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## Message from the President



Jennifer J. Thomas

On January 9, 2023, the American Academy of Pediatrics (AAP) released their new "Clinical Practice Guideline for the Evaluation and Treatment of Children and Adolescents with Obesity." Within hours of the guideline's publication, I received outreach from dozens of AED members with concerns about the potential for iatrogenic effects of recommending weight-loss medications and surgery to children and adolescents. It was clear that the AED needed to act.

The AED Board of Directors immediately solicited feedback from key stakeholders including the Medical Care Standards Committee, Advocacy and Communications Committee, Experts by the Experience Committee, the Diversity, Equity, and Inclusion Advisory Committee, and expert clinical researchers who have published widely on the intersection between eating disorders and higher weight. The feedback included a diverse array of views, and in the end our statement reflected areas of commonality, shared goals, and the AED mission. The final statement was published on January 26<sup>th</sup>, and you can read it below.

I am delighted to report that, since its publication, our statement has sparked a national conversation on the importance of protecting children of higher weights from developing eating disorders. It has received coverage on National Public Radio and widespread sharing on social media.

Perhaps most importantly, the AAP itself responded to our statement. To date we have had two productive meetings with AAP representatives, and the AED has been invited to join an Eating Disorders Working Group to identify appropriate screening tools and create treatment referral pathways for children across the weight spectrum, which can be disseminated to pediatricians through AAP-sponsored continuing education courses. Moreover, an AAP clinical report on eating disorders and obesity is undergoing a scheduled revision, and the AED has been invited to serve as a reviewing organization.

I learned long ago from my mentor and colleague, AED Past President Ruth Striegel Weissman, to "never waste a good crisis."

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## Message from the President *continued*



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Although our partnership with the AAP was initially triggered by disagreement, I truly believe it will create new opportunities to strengthen the infrastructure for pediatric eating disorder evaluation and referral nationwide. I would like to thank the AED members who will be representing us on the joint AAP-AED Task Force, including Andrea Goldschmidt, Rebecka Peebles, Anna Tanner, Marian Tanofsky-Kraff, and Lesley Williams.

### **The Academy for Eating Disorders Releases a Statement on the Recent American Academy of Pediatrics Clinical Practice Guideline for Weight-Related Care: First, Do No Harm**

The Academy for Eating Disorders (AED) has issued a statement on the American Academy of Pediatrics' (AAP) 2023 "Clinical Practice Guideline for the Evaluation and Treatment of Children and Adolescents with Obesity" (Hampl et al., 2023) (hereafter referred to as "AAP Guideline").

The mission of the AED is to advance eating disorder prevention, education, treatment, and research by expanding the global community of committed professionals. We are concerned that the 2023 AAP Guideline -- which represents a major shift in perspective from the AAP's previous 2016 recommendations (Golden et al., 2016) -- has the potential for iatrogenic effects. **In line with the Hippocratic Oath of first, do no harm, the AED urges the AAP to revise their guideline with input from key stakeholders including eating disorder professionals and individuals/families with lived experience in higher-weight bodies.**

We have three primary concerns:

**First, the AAP Guideline makes only minimal reference to eating disorder screening and treatment referral.** Eating disorders are potentially lethal illnesses that occur across the weight spectrum and individuals of higher weight are at especially high risk (Flament et al., 2015). Early detection and treatment of eating disorders is a vital component of successful recovery (Kalindjian et al., 2022), and the AAP Guideline includes a very limited plan for identifying new and emerging cases. Further, although the AAP guideline mentions screening, it offers no clear course of action for healthcare providers to take if an eating disorder is suspected or identified.

**Second, although pediatricians are advised to approach the topic of weight with sensitivity, we are concerned that traditional medical training minimally equips healthcare providers with these skills.** Since experiencing weight discrimination is associated with internalized weight stigma and poor mental health outcomes (Puhl and Lessard, 2020), we are concerned that an explicit focus on weight loss could have iatrogenic effects on some individuals, and given limited data on eating disorder risk factors (Jebeile et al., 2021), it will be difficult to predict which ones. Further, despite positioning weight-related health within a broader framework of social determinants, the AAP Guideline recommends many individual-level changes (e.g., pharmacological treatment, bariatric surgery) rather than structural changes (e.g., changes in food policy, amelioration of food insecurity, reduction of stigma), which may reinforce the blaming and shaming of individuals in higher-weight bodies (Hunger et al., 2020).

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Finally, we have concerns about the long-term efficacy and safety profile of medications being recommended for children as young as eight years old, and surgical interventions being recommended for adolescents as young as 13. Long-term outcomes data on the recommended pharmacological interventions are limited in pediatric populations. Moreover, there is evidence that eating disorders can and do emerge after weight-loss surgery (Marino et al., 2012) (Watson et al., 2020). Lastly, we wonder about the independence of the AAP recommendations given the financial reliance on pharmaceutical companies that are often required to investigate medication efficacy.

Overall, the AED strongly suggests that the AAP Guideline be revised with input from key stakeholders including eating disorder professionals and individuals/families with lived experience in higher-weight bodies to incorporate more fully eating disorder screening and referral; mitigation of weight stigma in the pediatric setting; and the limited data on efficacy and side effects of pharmacological and surgical interventions in youth.

