



**Format:**

Live Presentation

**Date:**

June 7, 2019

**Time:**

12:30pm -2:00pm

**CE credits for this presentation:**

1.5 CE credit for this presentation within an 8.75 hour event

**Type:**

Lecture, interactive with Question and Answer

**Training For:**

Staff of Hospitals, Medical Centers, Mental Health Clinics: General Medicine Physicians, Psychiatrists, APRN's, Psychologists, Counselors, Substance abuse counselors, Dietitians, Nurses, Mental Health Technicians

**Presenters:**

Lauren Flores, LMFT, MS and Melissa Taylor, LMFT, MS, CEDS-S

**Presentation Title:**

"Creating Structure and Readiness for College Life When You Have an Eating Disorder"

**Brief Description of Presentation:**

College is an exciting time, a rite of passage for most teenagers. For those who have struggled with an eating disorder, college can be a dilemma. Should the student go away from home or should they stay close to their family and treatment team? Should the student choose a university setting or a smaller liberal arts or community college? Is the family ready to support the student from a distance or does the family need to be closer to offer the most effective support? Is the student ready for college life and all its complexities (Eisenberg, 2011; Ackard, 2002; Bryant, 2012). This presentation will explore readiness, choices and discuss how to prepare the student

and the family for college life (Giel, 2016; Byrne, 2016). Other topics such as how to set up parameters for wellness while at college and how to find a treatment team at college will be discussed (NEDA, 2013).

### **Outline:**

- I. Introduction
  - a. Students who suffer from disordered eating or diagnosed EDs should be conscientious when deciding about college plans.
  - b. Making decision with current team
  - c. Family readiness
  - d. Critiquing the options for education
- II. Body
  - a. College life
    - i. Participants experiences
  - b. Issues that may complicate an eating disorder
    - i. Drugs and alcohol (Bryant, 2012; Burke, 2010; Mustelin, 2016)
    - ii. Financial concerns
    - iii. Job/study/social life balance
    - iv. Academic fit
    - v. Dieting culture at college/disordered eating (Zagorsky, 2011)
    - vi. Exercise at college/athletes (Ackard, 2002; Giel, 2016)
    - vii. Emotional readiness (Byrne, 2016)
- III. Conclusion
  - a. Setting up treatment team at school
    - i. Communication with former treatment team
    - ii. Open communication with present treatment team as well as ongoing ED screening (Eisenberg, 2011)
    - iii. Parents/support team staying in tune
    - iv. Releases of information for consistent communication
    - v. Idaho options
  - b. Zone Plan
    - i. How to create one
    - ii. How to follow up on it
    - iii. Acceptance of the consequences prior to leaving for college

### **Learning objectives:**

After this presentation attendees will be able to:

1. Describe considerations for determining college choices
2. Apply the Zone program with clients
3. Discuss what resources are offered at local colleges and how to create a treatment team

### **Professional Peer Review and Clinical Text Resources and Citations:**

1. Ackard, D., Brehm, B., & Steffen, J. (2002). Exercise and eating disorders in college-aged women: Profiling excessive exercisers. *Eating Disorders*. 10:31-47.

