



Agenda for

**Michael E. Berrett, PhD, CEDS and Quinn Nystrom, Founder/President - Qspeak & Dateline Diabetes
and Center for Change National Diabetes Ambassador presenting on**

**“12 Core Principles in Treatment and Recovery from Eating Disorders and Related Illness” and “Eating
Disorders & Type 1 Diabetes: A Complicated Relationship”**

February 16, 2018

8:00am-12:00pm

Presentation

8:00am- 12:00pm

- 8:00am
 - Check in and Breakfast
- 8:30am-12:00pm
 - Presentation

This workshop will address 12 core areas which are critical in the treatment process and the pathway to recovery from an eating disorder and related emotional, mental, and addictive illness. It will address critical topics including: finding reasons for recovery, accountability, embracing feelings, separating person from illness, creating structure, social support, listening to heart, reconnection, avoidance, identity, and love – and the role of each in treatment and recovery. Each critical area will be examined at the level of principles, themes, and clinical intervention.

Living with type 1 diabetes is complicated enough, but then throw in a dual diagnosis of an eating disorder, and the management of the two becomes tricky. Eating disorders paired with diabetes can be a life-threatening combination. Quinn will discuss her personal journey of seeking recovery, and how healthcare professionals can help guide and support their patients who present with both a chronic illness and an eating disorder.

- Question and Answer



Format: Presentation

Date: March 16, 2018

Time: 8:00am -12:00pm

Presentation Length: 3 Hours

Type: Lecture, interactive with Question and Answer

Presenters: Michael E. Berrett, PhD, CEDS and Quinn Nystrom, Founder/President - Qspeak & Dateline Diabetes and Center for Change National Diabetes Ambassador

Presentation Title: *“12 Core Principles in Treatment and Recovery from Eating Disorders and Related Illness” and “Eating Disorders & Type 1 Diabetes: A Complicated Relationship”*

Brief Description of Presentation:

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Living with type 1 diabetes is complicated enough, but then throw in a dual diagnosis of an eating disorder, and the management of the two becomes tricky. Eating disorders paired with diabetes can be a life-threatening combination. Quinn will discuss her personal journey of seeking recovery, and how healthcare professionals can help guide and support their patients who present with both a chronic illness and an eating disorder.

Outline for 12 Core Principles in Treatment and Recovery from Eating Disorders and Related Illness:

- 1) Overview
 - a. The seriousness of the illness, including stats
 - b. Concurrent illness stats

- 2) Treatment Options
 - a. Levels of care
 - i. APA Guidelines
 - b. Evidence based treatment
 - c. Treatment based evidence
 - d. Treating the whole person
 - e. Structure
 - f. Aftercare
- 3) Assessments
 - a. Dietary
 - b. Medical
 - c. Psychological
- 4) Interventions
 - a. 12 core principles
 - i. Take the ED off the pedestal
 - ii. Find and nurture reasons for recovery
 - iii. Separate the person from the illness
 - iv. Embrace feelings without self-judgment
 - v. Create structures which invite success, hope, commitment, sacrifice, hard work, and recovery
 - vi. Creating social support, both given and received
 - vii. Reconnection to self, others, spirituality, life
 - viii. Giving and receiving love
 - ix. Feel the fear and do it anyway: avoid only avoidance
 - x. The truth shall make you free: accountability and honesty
 - xi. Seek the therapeutic mirror of spiritual identity
 - xii. Reinvent what you trust: listening to and following the heart

Outline for Eating Disorders & Type 1 Diabetes: A Complicated Relationship:

- 1) Describe what life is like for an individual living with Type 1 diabetes.
- 2) Reasons why people with Type 1 diabetes are more at risk for eating disorders.
- 3) Describe the events that occurred to make the switch in thinking between being a victim or a victor with life with ED-DMT1.
 - a. Motivation to seek treatment.
 - b. Describe how recovery is a daily decision that needs to be made with Type 1 Diabetes and an eating disorder.
- 4) Unique challenges for a person who has Type 1 diabetes and an eating disorder.
- 5) Compare and contrast different medical professionals and the approaches they use in interacting with patients, and how those can affect one's life care with ED-DMT1.
- 6) Describe the 5 best communication styles when talking with patients living with diabetes.