## ידיעון האקדמיה הבינלאומית להפרעות אכילה

Jennifer J. Thomas (Translated into Hebrew by Yael Latzer)

ב-9 בינואר 2023, האקדמיה האמריקנית לרפואת ילדים (AAP) פרסמה את ה"הנחיה החדשה לקלינאים להערכה וטיפול בילדים ובני נוער עם השמנת יתר". תוך שעות ספורות מפרסום ההנחיה, קיבלתי פניה מעשרות חברי האקדמיה אשר מביעים חשש רב לגבי הפוטנציאל להשפעות המזיקות של ההמלצה ובמיוחד באשר למתן תרופות להורדה במשקל וניתוחים לילדים ובני נוער.

היה ברור שה-AED צריך לפעול.

מועצת המנהלים של האקדמיה לה"א AED ביקשה מיד משוב מבעלי עניין מרכזיים כולל ועדת התקנים לטיפול רפואי; ועדת ההסברה והתקשורת; הוועדה המייעצת לגיוון, שוויון והכלה; וחוקרים וקליניים מומחים שכתבו בהרחבה על הקשר בין הפרעות אכילה למשקל יתר והשמנה. המשוב כלל מגוון רחב של השקפות, ובסופו של דבר יצאנו בהצהרה אשר שיקפה תחומים של שיתוף, מטרות משותפות ואת משימת AED. ההצהרה הסופית פורסמה ב-26 בינואר, אותה תוכלו לקרוא למטה.

אני שמחה לדווח שמאז פרסומה, עוררה ההצהרה שלנו שיח ארצי על החשיבות ההגנה על ילדים במשקלים גבוהים מפני התפתחות הפרעות אכילה. הצהרה זאת זכתה לסיקור בתקשורת ציבורית הלאומית ולשיתוף נרחב במדיה החברתית.

יתרה מכך, ה-AAP עצמו הגיב להצהרה שלנו. עד היום קיימנו שתי פגישות פרודוקטיביות עם נציגי . נציגי ה-AED הוזמנו להצטרף לקבוצת עבודה על הפרעות אכילה, במטרה לבחון כלי הערכה מתאימים לאבחון ילדים עם משקל יתר והשמנה, ולהפנותם לטיפול מתאים. כלים אלה יש להפיץ לרופאי ילדים באמצעות AAP-קורסי המשך והשתלמויות ממומנות. יתרה מכך, הדוח קליני של AAP על הפרעות אכילה והשמנת יתר יעבור עדכון, וה-AED הוזמנה לשמש כארגון בודק.

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למדתי מקרוב מהמנטורית והקולגה שלי, הנשיאה לשעבר של ה-AED דר' רות סטריגל ויסמן-מור, "לעולם אל תחמיץ את ההזדמנות של משבר טוב". למרות שהשותפות שלנו עם ה-AAP התאפיינה בתחילה בחוסר הסכמה, אני מאמינה שמפגש זה יצור הזדמנויות חדשות לחזק את התשתית להערכת הפרעות אכילה בילדים ובני נוער ולהפניה מתאימה לטיפול בפריסה ארצית. אני רוצה להודות לחברי AED שייצגו אותנו במשימה זאת ובאיחוד כוחות בין AAP-AED, ובכללן אנדריאה גולדשמידט; רבקה פיבלס; אנה טאנר; מריאן טנופסקי-קראף; ולסלי וויליאמס.

## **פרסום הצהרת כוונות והנחיות קליניות בכל הקשור בטיפול במשקל יתר, של האקדמיה הבינלאומית להפרעות אכילה עם הנחיות ספציפיות לאקדמיה האמריקאית לרפואת ילדים.**

### **"ראשית, לא להזיק..."**

האקדמיה להפרעות אכילה (AED) פרסמה הצהרה והנחיה לאקדמיה האמריקאית לרפואת ילדים (AAP) בנושא: "הנחיות קליניות להערכה וטיפול בילדים ובני נוער עם משקל והשמנת יתר" (להלן "הנחיות AAP").

המשימה של AED היא לקדם מניעת הפרעות אכילה, חינוך, טיפול ומחקר על ידי הרחבת הקהילה העולמית של אנשי מקצוע אשר יהיו מחויבים לנושא. אנו מביעים דאגה רבה מהסיכון הטמון בהנחיות ה-AAP לשנת 2023 - המייצגות שינוי גדול בתפיסה בהשוואה להמלצות הקודמות של ה-AAP לשנת 2016. **בהתאם לשבועת הפיזיקרנטס-ראשית לא להזיק**, ה-AED קורא ל-AAP לשנות את ההנחיות שלהם בשיתוף פעולה עם בעלי עניין מקצועיים מרכזיים הכוללים אנשי מקצוע מתחום של הפרעות אכילה ואנשים ובני משפחותיהם עם משקל והשמנת יתר.

ברצוננו להציף שלושה חששות עיקריים:

**ראשית, הנחיות ה-AAP מתייחסות רק לבדיקה מינימלית של קיום הפרעות אכילה והפניה לטיפול.** הפרעות אכילה הן מחלות בעלות פוטנציאל קטלני, המצויות על פני קשת המשקל הרחבה, כאשר אנשים בעלי משקל יתר והשמנה נמצאים בסיכון גבוה במיוחד להתפתחות הפרעות אכילה. גילוי מוקדם וטיפול בהפרעות אכילה חיוניים למניעה והחלמה מוצלחת. ההנחיות הקיימות נכון להיום של AAP כוללות תוכנית מוגבלת מאוד לזיהוי קבוצות בסיכון. יתרה מכך, למרות שההנחיות של AAP מזכירות חשיבות של אבחון וזיהוי מוקדם, הן אינן מציעות דרך פעולה ברורה ויעילה לזיהוי הפרעות אכילה וטיפול בהם עבור ספקי שירותי הבריאות.