2. Bryant, J., Darkes, J., & Rahal. (2012). College students' compensatory eating and behaviors in response to alcohol consumption. *J. Am. Coll Health*. 60(5): 350-356.
3. Byrne, M., Eichen, D., Fitzsimmon-Craft, E., Barr Taylor, C. & Wilfley, D. (2016). Perfectionism, emotion regulation, and affective disturbance in relation to clinical impairment in college-age women at high risk for or with an eating disorder. *Eating Behaviors*. 23(131-6).
4. Eisenberg, D., Nicklett, D., Roeder, K, & Kirz, N. (2011). Eating disorder symptoms among college students: Prevalence, persistence, correlates, and treatment-seeking. *J. Am Coll Health*. 59(8): 700-7.
5. Franko, D.L., & Keel, P.K. (2006) Suicidality in eating disorders: occurrence, correlates, and clinical implications. *Clinical Psychology Review*. Oct;26(6):769-82.
6. Gadalla, T., & Piran, N. (2007). Co-occurrence of eating disorders and alcohol use disorders in women: A meta analysis. *Archives of Women's Mental Health*, 10, 133–140
7. Giel, K., Hermann-Werner, A., Mayer, J., Diehl, K., Schneider, S., Thiel, A., & Zipfel, S. (2016). Eating disorder pathology in elite adolescent athletes. *Int J Eat Disord*. 49(553-562).
8. Havighurst, R. (1972). *Developmental Tasks and Education, 3d ed.* David McKay Company, Inc., a division of Random House, New York. N.Y
9. Keel, (2003). Predictors of mortality in eating disorders. *Archives of General Psychiatry*. Feb;60(2):179-83.
10. National Eating Disorder Association. (2013). *Eating Disorders on the College Campus: a national survey of programs and resources*.
11. Zagorsky, J. & Smith, P. (2011). The freshman 15: A critical time for obesity intervention or media myth? *Social Science Quarterly*. 92(5) 1389-1407.

**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.



**Format:**

Live Presentation

**Date:**

June 7, 2019

**Time:**

10:15am -11:45am

**CE credits for this presentation:**

1.5 CE credits for this presentation within an 8.75 hour event

**Type:**

Lecture, interactive with Question and Answer

**Training For:**

Staff of Hospitals, Medical Centers, Mental Health Clinics: General Medicine Physicians, Psychiatrists, APRN's, Psychologists, Counselors, Substance abuse counselors, Dietitians, Nurses, Mental Health Technicians

**Presenters:**

Rhonda O'Brien, MS, RD, LD, CDE, CEDRD

**Presentation Title:**

"I Need to Lose Weight" - Tips and Tools for Using a Non-Diet Approach With Your Patients Who Are Chronic Dieters

**Brief Description of Presentation:**

In this presentation, the current statistics on weight loss dieting will be reviewed and the detrimental nature of dieting behavior explained. A weight neutral, health-centered, non-diet approach will be introduced and the key differences between this approach and traditional weight loss dieting will be outlined. The important role of the health care professional in

working with chronic dieters will be emphasized and specific strategies to use with clients will be described.

### **Outline:**

#### **I. Introduction**

We live in a culture that is overly focused on body shape and size, and that encourages manipulation of one's food intake in an attempt to achieve an unrealistic ideal. The cycle of chronic dieting is detrimental to one's physical and emotional health<sup>1</sup>, and at its worst, can contribute to the incidence of disordered eating and eating disorders. Dieting behavior is so widespread and normalized that it can be difficult for our clients to determine what's healthy and what's not.

#### **II. Body**

Recent years have seen an increase in the realization that weight loss dieting doesn't result in sustained weight loss or improved health in the vast majority of cases. The Health at Every Size paradigm and the non-diet approach have both seen rapid growth and support from health professionals in the past decade. Though it's relatively young in terms of research, this approach is showing promise as an alternative to traditional dieting. Studies are showing that individuals can improve their health and well-being without riding the shame-inducing, and ultimately futile diet roller coaster<sup>2,3,4,5</sup>. There are several strategies<sup>6,7</sup> that can be implemented with clients who are chronic dieters, to help them develop more trust in their bodies and a more peaceful relationship with food.

#### **III. Conclusion**

A non-diet approach is a positive, health enhancing alternative to restrictive dieting. Professionals in the field of eating disorders are in an excellent position to share this approach with their clients who are tired of the diet-binge cycle and ready to exit the dieting roller coaster.

### **Learning objectives:**

After this presentation attendees will be able to:

1. List 3 negative consequences of chronic dieting.
2. Describe the differences between a weight-focused versus a weight-neutral approach to health.
3. Identify 3 strategies or tools they can use to help clients move away from diets and toward a non-diet approach to their health and well-being.

