

JAN

Job Accommodation Network

Practical Solutions • Workplace Success

Accommodation and Compliance Series

Employees with Eating Disorders

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A service of the U.S. Department of Labor's Office of Disability Employment Policy

Preface

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JAN'S ACCOMMODATION AND COMPLIANCE SERIES

Introduction

JAN's Accommodation and Compliance Series is designed to help employers determine effective accommodations and comply with Title I of the Americans with Disabilities Act (ADA). Each publication in the series addresses a specific medical condition and provides information about the condition, ADA information, accommodation ideas, and resources for additional information.

The Accommodation and Compliance Series is a starting point in the accommodation process and may not address every situation. Accommodations should be made on a case by case basis, considering each employee's individual limitations and accommodation needs. Employers are encouraged to contact JAN to discuss specific situations in more detail.

For information on assistive technology and other accommodation ideas, visit JAN's Searchable Online Accommodation Resource (SOAR) at <http://AskJAN.org/soar>.

Information about Eating Disorders

How prevalent are eating disorders?

In America, approximately 20 million women and 10 million men experience a significant eating disorder some time during their life (Wade, Keski-Rahkonen, & Hudson, 2011). Many cases are probably not reported. Many more people may not meet the criteria for an eating disorder diagnosis, but have difficulty around dissatisfaction with their bodies and distorted beliefs and behaviors about eating.

What are eating disorders?

According to the most recent Diagnostic Statistics Manual (DSM-V), eating disorders are characterized by a persistent disturbance of eating or eating-related behavior that results in the altered consumption or absorption of food and that significantly impairs physical health or psychosocial functioning (American Psychiatric Association, 2013).

What are some common eating disorders?

Although there are many eating disorders identified in the DSM-V, the most prevalent that occur in adults are described below:

- **Anorexia nervosa** is a serious, potentially life-threatening eating disorder characterized by restriction of energy intake (food consumption) and excessive weight loss. Symptoms include resistance to maintaining body weight at or above a minimally normal weight for age and height; intense fear of weight gain; disturbance in the experience of body weight or shape; undue influence of weight

or shape on self-evaluation, or denial of the seriousness of low body weight; and loss of menstrual periods in girls and women post-puberty.

- Between 0.5–1% of American women suffer from anorexia nervosa, and it is one of the most common psychiatric diagnoses in young women.
 - Anorexia nervosa typically appears in early to mid-adolescence and it has one of the highest death rates of any mental health condition.
- **Bulimia nervosa** is a serious, potentially life-threatening eating disorder characterized by a cycle of bingeing and compensatory behaviors designed to undo or compensate for the effects of binge eating. Its presence is indicated by regular intake of large amounts of food accompanied by a sense of loss of control over eating behavior; regular use of inappropriate compensatory behaviors such as self-induced vomiting, laxative or diuretic abuse, fasting, and/or obsessive or compulsive exercise; and extreme concern with body weight and shape.
 - Bulimia nervosa affects 1-2% of adolescent and young adult women, and approximately 80% of bulimia nervosa patients are female.
 - Bulimia nervosa is frequently associated with symptoms of depression and changes in social adjustment.
- **Binge eating disorder (BED)** is a type of eating disorder not otherwise specified and is characterized by recurrent binge eating without the regular use of compensatory measures to counter the binge eating. It is characterized by frequent episodes of eating large quantities of food in short periods of time; feeling out of control over eating behavior during the episode; and feeling depressed, guilty, or disgusted by the behavior. Behavioral indicators of BED include eating when not hungry, eating alone because of embarrassment over quantities consumed and eating until uncomfortably full.
 - The prevalence of BED is estimated to be approximately 1-5% of the general population.
 - BED is often associated with symptoms of depression.

Eating Disorders and the Americans with Disabilities Act

Are eating disorders considered disabilities under the ADA?

The ADA does not contain a list of medical conditions that constitute disabilities. Instead, the ADA has a general definition of disability that each person must meet (EEOC Regulations . . . , 2011). Therefore, some people with eating disorders will have a disability under the ADA and some will not.

A person has a disability if he/she has a physical or mental impairment that substantially limits one or more major life activities, a record of such an impairment, or is regarded as having an impairment (EEOC Regulations . . . , 2011). For more information about how to determine whether a person has a disability under the ADA, visit <http://AskJAN.org/corner/vol05iss04.htm>.

Where can employers get additional information about eating disorders and the ADA?