**שנית, למרות שמומלץ לרופאי ילדים להתייחס לנושא המשקל ברגישות, אנו מודאגים מכך שההכשרה הרפואית המסורתית, מועטה מאד בנושאים ומובילה בהתאם להנחיות מבלבלות לספקי שירותי הבריאות.**

מאחר ואנו מודעים מאד לאפליה ולסטיגמה השלילית הקשורה במשקל יתר, וכן להשלכות הנפשיות שיש לכך על ילדים ובני נוער במשקל יתר והשמנה, אנו מביעים דאגה מההשפעות המזיקות שיכולות להיות להנחיות הנותנות מרכזיות לירידה במשקל, על אנשים מסוימים. במיוחד מאחר והידע המצוי בקרב אנשי מקצוע המטפלים בכך בקהילה, בנוגע להפרעות אכילה, והסיכון להתפתחות הפרעות אכילה הוא מועט. כמו כן, ההמלצות של ה-AAP, ה-AAP Guideline מתמקדות בשינויים ברמת הפרט, כמו טיפול תרופתי, ניתוח בריאטרי ועוד, (מדיניות שעלולה לחזק את האשמה והבושה של אנשים בעלי משקל יתר) במקום להתמקד בשינויים מבניים מערכתיים כמו שינויים במדיניות המזון, שיפור חוסר הביטחון התזונתי, הפחתת סטיגמה ועוד.

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לבסוף, אנחנו מבקשים להביע דאגה רבה לגבי היעילות והבטיחות ארוכת הטווח של תרופות לירידה במשקל שמומלצות לילדים עד גיל שמונה, והתערבויות כירורגיות שמומלצות למתבגרים בני 13. הממצאים לטווח הארוך עד כה בהתערבויות אלה עדיין מועטים. יתרה מכך, ישנן עדויות לכך שהפרעות אכילה יכולות להופיע לאחר ניתוח בריאטרי. כמו כן אנו תוהים לגבי עצמאותן של המלצות ה-AAP בהתחשב בהישענות הכספית על חברות תרופות שנדרשת לעתים קרובות כדי לחקור את יעילות התרופות.

**לסיכום,** ה-AED מציע בתוקף לשנות את הנחיות ה-AAP ולבחון אותן מחדש ביחד עם אנשי מקצוע משיקים, ובמיוחד מומחים מהמקצועות השונים בהפרעות אכילה, וכן עם יחידים/משפחות עם משקל יתר והשמנה. יש להתייחס גם לפעילות בכיוון של הפחתת הסטיגמה הקשורה במשקל יתר בילדים, ולנתונים המוגבלים על יעילות ותופעות לוואי של התערבויות תרופתיות וכירורגיות בילדים ונוער.

תרגמה: פרופ' יעל לצר, ישראל

## Message from the Editor



Abigail Matthews  
Hamberg

It's that time again -- the [annual ICED](#) is rapidly approaching! The first in-person ICED since 2019, pre-conference events begin on May 31<sup>st</sup> in Washington, DC (United States). COVID-19 has left me extremely grateful for this opportunity to meet you -- colleagues with a shared passion for the prevention and evidence-based treatment of eating disorders -- in "real life" (versus on my computer screen).

You will find many must-read columns in this *Forum*, beginning with Jennifer Thomas's *Message from the President*, detailing recent actions taken by the AED in response to the AAP's "Clinical Practice Guideline for the Evaluation and Treatment of Children and Adolescents with Obesity." Additional features include an introduction to Suzanne Dooley-Hash, AED Board member, updates from numerous AED committees and special interest groups (SIGs), Amanda Bruening's latest book review, and an opportunity to "meet" fellow AED member, Tornia Wyllie.

Please consider submitting a column, committee or SIG update, original blog post, and/or announcement (no more than 250 words per entry) for the next AED *Forum*. Submissions are due by July 15, 2023, to the [Forum Editor](#). Suggestions to improve the *Forum* are always welcome and encouraged!

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# Greetings from an AED Board Member



Suzanne Dooley-Hash

I first joined the AED in 2010. Since then, I have been very involved in the organization, having served on several different committees and as co-chair for both the Medical Care Standards and the Experts by Experience Committees. I was also one of the founding members of the Professionals and Recovery SIG.

In 2021, I joined the AED Board of Directors as the Portfolio Holder for the Experts by Experience Committee. In this role, one of my primary goals is to ensure that the perspective of individuals who are personally impacted by eating disorders have a voice within the professional community. My role on the board is to bring that perspective to discussions and to decision-making, and to support the work of the Experts by Experience Committee.

## Special Interest Group and Committee Updates

### Advocacy and Communications *Committee Update*

*Carly Pacanowski*

The Advocacy and Communications Committee (ACC) has been hard at work in 2023. Several recent and ongoing ACC projects are listed below.

- **Press release in response to the AAP Guideline.** In January, the ACC assisted in drafting the [press release](#) outlining concerns with the AAP's "Clinical Practice Guideline for the Evaluation and Treatment of Children and Adolescents with Obesity." Identified concerns included (1) minimal mention of screening and referral for eating disorders, (2) lack of provider training for discussing weight with youth and families, and (3) recommendations to prescribe medication to children as young as eight and surgery for adolescents as young as thirteen.
- **Formal process to request assistance around noteworthy topics.** The ACC is creating a standard protocol that will allow AED members to seek assistance in relation to noteworthy issues in the eating disorder field. Resulting actions may include the provision of related resources, consultation with eating disorder experts, and/or an AED press release or position statement about the issue.
- **Media reporting guide to responsibly cover eating disorders.** The ACC is drafting guidelines to appropriately report on and portray individuals with eating disorders in the media. The guide's main directives seek to minimize the perpetuation of harmful stereotypes, respect stories of individuals with lived experience, and use empowering language in reference to individuals living with or in recovery from eating disorders.