### **Professional Peer Review and Clinical Text Resources and Citations:**

1. Tomiyaya, A. J., Ahlstrom, B., Mann, T. (2013). Long Term Effects of Dieting: Is Weight Loss Related to Health? *Social and Personality Psychology Compass*. 7/12: 861–877.
2. Tylka, T., Annunziato, R., Burgard, D., Danielsdottir, D., Shuman, E., Davis, C., Calogero, R. (2014). The Weight-Inclusive versus Weight-Normative Approach to Health: Evaluating the Evidence for Prioritizing Well-Being over Weight Loss. *Journal of Obesity*. Article ID 983495.

3. Matheson, E., King, D., Everett, C. (2012). Healthy Lifestyle Habits and Mortality in Overweight and Obese Individuals. *Journal of the American Board of Family Medicine*. 2012, 25(1): 9-15.
4. Bacon, L., Aphramor, L. (2011). Weight Science: Evaluating the Evidence for a Paradigm Shift. *Nutrition Journal*. 10:9.
5. [Gagnon-Girouard](#), M., [Bégin](#), C., [Provencher](#), V., [Tremblay](#), A., [Mongeau](#), L., [Boivin](#), S., and Lemieux, [S.](#) (2010). Psychological Impact of a “Health-at-Every-Size” Intervention on Weight-Preoccupied Overweight/Obese Women. *Journal of Obesity*, Volume 2010, Article ID 928097.
6. Willer, F., (2013). *The Non-Diet Approach Guidebook for Dietitians*. Lulu Publishing.
7. Hirschmann, J., and Munter, C. (2008). *Overcoming Overeating*. OO Publishing.

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Lecture, interactive with Question and Answer

**Training For:**

Staff of Hospitals, Medical Centers, Mental Health Clinics: General Medicine Physicians, Psychiatrists, APRN's, Psychologists, Counselors, Substance abuse counselors, Dietitians, Nurses, Mental Health Technicians

**Presenters:**

Reid Robison, MD MBA

**Presentation Title:**

*"Evidence-based Medical & Psychiatric Care for Eating Disorders: What We Know and Where We're Headed"*

**Brief Description of Presentation:**

Eating Disorders are serious mental illnesses thought to arise from a combination of genetic factors and complex biopsychosocial factors. They are characterized by persistent disorder eating behavior patterns, leading to impairment in physical and emotional health. This presentation will review the etiology of Eating Disorders, challenges in the diagnosis and assessment of Eating Disorders, and evidence-based treatment strategies. Special emphasis will be placed on neurobiological changes seen in Eating Disorders, and the prudent use of

psychiatric medications in the treatment of these conditions. We will also discuss evidence-based strategies for treating co-morbid mental health issues in individuals with Eating Disorders, such as depression, anxiety, OCD, PTSD and substance abuse. Preliminary data will be presented from an ongoing IRB approved research study at Center for Change investigating the use of ketamine for treatment-resistant depression in this population.

**Outline:**

1. Eating Disorder Etiology (Nature and Nurture, a perfect storm of complex biopsychosocial issues)
2. Epidemiology & Co-morbidities
3. Diagnosing Eating Disorders
4. Treating Eating Disorders (Evidence-based strategies and novel approaches)

**Learning objectives:**

After this presentation attendees will be able to:

1. Describe the role of genetics in the etiology of eating disorders
2. Describe brain-changes seen in individuals with eating disorders, and understand the distinction between inherited traits predisposing to these conditions, and brain-based sequelae of Eating Disorders
3. Apply evidence-based treatment strategies for Eating Disorders and co-occurring mental health conditions in treatment

**Professional Peer Review and Clinical Text Resources and Citations:**

1. Allen KL, Byrne SM, Oddy WH, Crosby RD. DSM-IV-TR and DSM-5 eating disorders in adolescents: prevalence, stability, and psychosocial correlates in a population-based sample of male and female adolescents. *J Abnorm Psychol* 2013; 122:720–732.423423
2. Mills IH, Park GR, Manara AR, Merriman RJ. Treatment of compulsive behaviour in eating disorders with intermittent ketamine infusions. *QJM*. 1998 Jul;91(7):493-503.
3. Smink FRE, van Hoeken D, Hoek HW. Epidemiology, course, and outcome of eating disorders. *Curr Opin Psychiatry* 2013; 26:543–548.
4. Wade TD, Bulik CM, Neale M, Kendler KS. Anorexia nervosa and major depression: shared genetic and environmental risk factors. *Am J Psychiatry* 2000; 157:469–471
5. Campbell, K. & Peebles, R. Eating disorders in children and adolescents: state of the art review. *Pediatrics* 2014; 134:582–592.