Learning objectives for 12 Core Principles in Treatment and Recovery from Eating Disorders and Related Illness:

Based on the content of the workshop participants will be able to:

- 1) List 12 critical areas to address in the treatment of eating disorders
- 2) Describe practical interventions which address each of these core areas of treatment
- 3) Recite personal application of principles as well as application of principles in the benefit of those we serve

Learning objectives for Eating Disorders & Type 1 Diabetes: A Complicated Relationship:

Based on the content of the workshop participants will be able to:

- 1) Describe the complicated relationship with a person who is diagnosed with ED-DMT1.
- 2) Describe five communication styles to use when talking with a patient with type 1 diabetes and/or an eating disorder.
- 3) List various ways that aid in someone's success and increased self-efficacy when managing ED-DMT1.

Professional Peer Review and Clinical Text Resources and Citations for 12 Core Principles in Treatment and Recovery from Eating Disorders and Related Illness:

- 1) "Spiritual Approaches in the Treatment of Women with Eating Disorders," P.S. Richards, R.K. Hardman, M.E. Berrett, book, American Psychological Association, Washington DC, 2007
- 2) McCraty, R., Atkinson, M. & Bradley, R.T. (2004a) Electrophysiological evidence of intuition: the surprising role of the heart. *Journal of Alternative and Complementary medicine*, 10(2), 133-143
- 3) Childre, D., & McCraty, R. (2001) Psychophysiological correlates of spiritual experience, *Biofeedback*, 29(4), 13-17
- 4) "Is Self-Esteem the Primary Predictor of Disordered Eating? Shea, M.E., & Prichard, M.E. (2007). *Personality and Individual Differences*, 42(8), 1527-1537.
- 5) "Self-Love Diet: The Only Diet That Works, Michelle Minero, LMFT, Phoenix Century Press, Sausalito, CA, 2013
- 6) "Connecting Through Difference: Therapeutic Use of Self to Promote Eating Disorder Recovery, Cynthia Whitehead-LaBoo, in "Effective Clinical Practice in the Treatment of Eating Disorders: The Heart of the Matter," Margo Maine, William Davis, and Jane Shure, Editors, Routledge Press, New York, 2009
- 7) "The Self-Esteem Workbook: An Interactive Approach to Changing your Life, Lynda Field, Element Publishing, Rockport, MA, 1995
- 8) "The use of Holistic Methods to Integrate the Shattered Self, " Adrienne Ressler, Susan Kleinman, and Elisa Mott, in "Treatment of Eating Disorders: Bridging the Research-Practice Gap," Margo Maine, Beth H. McGilley, and Douglas W. Bunnell, Academic Press, New York, 2010

Professional Peer Review and Clinical Text Resources and Citations for Eating Disorders & Type 1 Diabetes: A Complicated Relationship:

- 1) *There Is a Missing Ingredient in Diabetes Care Today*, Aus Alzaid, MD, 2014
- 2) *Social Learning Theory*, Albert Bandura, 1977
- 3) *Comorbid Diabetes and Eating Disorders in Adult Patients*, Cynthia Gagnon, Annie Aime, Claude Belanger, Jessica Tuttmann Markowitz, 2012

- 4) The Diabetes Educator's Role in Managing Eating Disorders and Diabetes, Patti Urbanski, Ann E. Goebel-Fabbri, Maggie Powers, and Dawn Taylor, 2009

Statement of possible risk:

It is possible that participants, as a byproduct of attending this training, will have an opportunity to look at themselves and apply principles into their own lives, as well as those they treat. Therefore, there is always potential that participants could experience a mild degree of emotional discomfort as they look in the emotional mirror in application of these principles in their own lives.