Please reach out to ACC co-chairs [Abby Matthews](#) and [Amanda Raffoul](#) for more information about these initiatives.

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## Cognitive-Behavioral Therapy for Eating Disorders *Special Interest Group Update*

*Olivia Carter and Suzanne Straebler*

After a successful first meeting of the Cognitive-Behavioral Therapy for Eating Disorders (CBT-ED) SIG's *Ask the Expert* series, we are gearing up for our next scheduled meeting. Professor Glenn Waller will present on Brief Cognitive Behavioral Therapy for Non-Underweight Clients (CBT-T) in August 2023. Event details and login instructions will follow on the CBT-ED SIG discussion board on the AED website.

The *Ask the Expert* series consists of four online meetings, each featuring a world leading expert in CBT-ED and opportunities for clinical consultation. Attendees are encouraged to bring their trickiest clinical queries directly to those at the forefront of CBT interventions in this field.

All CBT-ED SIG members are invited to attend. Consultation questions can be asked in real-time, during the live session, or can be submitted beforehand via the CBT-ED SIG discussion board, or by emailing them to the SIG co-chairs, [Olivia Carter](#) and [Suzanne Straebler](#). Members unable to attend live sessions are also encouraged to submit questions ahead of time. If you are interested in attending the *Ask the Expert* series but are not a member of the CBT-ED SIG, we strongly encourage you to join via the AED website. We look forward to seeing you next month at the ICED!

## Diversity Equity and Inclusion Advisory *Committee Update*

*Nadia Craddock and Chevese Turner*

At our last in-person ICED in 2019, the inaugural Diversity Equity and Inclusion Advisory Committee (DEIAC) to the AED Board of Directors was established (read more [here](#)). As we eagerly anticipate our upcoming conference in Washington, DC, we feel it is a good time to share an update on our progress and vision.

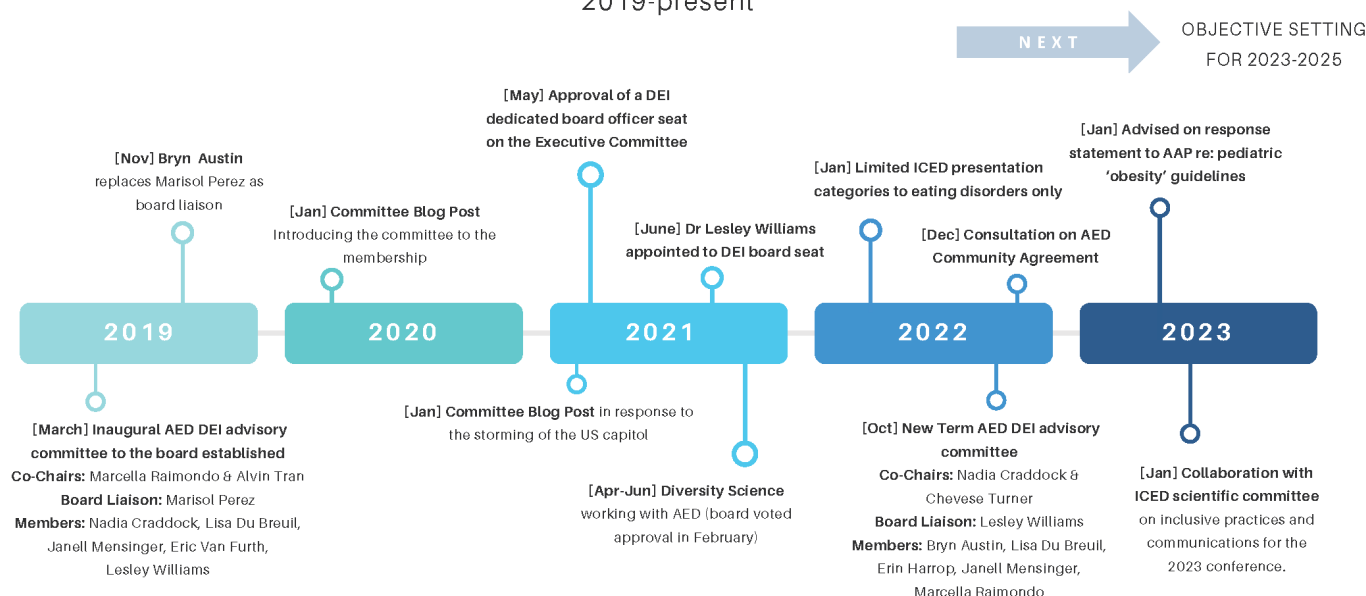
As a brief introduction, we are a team of clinicians, researchers, and experts by experience who support and encourage inclusivity within the organization. As a committee, we provide counsel and recommendations to the AED Board on a proactive and reactive basis. Some of our key milestones are illustrated in the timeline below and include the approval of a DEI-dedicated officer seat on the AED Executive Committee, which has been expertly filled by Lesley Williams, and the consultation of [Diversity Science](#) (a team of recognized experts in diversity, equity, and inclusion) to conduct a DEI Culture Audit within the AED.