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**Format:**

Live Presentation

**Date:**

June 7, 2019

**Time:**

2:30pm -4:30pm

**CE credits for this presentation:**

2 CE credits for this presentation within an 8.75 hour event

**Type:**

Lecture, interactive with Question and Answer

**Training For:**

Staff of Hospitals, Medical Centers, Mental Health Clinics: General Medicine Physicians, Psychiatrists, APRN's, Psychologists, Counselors, Substance abuse counselors, Dietitians, Nurses, Mental Health Technicians

**Presenters:**

Lindsey Ricciardi, PhD

**Presentation Title:**

"Acceptance and Change Strategies in Eating Disorder Treatments"

**Brief Description of Presentation:**

Eating disorders are complex, multifaceted, biopsychosocial psychiatric illnesses. Individuals with eating disorders face many obstacles obtaining accurate diagnosis and effective treatment. Outpatient clinicians are at the front line and can improve awareness, prevention, identification and effective intervention for eating concerns across all levels of severity, both in their own offices as well as in their communities (Lock & La Via, 2015). With regards to interventions, there are important differences in outpatient psychotherapy with eating disorders verses working in higher levels of care. These differences will be addressed as they

have large implications for the focus of therapy sessions and hierarchy of treatment targets. This talk will review key components and skills utilized in cognitive behavioral therapy (CBT), dialectical behavior therapy (DBT), and acceptance and commitment therapy (ACT). Individuals with eating disorders report more difficulty regulating mood states than healthy controls (Harrison et al. 2010). Each of these approaches are rooted in the philosophy that maladaptive behaviors become overlearned strategies to avoid/tolerate difficult mood states. While behavioral change is a primary goal, acceptance strategies can be extremely beneficial in promoting such change.

### **Outline:**

#### I. There is a need for improved knowledge, skills and competency in eating disorders

- a. Where are the gaps in eating disorder detection and early intervention?
- b. How can we improve awareness, prevention, early assessment (Lock and La Via, 2015)

#### II. Overview of evidence-based, outpatient eating disorder treatments

- a. Why treatment targets and approaches will vary by level of care
- b. Importance of addressing emotion regulation to facilitate behavior change in eating disorders (Harrison, Sullivan, Tchanturia, & Treasure, J., 2010; Haynos and Fruzzetti, 2011)
- c. Description of specific acceptance- based or change-based interventions and skills
- d. How and when to apply specific acceptance versus change skills in eating disorder intervention (Fairburn et al., Bailey-Straebl, Basden, Doll, Jones, et al., 2015, Haynos, Forman, Butryn, & Lillis, 2016)

#### V. Questions and discussion

### **Learning objectives:**

After this presentation attendees will be able to:

1. Describe the many obstacles interfering with prevention, early assessment and intervention with eating disorders, the implications of these missed opportunities, and ways to address these obstacles on micro and macro levels.
2. List the differences between outpatient psychotherapy settings versus higher levels of care and how this impacts treatment hierarchy and therapeutic approaches.
3. Explain the function of practical, evidence based, acceptance- and change- based interventions and will be able to utilize these approaches to empower patients with eating concerns towards more effective ways of coping.

### **Professional Peer Review and Clinical Text Resources and Citations:**

1. Fairburn, C. F., Bailey-Straebl, S., Basden, S. Doll, H. A., Jones, R. et al. (2015). A transdiagnostic comparison of enhanced cognitive behaviour therapy (CBT-E) and interpersonal

psychotherapy in the treatment of eating disorders. *Behaviour Research and Therapy*, 70, 64-71, doi.org/10.1016/j.brat.2015.04.010.

