The AED is growing up. We’re no longer small or even all that young. The AED is capable, and compelled by our mission and hard-earned status, to take on responsibility for making real changes to our field. It is by way of this responsibility that the AED recently formed an Ethics Committee to hold ourselves to the highest standards of conduct, a Task Force for the Development of Psychological Care Guidelines to organize and disseminate best psychological treatment standards (this is in addition to our Medical Care Standards Guide and efforts to aid in the development of standards for inpatient care, nutrition care, and dental care), and a Diversity, Equity, and Inclusion Committee to assess and address issues that have kept the AED, and the field more broadly, from being more diverse and welcoming. As a member of the Coalition for the Advancement of the Application of Psychological Science (CAAPS), the AED recently endorsed CAAPS’ consensus statement on evidence-based practice, which will soon be widely disseminated. The AED is taking a stand on issues related to our mission and leading the way in the field of eating disorders.

Our collective knowledge has grown, too. While at times it seems that well-worn disagreements return regularly for rehashing, various inspiring advances (primarily by AED members) are easy to bring to mind. Each new issue of the International Journal of Eating Disorders, to which all AED members have access, is full of discoveries that humble me. I’m sure I’m not alone in that experience. So many people are doing such great work. Some of this work was recently on display at the annual meeting of the Eating Disorder Research Society in Sydney, Australia in October. During my flight, my attention was rapt by a book[1] about the earthquake that shook the south-central coast of Alaska in 1964 and the geophysical research that followed to investigate the quake. The book tells the tale of how that research fed the development and refinement of the theory of plate tectonics, a theory that unified observations in geology in much the same way that the theory of evolution provided order for biology. Our field has not yet experienced an analogous revolutionary contribution, but at our top-notch meetings, I cannot fend off the feeling that the ground is starting to shake.

Before long, we’ll get another infusion of new ideas, findings, and perspectives at the AED’s International Conference on Eating Disorders (ICED) that will be held in March of 2019 in New York City.
Message from the President continued

I'm already excited. There was an enormous volume of submissions for presentations of all types for this meeting, which means two things: (1) many submissions (including some of my own!) could not be accepted and (2) the presentations selected will be of unparalleled quality. The keynote speaker and influential thinker, Thomas Joiner, will discuss "Why People Die by Suicide", which will surely cause us all to ponder about this devastating outcome that occurs with such frequency among individuals with eating disorders. Registration for ICED 2019 is now open. Don't hesitate to register - you won't want to miss it!

In June of 2020, the AED will co-host the ICED with the Australian and New Zealand Academy for Eating Disorders (ANZAED) in Sydney, Australia. My recent trip doubled as a scouting expedition, and it did not disappoint. If you haven't been to Sydney, you will want to make room for this one on your calendar. Sydney was friendly, easy to navigate, clean, safe, peaceful, beautiful, and rich in opportunities for adventure.

Part of growing up is also dealing with changing circumstances. The co-hosted meeting in Sydney in 2020 was born from the AED's desire to be a global organization in every sense and from the economic realities of holding large annual meetings. Changes in the meeting-hosting industry over the last several years have challenged the historical financial models for non-profits like the AED. Without exaggerating, my wife and I recently had an anniversary dinner at a swanky seafood restaurant, and the bill totaled to approximately the same cost as coffee and pastries for a single attendee on a single day at our upcoming meeting in New York. The AED is pursuing conference locations for future meetings that are exciting, novel, and inviting, and that offer financial opportunities to limit costs for attendees and facilitate the AED's many initiatives that frankly cost money. Further, the AED continues to develop resources that are available to members all year round. If you haven't explored the website and online community lately, please do, and let others know that the AED does so much more than organizing an annual meeting, even if this meeting is our highlight.

The growth in the AED has only been possible because of the myriad volunteers who commit their time and energy to our cause. Please consider joining that group of volunteers to help the AED continue to grow and fulfill our mission. I look forward to seeing you in New York where we can all hope to witness the next breakthrough!


Message from the Editor

Welcome to the December 2018 edition of the AED Forum! This brief issue is full of important updates - be sure to read the latest news from your AED leaders, special interest groups, and committees. For example, were you aware of the AED's role in developing a consensus statement on evidence-based practice in psychology? This important undertaking is discussed in the Executive Director's column and the update from the Research Practice Committee (and also mentioned in the President's Message). The current issue also contains a book review by guest reviewers Beth Hartman McGilley and Margo Maine; you won't want to miss their discussion of the newly released Sick Enough by Jennifer Gaudiani.