Regarding our (the DEIAC) vision, in the immediate term and particularly thinking of the ICED, we do not call for universal agreement. Rather, we call for compassion, openness, and perspective-taking -- prioritizing those with the most oppressed identities to advance our unifying goal -- the prevention and treatment of eating disorders. In acknowledgement of ongoing tensions within our community, it is worth underscoring that people across the weight spectrum can be affected by all eating disorders and that higher weight alone is not an eating disorder.

Looking ahead, we are committed to exploring ways to make the AED more financially accessible, particularly for those from under-represented groups. We have identified this as a key priority in creating a more diverse, equitable, and inclusive AED community.

## AED DEI ADVISORY COMMITTEE

2019-present



## Educational Programming *Committee Update*

*Linda Booij and Leslie Sim*

The Educational Programming Committee (EPC) creates learning opportunities for AED members through worldwide webinars that present and discuss the latest clinical and research developments in the field of eating disorders. These webinars are free of charge to AED members. Please save the date for the following upcoming webinars.

- **Research Gaps in Eating Disorders: Eating Disorder Research in China.** The EPC Research Gap Series will present research on eating disorders from outside of North America, Australia, and Europe. In our first presentation of this series, Dr. Jue Chen will highlight recent eating disorder research findings in China. This webinar will take place on Thursday, May 11<sup>th</sup> at 8:00 am Eastern Standard Time.
- **Severe and Enduring Eating Disorders: Clinical and Scientific Updates.** Drs. Gail Kerver, Lauren Schaefer, and Stephen Wonderlich will provide the first webinar of the Severe and Enduring Eating Disorders Series. The presentation will include an overview of long-lasting and severe manifestations of eating disorders, associated descriptive and diagnostic issues, and clinical and scientifically informed treatment approaches. The presentation will conclude with a discussion about the future of care for individuals with severe and enduring eating disorders, including scientific innovation, proposed clinical models, and economic and institutional obstacles. This webinar will take place on Tuesday, May 16<sup>th</sup> at 12:00 pm Eastern Standard Time.

To register for these webinars, view past webinars, or learn about upcoming webinars at the AED, visit our [online library](#).

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## Member Retention and Recruitment *Committee Update*

*Sandi James*

Over the past two months, the AED membership has grown to over 1,200 members. This is an increase of around 200 members during the first quarter of 2023. This is good news for the eating disorder community and for the AED. We look forward to welcoming more new members in the lead up to the 2023 ICED.

The Member Retention and Recruitment Committee (MRRC) has been working hard to plan events and activities for AED members. Two of the most exciting events planned are the first virtual New Member Welcome and Connection meeting that will take place prior to the ICED and the first in-person ICED Mentor/Mentee Breakfast event since the start of the pandemic, with over 250 people already registered. This is fabulous and if you are interested in joining us, please sign up when you register for the conference! We are also working on a way to ensure that all attendees of the ICED dinner event feel welcome. It is important that all AED members, including new members and solo ICED attendees, feel comfortable taking a seat at any dinner table -- and that they feel included when doing so. Look for the welcome signs and take a seat at a table!

We hope these efforts will contribute to renewed interest in AED membership, increased diversity, and engagement from members around the world. If you have suggestions or comments for the MRRC, please contact the MRRC co-chairs, [Ashley Acle and Megan Parker](#). We look forward to our combined contribution to the AED's vision, "A world without eating disorders through science and practice."

To register for these webinars, view past webinars, or learn about upcoming webinars at the AED, visit our [online library](#).

## Online and Social Media *Committee Update*

*An Dang*

Warm greetings from the Online and Social Media Committee (OSMC)! We are here to update you on different projects that the OSMC has been working on. Since our last dispatch, we have decided to keep both AED Twitter accounts (@aed\_iced and @aedweb) and are thrilled to announce a new AED Instagram handle (@academyforeatingdisorders).

Keep an eye on the official ICED social media hashtag (#iced2023) and follow our Instagram for updates. Please add #iced2023 to your posts so we can follow your important work. We further want to highlight that the OSMC continuously incorporates feedback from AED members about suggestions to further improve our webpage. Making the site more user-friendly is our priority, by reducing the amount of text and including relevant and engaging graphics to increase its visual appeal. As always, we warmly welcome all feedback. If you have not already, please follow us on social media!

[Instagram](#)

[Facebook](#)

Twitter: [@aed\\_iced](#) and [@aedweb](#)

## Special Interest Group (SIG) Oversight *Committee Update*

*Heather Hower*

SIGS bring together AED members with personal and professional interests in distinct areas of eating disorders. They are *for members and by members*. Designed to carry out activities that will appeal to and best serve those who take part, SIGs work optimally when members are actively involved. They offer members the opportunity to collaborate on special projects that can move the dial on specific areas of interest within the broader field of eating disorders.

If you have not been involved in a SIG before, you may be wondering where to start. There are currently twenty-three SIGs within the AED. Each has its own flavor and offers different ways to get involved. Some recent or ongoing SIG activities are shared below.