2. Harrison, A., Sullivan, S., Tchanturia, K., & Treasure, J. (2010). Emotional functioning in eating disorders: Attentional bias, emotion recognition and emotion regulation. *Psychological Medicine*, 40, 1887–1897. doi:10.1017/S0033291710000036.
3. Haynos, A. F., Forman, E. M., Butryn, M. L., & Lillis, J. (2016). *Mindfulness and acceptance for treating eating disorders and weight concerns: Evidence-based interventions*. Oakland, CA: Context Press.
4. Haynos, A. F. and Fruzzetti, A. E. (2011), Anorexia Nervosa as a Disorder of Emotion Dysregulation: Evidence and Treatment Implications. *Clinical Psychology: Science and Practice*, 18: 183-202. doi:10.1111/j.1468-2850.2011.01250.x
5. Lock, J., La Via, (2015). Practice Parameter for the Assessment and Treatment of Children and Adolescents With Eating Disorders, *Journal of the American Academy of Child & Adolescent Psychiatry*, 54(5), 412 – 425. doi.org/10.1016/j.jaac.2015.01.018

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**Center for Change Boise Eating Disorders Conference for Professionals  
Boise, ID  
June 7, 2019**

**Presentations:**

*Creating Structure and Readiness for College Life: Considerations for Students with an Eating Disorder*

**– Melissa Taylor, LMFT, CEDS-S & Lauren Flores, MFT**

College is an exciting time, a rite of passage for most teenagers. For those who have struggled with an eating disorder, college can be a dilemma. Should the student go away from home or should they stay close to their family and treatment team? Should the student choose a university setting or a smaller liberal arts or community college? Is the family ready to support the student from a distance or does the family need to be closer to offer the most effective support? Is the student ready for college life and all its complexities? This presentation will explore readiness, choices, and discuss how to prepare the student and the family for college life. Other topics such as how to set up parameters for wellness while at college and how to find a treatment team at college will be discussed.

*“I Need to Lose Weight”: Tips & Tools for Using a Non-Diet Approach With Chronic Dieters*

**– Rhonda O’Brien, MS, RD, LD, CDE, CEDRD**

In this presentation, the current statistics on weight loss dieting will be reviewed and the detrimental nature of dieting behavior explained. A weight neutral, health-centered, non-diet approach will be introduced and the key differences between this approach and traditional weight loss dieting will be outlined. The important role of the health care professional in working with chronic dieters will be emphasized and specific strategies to use with clients will be described.

*Evidence-based Medical & Psychiatric Care for Eating Disorders: What We Know and Where We’re Headed*

**– Reid Robison, MD**

Eating Disorders are serious mental illnesses thought to arise from a combination of genetic factors and complex biopsychosocial factors. They are characterized by persistent disordered eating behavior patterns, leading to impairment in physical and emotional health. This presentation will review the etiology of Eating Disorders, challenges in the diagnosis and assessment of Eating Disorders, and evidence-based treatment strategies. Special emphasis will be placed on neurobiological changes seen in Eating Disorders, and the prudent use of psychiatric medications in the treatment of these conditions. We will also discuss evidence-based strategies for treating comorbid mental health issues in individuals with Eating Disorders, such as depression, anxiety, OCD, PTSD and substance abuse. Preliminary data will be presented from an ongoing IRB approved research study at Center for Change investigating the use of ketamine for treatment-resistant depression in this population.

