and as Indicator of Health and Performance.”**

- To validate the current mathematical model in today’s more diverse Navy population by comparing anthropometric measurements obtained using three methods: Dual-energy X-ray Absorptiometry (DXA), 3-D Body Scanner, and Bioelectrical Impedance Analysis (BIA).
  - Examine BCA validity as it applies to sex differences (female vs. male) while taking into account other factors that can influence body composition (i.e., race/ethnicity, age, and postpartum status).
  - Determine if body fat percentages using BCA predicts performance (i.e., physical readiness test (PRT) scores) and general health (i.e., metabolic biomarkers, blood pressure).
- Timeline
  - Study commenced Sep 2022. Data analysis and a final report in 2025.
  - Policy changes TBD



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- f. Describe any ongoing efforts to address unhealthy eating habits and/or disordered eating.
- As covered in response to 5.b., the BUMED OWH and FFR NMOCC have developed five resources that provide specific health education on nutrition in the military, eating disorders signs and symptoms, and indicators of unhealthy eating habits. These resources include: the Nutrition Guidelines and Recommendations for Service Women, the DRES Handbook, the Disordered Eating Patient Guide, the Disordered Eating Provider Guide, and the Recognizing and Addressing Disordered Eating as a Service Member Guide.<sup>2,4,5,6,7</sup>
  - Nutrition for Warfighter Performance study
  - Commercial Wellness App (Noom) pilot
  - Official Nutrition Self-Study Course content update
  - Nutritional Readiness Roadmap in support of Culture of Excellence 2.0 initiative