Eating disorders are psychiatric conditions, and JAN provides resources on psychiatric disabilities and the ADA at <http://AskJAN.org/media/psyc.htm>. This includes accommodation ideas, information on the ADA and its amendments, and guidance from the EEOC. Two EEOC publications that may be helpful when working through the accommodation process are:

The ADA and Psychiatric Disabilities at <http://www.eeoc.gov/policy/docs/psych.html>

The ADA: Applying Performance and Conduct Standards to Employees with Disabilities at <http://www.eeoc.gov/facts/performance-conduct.html>

Accommodating Employees with Eating Disorders

(Note: People with eating disorders may develop some of the limitations discussed below, but seldom develop all of them. Also, the degree of limitation will vary among individuals. Be aware that not all people with eating disorders will need accommodations to perform their jobs and many others may only need a few accommodations. The following is only a sample of the possibilities available. Numerous other accommodation solutions may exist.)

Questions to Consider:

1. What limitations is the employee with an eating disorder experiencing?
2. How do these limitations affect the employee and the employee's job performance?
3. What specific job tasks are problematic as a result of these limitations?
4. What accommodations are available to reduce or eliminate these problems? Are all possible resources being used to determine possible accommodations?
5. Has the employee with an eating disorder been consulted regarding possible accommodations?
6. Once accommodations are in place, would it be useful to meet with the employee with an eating disorder to evaluate the effectiveness of the accommodations and to determine whether additional accommodations are needed?
7. Do supervisory personnel and employees need training regarding eating disorders?

Accommodation Ideas:

Attendance:

- Allow flexible scheduling
- Provide modified break schedule
- Allow leave for counseling
- Allow work from home/Flexi-place

Maintaining Concentration:

- Reduce distractions in the work area
- Provide space enclosures, sound absorption panels, or a private office
- Allow for use of white noise or environmental sound machines
- Allow the employee to play soothing music using an ear-bud and computer or music player
- Plan for uninterrupted work time

- Purchase organizers to reduce clutter
- Restructure job to include only essential functions
- Provide memory aids such as schedulers, organizers, or email applications

Managing Emotions:

- Encourage the use of stress management techniques to deal with frustration
- Increase natural lighting or provide full spectrum lighting
- Allow the presence of a support animal
- Allow telephone calls during work hours to doctors and others for needed support
- Allow flexible breaks
- Refer to employee assistance program (EAP)

Fatigue:

- Allow flexible work environment
- Allow flexible scheduling
- Provide modified break schedule
- Allow leave for counseling
- Allow work from home/Flexi-place
- Provide a goal-oriented workload
- Reduce or eliminate physical exertion and workplace stress
- Implement ergonomic workstation design

Stress:

- Refer to counseling and EAP
- Allow telephone calls during work hours to doctors and others for needed support
- Allow the presence of a support animal
- Allow flexible work environment:
- Allow flexible scheduling
- Provide modified break schedule
- Allow leave for counseling
- Allow work from home/Flexi-place

Malnutrition:

- Allow work from home/Flexi-place
- Allow food at the work station
- Provide more frequent breaks for food consumption

Modifying Supervisor Methods:

Two common issues that JAN receives inquiries on are: (1) what accommodations will work for individuals with eating disorders when workplaces are implementing substantial changes, and (2) what accommodations will help supervisors work effectively with individuals with eating disorders. Many accommodations will involve modifying the way the supervisor works with the employee. Maintaining open channels of communication to ensure any transitions are smooth, and providing short weekly or monthly meetings with employees to discuss workplace issues can be helpful.

Supervisors can also implement management techniques that support an inclusive workplace culture while simultaneously providing accommodations. Successful techniques include the following:

- Allow more frequent breaks for food consumption,
- Provide positive praise and reinforcement,
- Provide day-to-day guidance and feedback,
- Provide written job instructions via email,
- Develop clear expectations of responsibilities and the consequences of not meeting performance standards,
- Schedule consistent meetings with employee to set goals and review progress,
- Allow for open communication,
- Establish written long term and short term goals,
- Develop strategies to deal with conflict,
- Develop a procedure to evaluate the effectiveness of the accommodation,
- Educate all employees on their right to accommodations,
- Provide sensitivity training to coworkers and supervisors.

Situations and Solutions:

A nineteen year old grocery store worker who mainly completed on floor tasks, such as pricing and packaging, had been complaining of feeling very exhausted from standing and walking all day long. She disclosed to her employer that she was seeing a counselor for an eating disorder and the counselor suggested that she request an accommodation to help with her fatigue while she addressed her health needs. She requested to work as a cashier and to be allowed to sit while working. Because one of the grocery store's cashiers recently resigned, the employer was able to reassign her to this position and allowed her to sit while she worked.