*Acceptance and Change Strategies for Eating Disorder Recovery*

**– Key Note Speaker – Lindsey Ricciardi, PhD**

Eating disorders are complex, multifaceted, biopsychosocial psychiatric illnesses. Individuals with eating disorders face many obstacles obtaining accurate diagnosis and effective treatment. Outpatient clinicians are at the front line and can improve awareness, prevention, identification and effective intervention for eating concerns across all levels of severity, both in their own offices as well as in their communities. With regards to interventions, there are important differences in outpatient psychotherapy with eating disorders verses working in higher levels of care. These differences will be addressed as they have large implications for the focus of therapy sessions and hierarchy of treatment targets. This talk will review key components and skills utilized in cognitive behavioral therapy (CBT), dialectical behavior therapy (DBT), and acceptance and commitment therapy (ACT). Each of these approaches are rooted in the philosophy that maladaptive behaviors become overlearned strategies to avoid/tolerate difficult mood states. While behavioral change is a primary goal, acceptance strategies can be extremely beneficial in promoting such change.



**Center for Change Boise Eating Disorders Conference for Professionals  
Boise, ID  
June 7, 2019**

**About the Presenters:**

**Melissa Taylor, LMFT, CEDS-S**

Melissa Taylor graduated from the University of Kentucky with a master's in Marriage and Family Therapy. She learned early on in her career that she loved working in the eating disorder recovery field. Melissa speaks across the country to professionals and community members about eating disorder treatment and recovery, while also carrying a case load of her own at Center for Change. She is a Certified Eating Disorder Specialist-Supervisor (CEDS-S), a certification granted by the International Association of Eating Disorder Professionals. Melissa is the Director of Outpatient Services at Center for Change, and oversees the Partial Hospitalization and Intensive Outpatient Programs as well as the Outpatient Clinics at Center for Change's Orem, Utah, Cottonwood Heights, Utah and Boise, Idaho locations.

**Lauren Flores, MFT**

Lauren Flores, MFT received her Master's Degree from an Adlerian Therapy program and is a registered marriage and family therapist. She is passionate about working with families and recognizes that the entire system is impacted when one person suffers from mental illness. Lauren is a part-time Clinical Therapist at the Center for Change in Boise and she also has a private practice in the area.

**Rhonda O'Brien, MS, RD, LD, CDE, CEDRD**

Rhonda O'Brien has worked as a Registered Dietitian for over 30 years, and has a private practice in Boise, where she specializes in working with people with all types of eating disorders and disordered eating. She has been a Certified Diabetes Educator since 1992 and a Certified Eating Disorders Registered Dietitian since 2012. Rhonda is an IAEDP approved supervisor. Having been introduced to a non-diet and Health At Every Size paradigm early in her career, Rhonda has incorporated these principles into her work with clients and never looked back.

**Reid Robison, MD, MBA**

Reid Robison, MD, MBA is a psychiatrist & Medical Director at Center for Change. He has fellowship training in genetics and biomedical informatics, and has published over 25 peer-reviewed articles, and led over 50 clinical trials of medications for neuropsychiatric conditions (including ketamine for treatment-resistant depression). After joining the faculty at University of Utah, Reid served as Medical Director of Consultation Psychiatry at Intermountain Medical Center. He is also founder of the Polizzi Free Clinic, and built and sold a number of healthcare companies, including Tute Genomics, a venture-backed personalized medicine company. Reid is focused on the treatment of Eating Disorders, and co-occurring mental health conditions, and is a firm believer that inside every person, no matter where they are in their journey, is an inextinguishable light, and the capability for healing, connection and a fulfilling life.

**Key Note Speaker – Lindsey Ricciardi, PhD**

Dr. Lindsey Ricciardi has been involved in eating disorder research, clinical practice, and education for 18 years. She completed her internship and fellowship at the University of Chicago Hospitals Department of Psychiatry Eating and Weight Disorders Program and has been the clinical director of two multidisciplinary outpatient eating disorder programs during her career. She is certified in Family Based Treatment for eating disorders and has been comprehensively trained in the application of Dialectical Behavior Therapy and Cognitive Behavior Therapy to eating disorders. Dr. Ricciardi has worked with hundreds of clients with various types of eating disorders across the age, gender, weight, ethnic, and socioeconomic spectrum. She is passionate about educating others about eating disorders and continues to serve as adjunct faculty at UNLV in the Department of Clinical Psychology. She is currently in private practice in Las Vegas specializing in providing individualized, evidence based interventions for eating disorders.