- Webinar on careers in eating disorders outside of psychology (Early Career/Epidemiology & Public Health SIG)
- Publications related to research on eating disorder recovery (Professionals & Recovery SIG)
- Resource list of books, articles, websites, social media, podcasts, and organizations (Weight Stigma & Social Justice SIG)
- Facebook LIVE event (Early Intervention SIG)
- Research methods discussion group (Genes & Environment SIG)
- Advocacy projects (Epidemiology & Public Health SIG)
- Quarterly research summaries (Sports & Exercise SIG)
- SIG annual awards presentations (Body Image & Prevention SIG)
- Mentorship program, managing directories, and Diversity, Equity, and Inclusion Task Force (Early Career SIG)
- SIG consultation groups (Universities SIG)
- SIG panel presentations at the ICED (all SIGs)

Please visit the [SIG website](#) for more information about individual SIGs, including descriptions and goals, co-chairs and current members, upcoming and past events, community pages, discussion posts, and libraries (including documents, images, videos, and other content).

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## Book Review Corner

Amanda Bruening, AED Book Reviewer

*Family-Based Treatment for Restrictive Eating Disorders: A Guide for Supervision and Advanced Clinical Practice* by Sarah Forsberg, James D. Lock, and Daniel Le Grange (Routledge, 2018, 146 pages)

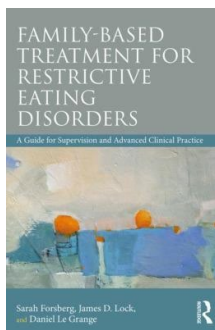
Clinical supervision is a distinct professional activity in which trainees at all levels are evaluated. Yet, formal training to become a supervisor is rarely provided. It is often assumed that achieving a high level of clinical competency, in and of itself, will engender effective supervisory practices. While we have heard the age-old adage, “Those who can’t do, teach,” is it possible that those who *can* do, also teach? The answer to this question remains unanswered, as both the benefits and clinical utility of supervision remain without conclusive support.

*Family-Based Treatment for Restrictive Eating Disorders: A Guide for Supervision and Advanced Clinical Practice* is the first resource with guidance specific to supervising clinicians in family-based treatment (FBT). It includes a wealth of resources to enhance supervisory practices among new and well-established supervisors, including general guidance to orient FBT clinicians, specific recommendations for initial FBT sessions, and broad considerations for each FBT phase and respective transitions.

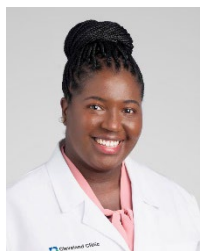
Common supervisory dilemmas are identified throughout the text and recommended interventions are provided. For example, authors outline how supervisors can support clinicians in conducting the family meal. This may include empowering the clinician to conduct in-session exposures, to manage aggressive behaviors that may arise in session, and to navigate adolescent resistance to eating “one more bite.” The text also highlights how to identify areas of growth for novice FBT clinicians. For example, trainees who speculate the causal factors of a patient’s eating disorder in supervision may struggle to remain agnostic and become distracted from the priority of refeeding. Alternatively, trainees who express frustration with or criticism about one parent may be over-aligning with the adolescent or alternate caregiver, which could undermine parental empowerment. Such pitfalls and associated supervisory interventions are provided via case examples.

The book also includes an appendix of helpful resources, including examples of a supervisee needs assessment, a case presentation guide for FBT patients, a supervision tracking form, and examples of treatment goals consistent with objectives for each phase of treatment. Fidelity assessments for FBT Phase I are also provided, helping guiding supervisors in their evaluation of their trainees’ strengths and growth areas.

Overall, *Family-Based Treatment for Restrictive Eating Disorders: A Guide for Supervision and Advanced Clinical Practice* is a seminal resource to any eating disorder clinician interested in or currently providing supervision to trainees. Addressing a critical need, it is a practical guide on supervision in FBT. The text may also be a welcome accompaniment for more advanced clinicians looking to enhance their clinical acumen in FBT and to limit nonadherence to the treatment manual. Finally, researchers interested in improving supervisory practices and in disseminating FBT may also find this text helpful.



## Member's Spotlight: Tornia Wyllie



Tornia Wyllie

*Abigail Matthews Hamberg*

Tornia Wyllie is our latest AED member to be featured in *Member's Spotlight*. Tornia is an adolescent medicine physician at the Cleveland Clinic Children's in Cleveland, Ohio (United States). She provides medical care for children, adolescents, and young adults with eating disorders in collaboration with a multidisciplinary team of specialists.

- **Welcome, Tornia! Tell us a bit about yourself.** I was born and raised in the beautiful southern Caribbean archipelago of St. Vincent and the Grenadines. This tropical paradise is what I will always call home and where most of my family still lives. Nothing compares to a visit home, where I can indulge in authentic Vincentian food, enjoy the beaches and mountain trails, and spend time with family, including my soon-to-be adopted 8-year-old daughter. I completed my medical education at our neighboring island of Grenada at the St. George's University School of Medicine, my pediatric residency at Lincoln Memorial and Mental Health Hospital in South Bronx, New York (United States), and my adolescent medicine fellowship at Cincinnati Children's Hospital Medical Center in Cincinnati, Ohio (United States). In 2022, I started my current position in the Center for Adolescent Medicine at Cleveland Clinic Children's.
- **How long have you been a member of the AED?** I joined the AED last October, when I started my attending physician job after completing a fellowship in Adolescent Medicine.
- **Why are you an AED member?** The AED is a two-way street for exchanging information and ideas with colleagues offering a global, multidisciplinary perspective. Membership has enhanced my clinical knowledge and has provided many networking opportunities. These connections have helped me advocate and find resources for patients and their families in almost every region of the world-global community.
- **What is one thing that you are passionate about in the field of eating disorders?**  
I am really passionate about addressing the intersection of eating disorders with other comorbid mental health disorders, including anxiety and depression. Lately, I've really enjoyed partnering with my gastroenterology colleagues to care for patients with avoidant/restrictive food intake disorder with underlying chronic functional abdominal pain.
- **In your region, what is one thing that is working well in eating disorder treatment and/or research? What is one thing that can be improved?** One positive thing about working in the United States is the availability of different levels of care for patients with eating disorders, including multiple residential treatment facilities. On the flipside of the coin, financial barriers and geographic location can limit the availability of treatment to our patients. There are some eating disorder treatment "deserts" that need staffing.