Thank you to all who submitted articles for this issue of the Forum. Please submit your articles, letters, and announcements for the next issue of the Forum by January 30, 2019. Keep in mind that our next issue is the print version of the Forum distributed at the ICED conference, so be sure to submit your conference-relevant updates and news. Submit your contributions and suggestions (no more than 250 words per entry) to Anna Ciao at Forum@aedweb.org.

Anna Ciao, PhD
Greetings from the Executive Director

At a holiday party last night, I mentioned that the AED is working to define standards for the treatment of eating disorders, and working to ensure scientific rigor in the choice and application of treatment techniques. A friend at the table essentially said "Nonsense! Psychology is not a science and can't be compared to the standards and treatment protocols of physical medicine." The debate as to whether psychology is a "science" is a long-standing one. In an article written in 2016 and published in Psychology Today, Gregg Henriques, author of A New Unified Theory of Psychology, writes:

"The reason many are rightfully skeptical about its status is found in the body of scientific knowledge - psychology has failed to produce a cumulative body of knowledge that has a clear conceptual core that is consensually agreed upon by mainstream psychological experts. The great scholar of the field, Paul Meehl, captured this perfectly when he proclaimed that the sad fact that in psychology 'theories rise and decline, come and go, more as a function of baffled boredom than anything else; and the enterprise shows a disturbing absence of that cumulative character that is so impressive in disciplines like astronomy, molecular biology and genetics.' In technical terms, I am claiming that the core problem with the field is that it is 'pre-paradigmatic', which means that psychology completely lacks agreement from the experts about what it is and what it is about, what its foundational theories or even frameworks are, what its key findings are, and how it fits with the rest of the body of scientific knowledge. The fact that psychology has been around now for almost 150 years and remains pre-paradigmatic is undeniably a very serious threat to the field's status as a real science."

Just because something has been or may appear to be a particular way is no reason to assume it must always be so.

I'm excited about the AED's involvement in CAAPS - the Coalition of Associations for the Advancement of Psychological Science. CAAPS is a coalition of U.S. associations including those in the field of psychology and psychiatry as well as some in related fields like social work or general mental health. CAAPS is working to:

1. Build relationships among organizations, focusing on the value of collaboration
2. Learn how different disciplines conceptualize evidence-based practice (EBP)
3. Identify common themes regarding the types of evidence that organizations value in EBP
4. Determine the levels of collaboration possible, irrespective of potential differences

One of the first initiatives of CAAPS was to consider the development of specific initiatives that we could accomplish more effectively as a collective, to better communicate with the public about EBP and, in turn, better address current mental health needs. With a great deal of word-smithery, we reached consensus on a definition of what "evidence-based practice" is:

**Evidence-based practice decision-making for mental and behavioral health care**

Evidence-based practice of mental and behavioral health care is an ongoing, collaborative approach to making decisions about services, which includes the following components:

1) Evidence-based practice begins with consideration of the best available basic and applied empirical research evidence when making decisions about mental and behavioral health services.
Greetings from the Executive Director continued

The limitations of the available empirical evidence are also considered, especially given contextual factors such as developmental level, community/cultural needs, the settings in which the services occur, barriers to services, and the strengths and assets of individuals and communities. The limitations of the evidence base, however, do not impede the retention or adaptation of principles and techniques from the empirical evidence that remain relevant and applicable after consideration of the limitations.

2) Evidence-based practice includes ongoing measurement and evaluation of the impact of services and, if necessary, outcome-informed adjustments to services that are intended to maximize their effectiveness.

3) Providers serve as a guide for collaborative decision-making in evidence-based practice, integrating different sources of information, including recipients' values and preferences, as well as the provider's competence and the organization's capacity to provide effective services.

In October of this year, the AED Board endorsed that statement as a core principle of the AED, and many other associations have also signed on, including - I'm delighted to report - the Hispanic Latin American (HLA) Chapter of the AED and the Middle Eastern Eating Disorder Association (MEEDA), the AED's newest partner organization. Many thanks to HLA and MEEDA for creating Hispanic and Arabic translations of the consensus statement!