A bank branch manager started receiving complaints from multiple employees that one of the company's bank tellers was taking excessive bathroom breaks and rarely requested backup. On certain days, she left multiple customers waiting for over 15 minutes while other tellers were waiting on customers. After witnessing her behavior himself, he decided to give her a warning for inappropriate use of time. Upon receiving the warning, the employee disclosed that she has experienced bulimia for over a year

and wanted to start seeing a counselor. She requested an accommodation of a modified work schedule in order to see a counselor two times per week. Although the employer did not have to lift the warning, the employer granted the accommodation so the employee could comply with company policies in the future.

A customer service representative for a physician's office is currently undergoing treatment for an eating disorder. One of his therapeutic tasks is to integrate many small meals into his daily routine. His office has a strictly-enforced policy that employees can only eat in the break room, out of sight from the patients. In order to keep from disrupting his production level and to aid in his recovery, his supervisor modified the workplace policy and allowed the employee to eat snacks at his desk.

Products:

There are numerous products that can be used to accommodate people with limitations. JAN's Searchable Online Accommodation Resource (SOAR) at <http://AskJAN.org/soar> is designed to let users explore various accommodation options. Many product vendor lists are accessible through this system; however, upon request JAN provides these lists and many more that are not available on the Web site. Contact JAN directly if you have specific accommodation situations, are looking for products, need vendor information, or are seeking a referral.

Resources

Job Accommodation Network

West Virginia University
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The Job Accommodation Network (JAN) is a free consulting service that provides information about job accommodations, the Americans with Disabilities Act (ADA), and the employability of people with disabilities.

Office of Disability Employment Policy

200 Constitution Avenue, NW, Room S-1303
Washington, DC 20210
Toll Free: (866)633-7365
TTY: (877)889-5627
Fax: (202)693-7888
<http://www.dol.gov/odep/>

The Office of Disability Employment Policy (ODEP) is an agency within the U.S. Department of Labor. ODEP provides national leadership to increase employment opportunities for adults and youth with disabilities while striving to eliminate barriers to employment.

Center for Psychiatric Rehabilitation

Boston University
940 Commonwealth Avenue West
Boston, MA 02215
Direct: (617)353-3549
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psyrehab@bu.edu
<http://cpr.bu.edu/>

Center for Psychiatric Rehabilitation is a research, training, and service organization dedicated to improving the lives of persons who have psychiatric disabilities.

Mental Health America

2000 N Beauregard Street, 6th Floor
Alexandria, VA 22311
Toll Free: (800)969-6642
Direct: (703)684-7722
Fax: (703)684-5968
info@mentalhealthamerica.net
<http://www.nmha.org>

Mental Health America is an organization dedicated to promoting mental health, preventing mental and substance use conditions and achieving victory over mental illnesses and addictions through advocacy, education, research and service.

National Alliance on Mental Illness

3803 N. Fairfax Dr., Ste. 100
Arlington, VA 22203
Toll Free: (800)950-6264
Direct: (703)524-7600
Fax: (703)524-9094
<http://www.nami.org>

The National Alliance on Mental Illness (NAMI) is the nation's largest grassroots mental health organization dedicated to building better lives for the millions of Americans affected by mental illness. NAMI advocates for access to services, treatment, supports and research and is steadfast in its commitment to raise awareness and build a community for hope for all those in need.

National Institute of Mental Health

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NIMH offers a variety of publications and other educational resources to help people with mental disorders, the general public, mental health and health care practitioners, and researchers gain a better understanding of mental illnesses and the research programs of the NIMH. All publications and educational materials are written by science writers, in collaboration with NIMH scientists and outside reviewers.

National Eating Disorders Association

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The National Eating Disorders Association (NEDA) is the leading non-profit organization in the United States advocating on behalf of and supporting individuals and families affected by eating disorders. Reaching millions every year, NEDA campaigns for prevention, improved access to quality treatment, and increased research funding to better understand and treat eating disorders. NEDA works with partners and volunteers to develop programs and tools to help everyone who seeks assistance.

References

American Psychiatric Association. (2013). Diagnostic and statistical manual of mental disorders (5th ed.). Washington, DC: Author.

EEOC Regulations To Implement the Equal Employment Provisions of the Americans With Disabilities Act, as Amended, 29 C.F.R. § 1630 (2011).

National Eating Disorders Association (n.d.a.). Learn. Statistics. Get the facts on eating disorders. Retrieved December 5, 2014, from <http://www.nationaleatingdisorders.org>

Wade, T. D., Keski-Rahkonen A., & Hudson J. (2011). Epidemiology of eating disorders. In M. Tsuang and M. Tohen (Eds.), *Textbook in Psychiatric Epidemiology* (3rd ed.) (pp. 343-360). New York: Wiley.

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