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## Member's Spotlight *continued*



- **What cities/countries have you lived in, and which was your favorite?** Oh, this is a tough question, as I lived in the Caribbean, United States, and United Kingdom during my educational pursuits. I even spent eight weeks in Thailand during medical school for a medical elective! I can't pick just one favorite, but every place that I've lived expanded my appreciation for the world and provided experiences that made me more culturally competent.

If you would like to participate in *Member's Spotlight*, click [here](#)!

## Welcome to Washington, DC (United States)!

*Karen Jennings Mathis and Sandra Mulkens (Scientific Program Committee Co-Chairs)*

We are absolutely thrilled to host the ICED 2023 *in-person*, coinciding with the 30<sup>th</sup> anniversary of the AED! Themed *Broadening our Impact: Enhancing Visibility through Collaboration and Outreach*, the conference will take place in Washington, DC (United States) from June 1<sup>st</sup> through June 3<sup>rd</sup> at the Omni Shoreham Hotel. Pre-conference events, including the Clinical Teaching Day and the Research Training Day, will be held on May 31<sup>st</sup>.

The ICED is all about connections -- new and old -- and being able to meet in-person after three *long* years, makes the 2023 conference especially meaningful. This is highlighted in the conference logo, with bright, hopeful colors and dots that clearly highlight the connections between people and countries worldwide. This year, we can *finally* meet up with "old" friends and colleagues, chat live about our work and personal lives, and create new partnerships. Whether over a cup of tea between ICED sessions or on the dance floor at the final conference event, we are excited to connect in-person.

We are also extremely proud of the ICED 2023 program! Aligning with the conference theme, keynote speaker Dr. Brian Nosek will present *Culture Change Toward More Open, Rigorous, and Reproducible Research*. Four plenaries will feature exciting and timely topics, including *Gut Feeling: The Role of Gastrointestinal Disturbances in Eating Disorders from Bench to Bedside* (Biology Plenary), *Distal Sociocultural Factors in Eating Disorder Research and Practice: Invisible Determinants of Care* (Sociocultural Plenary), *Together or Apart? Considering How and When to Address Mental Health Comorbidities in the Psychological Treatment of Eating Disorders* (Treatment Plenary), and *Climate Change and Global Warming: Implications for Eating Disorder Research and Practice* (Wildcard Plenary). Don't miss 'Big Ideas in Eating Disorders,' Specifically the Big Idea of the Establishment of AED, a unique 30<sup>th</sup> Anniversary Plenary, featuring past AED presidents presenting the history of the AED and its role in shaping the eating disorder field.

FOMO (fear of missing out) may be an issue when you review the conference program! The ICED 2023 also features many paper presentation sessions, workshops, SIG panels, and over 100 posters. It will be quite difficult to choose the "right" event to attend. However, connecting with your colleagues during conference breaks will help you discover what you missed and to learn from

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Welcome to Washington, DC *continued*

others! Don't forget to attend the Think Tank event, where panelists and attendees will discuss how the ICED 2023 addressed clinical practice, research, and the integration of both.

We look forward to seeing everyone at the first in-person ICED since 2019! If you have not done so, you can still register and book your hotel rooms, [here](#). We want to see you, so register soon!

## New Members Corner

*Abigail Matthews Hamberg*

Between January and March, we welcomed 213 new members to the AED. Truly illustrating the diversity of our organization, our newest members represent **16 countries**, including Australia, Brazil, Canada, Chile, Colombia, Germany, Greece, Israel, Italy, Mexico, the Netherlands, New Zealand, Russia, Sweden, the United Kingdom, and the United States.

See below for a list of new AED members!



<b>New Member</b>	<b>Country</b>	<b>New Member</b>	<b>Country</b>
Keisha Adams	United States	Rachel Lapidus	United States
Ryan Ahmed	United States	Kellsey Launius	United States
Claudia Alarcon	United States	Danielle Lennon	United States
Theresa Alcatraz	United States	Anne Levin	United States
Elizabet Altunkara	United States	Zev Levy	United States
Katelyn Anderson	United States	Zhuo Li	United Kingdom
Brittany Athmer	United States	Jianyi Liu	United States
Sarah Attaway	United States	Haijia Liu	United States
Kathryn Babbott	New Zealand	Ethan Lopez	United States
Lia Bauert	United States	Andrea Lopez	Chile
Maria Bazo Perez	United States	Samantha Luciani	United States
Shir Berebbi	Israel	Iris Luna	Colombia
Tatyana Bidopia	United States	Mariana Machado	Brazil
Leila Binder	United States	Tamara Maginot	United States
Elizabeth Bolton	United States	Julia Maier	Germany
Morgan Borud	United States	Amanda Makara	United States
Elisabeth Bratt Neuberg	Sweden	Elana Maloul	United States
Alexandria Broccoli	United States	Tatiana Martins	Brazil
Paula Brochu	United States	Christa Mastroianni	United States
Carina Brown	United States	Elyssa Max	United States
Lisa Brownstone	United States	Sara Maylin	Canada
Rebecca Brumm	United States	Gabrielle McDonough	United States
Emma Bryant	Australia	McGinty	United States
Caroline Bucher	United States	Alyssa McKinney	United States
Emily Burr	United States	Courtney McLean	Australia
Rebecca Busman	United States	Sari Meltzer	United States
Elvira Anna Carbone	Italy	Yvette Deanna Mends	United States