Of course, we don't know everything that is known or will be known about the most effective treatments for the many manifestations of eating disorders - and human beings are uniquely individual and each may respond to different treatments in different ways. That's true in the physical sciences as well. The human body and intelligence is an extraordinarily complex puzzle.

But that's no excuse not to try to see the patterns - to develop a cumulative body of scientific knowledge! So bravo to all of you who are using empirical evidence as the basis of your practice. Bravo to the researchers who are carefully exploring the boundaries of the unknown and bringing forth new scientific understanding! Bravo to those working to define and map what is known scientifically. It's an exciting time to be working in the field of psychological science!
SIG and Committee Updates

Experts by Experience Committee Update

Ashley Solomon

The formerly titled Patient-Carer Committee is thrilled to announce the renaming of the committee to "Experts by Experience," and to share the significance of this change in title with the AED community. The committee recognized the need to assume a name that would emphasize the value of our collective lived experience. The mission of the committee has always been, and continues to be the enhancement of the AED and the eating disorder field as a whole through the integration of experiences of those most deeply impacted by eating disorders. We sought a name that would also reflect the global nature of our committee and the AED; "Experts by Experience" is a term used in Scotland, Ireland, South Africa, the Netherlands, Canada and other countries. We strive to emphasize that although we are stakeholders with involuntary, accidental and unintentional expertise, we are experts nonetheless. Our expertise has been acquired through affliction and suffering; our education has been gained by virtue of necessity. We are grateful to the AED for the opportunity to help inform policy and priorities through this lived experience.

Membership, Retention, and Recruitment Committee Update

Lisa Anderson

The Membership Retention and Recruitment Committee (MRRC) has been working hard to establish strong retention rates and increase new AED membership, and the hard work is paying off! The AED currently has 1,753 current members, a 7% increase from the membership total at the end of 2017. Efforts to ensure that AED memberships were renewed and that new membership continue to increase have resulted in 467 new members as of November 2018, surpassing the 387 new member total for 2017. In line with MRRC goals to increase efforts to facilitate new and continued membership, we have implemented an official welcome message that ensures that new AED members receive a personalized email outlining a variety of membership benefits and connecting the new member to a current MRRC member. Feedback from new members regarding their AED welcome emails has been positive.

While total membership numbers are up, the number of international AED members remains lower than it was at this time last year. Therefore, the MRRC is continuing efforts to solicit feedback regarding AED member benefits that might help to not only attract new members from outside of the US and continue to maintain current members. The AED’s vision and mission emphasize its role as a global professional association, and without good representation of researchers, clinicians, students, individuals with lived experience and their carers outside North America, we miss out on important insights in the eating disorders field. If you have insight or input that you’d like to share regarding ways to boost international membership of AED, please feel free to contact the MRRC co-chairs Marita Cooper (marita.cooper123@gmail.com) and Tara Deliberto (tara.deliberto@gmail.com); stay tuned for developments on this front!
Research Practice Committee Update

Karen Jennings

Members of our Board recently represented the AED at the Coalition for the Advancement and Application of Psychological Science (CAAPS) Multidisciplinary Mental Health Summit. Representatives from 25 diverse mental health organizations met to discuss evidence-based practice (EBP). Themes included how mental health organizations must find common ground and improve collaboration to facilitate better communication with the public about EBP and, in turn, better address current mental health needs. The result of this conversation was a draft of the first consensus statement between psychiatrists, psychologists, social workers, counselors, marriage/family therapists, family practitioners, psychiatric nurses, and patient advocacy groups that articulates the definition and components of EBP. This critical first step was taken to ensure bidirectional communication and partnerships between researchers and clinicians and to provide information to the public about what to expect when receiving mental health care. A final version is in the process of being ratified and disseminated. By working collaboratively, we continue to offer a united voice and change the dialogue about mental health.


SIG Oversight Committee Update

Suzanne Dooley-Hash

Hello! We would like to take this opportunity to highlight some of the AED Special Interest Group (SIG) activities at the upcoming ICED 2019. First, the final selections for SIG panels has been made. These panels feature individuals with significant expertise in their respective areas, address many important topics, and collectively demonstrate the diversity of interests represented by our SIGs. They are also the main mechanism by which SIGs can share their interests with other members of our community. Times for individual presentations as well as SIG meetings can be found in the conference "Schedule-at-a-Glance". When at the conference, please also stop by our "Meet and Greet" booth where you can learn more about each of the AED SIGs. Members of our committees will be available to answer questions regarding SIG membership and activities. There are also rumors about an array of goodies for everyone, as well as the opportunity to enter a raffle for some great prizes! And, of course, don’t forget to attend your SIG meeting at the conference. These annual meetings are a great opportunity to meet with other members in person. It is always fun to be able to put faces to the names of people you have only "met" through online communications. Different SIGs utilize their meetings in different ways (speakers, group discussions, review of the year, etc.). They are always a good time to generate new ideas, interest, and enthusiasm for the ongoing activities of your group. We look forward to seeing everyone in NYC!
Association Updates and Other News

Book Review Corner

Beth Hartman McGilley and Margo Maine, Guest Book Reviewers

Sick Enough by Jennifer Gaudiani (Routledge, 2018, 258 pages).

With a thinking heart and humble genius, Dr. Gaudiani’s Sick Enough fills the dangerous cracks befalling patients with eating disorders due to the significant gaps between research and practice and between medical and mental health care. Impeccably and accessibly composed, organized by symptom patterns and accentuated by case studies, metaphors, and parables, Sick Enough is an incomparable contribution to a literature starving for a social justice-informed perspective on the medical management of those with eating disorders. True to her literary intentions, this book validates patient diversity and lived experience, and comprehensively addresses the vagaries of medical complications associated with disordered eating symptoms. Dr. Gaudiani’s passionate and effective capacity for sharing the depth and range of her clinical acumen ensures that patients and professionals will equally benefit from this text; although nothing compares to an in-person consultation, Sick Enough is the written equivalent.

The book is divided into five major sections which thoroughly address the spectrum of eating disorder experiences: the physical and psychological effects of nutritional restriction, purging and its physiological sequelae; Binge Eating Disorder and the traumatizing impact of weight stigma; the "unmeasurables" (Irritable Bowel and Postural Orthostatic Tachycardia Syndromes and related conditions); and specific populations (e.g. patients with ARFID, diabetes, males, midlife and beyond, athletes, and comorbid conditions). The physical complaints of those with eating disorders are too often dismissed, simply because they are not easily measured or understood by modern medicine. This leaves care lacking and contributes to the feeling that those who experience eating disorder symptoms are unimportant people who simply do not deserve to feel understood and heard, and certainly not to feel better. After reading this book, sufferers may believe, first, that they are "sick enough", second, that their problems are real, and, third, that they can recover.

What distinguishes this volume from previous literature is the format of the chapters and the meticulous sensitivity Dr. Gaudiani brings to the content. Chapters begin with case studies so richly and personably described that the reader gains a felt sense of the matters at hand and the person experiencing them. Background information on the relevant medical and psychiatric issues follows, exhaustively considered, with practical and clear recommendations for symptom management when possible. Chapters close with a synopsis of how the information provided was applied and the ‘case resolved.’ In this elegant, informative way, Dr. Gaudiani has mastered the art and science of "keeping it simple" while not "dumbing it down." Documentation of the topics and perspectives offered is extensive and further contributes to the reader value.

No other volume devoted to the medical management of eating disorders so literally embraces a social justice and weight-inclusive stance. Readers will be sensitized, perhaps for the first time, to the true complexities of eating disorders and their complications, as well as the diversity of those suffering with them.

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Populations typically overlooked or otherwise lacking in the empirical and clinical literature include children and midlife patients, males, gender and sexual minorities, elite athletes, and patients with comorbid substance abuse or diabetes mellitus. *Sick Enough* takes these neglected groups out of the shadows and conscientiously examines and illuminates their unique medical considerations. A timely and vital chapter is devoted to chronically ill and/or treatment resistant patients, covering the tender associated gamut of mandated treatment to hospice care. Finally, *Sick Enough* concludes with a call to activism - practical, accessible ways to change our minds, our language, and our relationships to our own and to others’ bodies, thereby making a positive contribution in the service of eating disorder prevention.

This book should be in the hands of every professional working in the field of eating disorders - clinicians from all disciplines and researchers who want to enhance the odds of effective treatment and recovery. It provides a critical roadmap for patients and loved ones trying to understand these complex and frightening disorders as well. We applaud Dr. Gaudiani for this life-saving resource.

**Upcoming Conferences, Meetings, and Seminars**


Check out [AED's Event Calendar](https://www.aedweb.org) for webinars, international conferences, and more!