Denise Cárdenas Rodríguez	Mexico	McKenzie Miller	United States
Anna Carleen	United States	Carly Milliren	United States
Amanda Carlin	United States	Katherine Mitchell	Canada
Kimberly Carlisle	United States	Ingrid Morales	Mexico
Dana Chiz	United States	Davia Moss	United States
Laura Cipullo	United States	Claire Murphy-Morgan	United Kingdom
Olivia Clancy	United States	Sonakshi Negi	United States
Leanna Clark	United States	Laina Nelson	United States
Enrico Collantoni	Italy	Maria Nicula	Canada
Keisha Adams	United States	Rachel Lapidus	United States
Ann Contrucci	United States	Hannah Norling	United States
Jade Cool	United States	Kimberly Osborn	United States
Jenny Copeland	United States	Paige Partain	United States
Julia Costabilo	United States	Anna Gabrielle Patarinski	United States
Sara Courtis	Canada	Carina Perel-Panar	Canada
Andrea Covarrubias	Chile	Alexandra Perloe	United States
Brianna Crawford	United States	Lauren Pictor	United States
Krista Crotty	United States	Alexandra Price	United States
Jennifer Cueto	United States	Neil Rafferty	United States
Gina Dahlin	United States	Mehrieh Rahimi	Canada
Alexia De Macar	Canada	Marianna Rania	Italy
Dolores De Bargas-Schoonver	United States	Amy Rapaport	United States
Moniher Deb	United States	Molly Robbins	United States
Monica Delgado	Mexico	Julia Rodgers	United States
Kristin Denmark	United States	Ankie Roedelof	Netherlands
Qiuwei Ding	United States	Alissa Rubinfeld	Canada
Ettore D'Onofrio	Italy	Claire Ryan	United States
Jennifer Dorau	United States	Monique Santoso	United States
Lara Edelstein	United States	Jessica Saunders	United States
Robyn Evans	United States	Jekaterina Schneider	United Kingdom
Ellen Ewing	United States	Barbara Scolnick	United States
Rita Faycurry	United States	Anjali Sehgal	Canada
Marit Featherstone	United States	Victoria Shampaine	United States
Olivia Feng	Canada	Benjamin Shepherd	United States
Debbie Fetter	United States	Tatiana Shumeeva	Russia
Dolly Figueroa	Chile	Kristie Simmons	United States
Maxwell Frank	United States	Rachel Sinex	United States
Dave Freestone	United States	Christine Skubisz	United States
Natalie Fruchter	United States	Kaitlin Slaven	United States
Sarah Fuller	United Kingdom	Helen Smith	United Kingdom
Donna Gallagher	United States	Katie Stabile	United States
Emma Gillespie	United States	Kayla Stanton	United States
Katie Gillihan	United States	Colene Stoernell	United States
Ayla Giola	United States	Sajida Suleman	United States
Sofie Glatt	United States	Giulia Suro	United States

Daniela Gómez Aguirre	Chile	Masami Tabata-Kelly	United States
Caroline Gonynor	United States	Casey Tallent	United States
Sashi Govier	United States	Victoria Taylor	Canada
Haley Graver	United States	Juliana Tesselaar	United States
Brooke Greenberg	United States	Rhonda Theoret	United States
Laura Griffin	United States	Katherine Thomas	United States
Grace Haase	United States	Katherine Thompson	United States
Stacey Halverson	United States	Chelsea Tobias	United States
Grace Hanna	United States	Sophia Todorov	United States
Rebecca Hardin	United States	Jessica Tone	Australia
Anastasia Harris	Canada	Nathalie Tousignant	Canada
Tinsley Harris	United States	Nami Trappenberg	Canada
Emily Harris	Australia	Eva Tsapakis	Greece
Kimberly Hartzell	United States	Cynthia Tschampl	United States
Jacob Hefner	United States	Nichole Tucker	United States
Anya Heneghan	United Kingdom	Lisa Van Leeuwen	United States
Taryn Hanning	United States	Taylor Vashro	United States
Gabriella Heruc	Australia	Paula Vass	United States
Erka Hirsch	United States	Siena Vendlinski	United States
Shannon Hoey	United States	Shannon Vera	United States
Madeline Hunsicker	United States	Kara Washington	United States
Francis Iacobucci	United States	Rachel Weeks	United States
Lindsay Innes	United States	Lucy Wetherall	United States
Alyssa Izquierdo	United States	Chloe White	Canada
Tatiana Jana	Brazil	Dayna Winograd	United States
Hannah Joseph	United States	Copeland Winten	Australia
Maria Kalantzis	United States	Coley Woodward	United States
Maryna Kapichyna	United States	Lauren Yadlosky	United States
Billie Katz	United States	Julia Yermash	United States
Caitlin Kelly	United States	Joy Zelikovsky	United States
Leah Kinder	United States	Lisa Zhu	Canada
Johanna Kulp	United States	Janelle Zimmerman	United States
Agatha Laboe	United States	Caitlyn Zon	United States
Jennifer Lander	United States		



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