WEBVTT

NOTE duration:"00:47:14" NOTE recognizability:0.855

NOTE language:en-us

NOTE Confidence: 0.8638146

 $00:00:00.000 \longrightarrow 00:00:02.778$ OK. So whenever I'm giving

NOTE Confidence: 0.8638146

 $00:00:02.778 \longrightarrow 00:00:04.188$ a talk on this topic,

NOTE Confidence: 0.8638146

 $00:00:04.190 \dashrightarrow 00:00:06.591$ I always start with this image. For

NOTE Confidence: 0.8638146

 $00:00:06.591 \longrightarrow 00:00:09.169$ any folks that are in mental health,

NOTE Confidence: 0.8638146

 $00:00:09.170 \longrightarrow 00:00:11.174$ whether working in clinic based settings

NOTE Confidence: 0.8638146

00:00:11.174 --> 00:00:13.749 and your own practice in our school systems,

NOTE Confidence: 0.8638146

 $00:00:13.750 \longrightarrow 00:00:15.630$ you've probably encountered these

NOTE Confidence: 0.8638146

 $00:00:15.630 \dashrightarrow 00:00:18.347$ silos that that come up often with

NOTE Confidence: 0.8638146

 $00:00:18.347 \longrightarrow 00:00:19.837$ complex presentations in adolescents

NOTE Confidence: 0.8638146

 $00{:}00{:}19.837 \dashrightarrow 00{:}00{:}22.420$ and to I think Wendy's point in

NOTE Confidence: 0.8638146

 $00{:}00{:}22.487 \dashrightarrow 00{:}00{:}24.629$ younger youth as well of treatments

NOTE Confidence: 0.8638146

 $00:00:24.629 \longrightarrow 00:00:26.859$ being quite siloed for one another.

NOTE Confidence: 0.8638146

 $00:00:26.860 \longrightarrow 00:00:29.284$ And I think that we've seen

 $00:00:29.284 \longrightarrow 00:00:30.900$ it really that epitomized

NOTE Confidence: 0.8638146

 $00{:}00{:}30.900 \dashrightarrow 00{:}00{:}32.844$ in eating disorder care which I'll

NOTE Confidence: 0.8638146

 $00:00:32.844 \longrightarrow 00:00:34.954$ talk more about down the line is

NOTE Confidence: 0.8638146

 $00:00:34.954 \longrightarrow 00:00:36.697$ how it's become kind of such a

NOTE Confidence: 0.8638146

00:00:36.759 --> 00:00:38.499 niche area that it's often something

NOTE Confidence: 0.8638146

 $00:00:38.499 \longrightarrow 00:00:40.788$ that a lot of providers, unless it's

NOTE Confidence: 0.8638146

00:00:40.788 --> 00:00:43.044 been a specialty area of training,

NOTE Confidence: 0.8638146

 $00:00:43.044 \longrightarrow 00:00:45.235$ maybe have some tentativeness

NOTE Confidence: 0.8638146

 $00:00:45.235 \longrightarrow 00:00:47.425$ with with approaching and managing.

NOTE Confidence: 0.8638146

00:00:47.430 --> 00:00:49.726 And so we're hoping and talking about

NOTE Confidence: 0.8638146

 $00{:}00{:}49.726 \dashrightarrow 00{:}00{:}51.442$ these complex adolescents where

NOTE Confidence: 0.8638146

00:00:51.442 --> 00:00:54.114 this is often one component of a multi

NOTE Confidence: 0.8638146

 $00:00:54.179 \longrightarrow 00:00:55.779$ component presentation thinking about

NOTE Confidence: 0.8638146

00:00:55.779 --> 00:00:58.528 how best to navigate when you have

NOTE Confidence: 0.8638146

00:00:58.528 --> 00:01:01.312 a patient or a student or anyone

NOTE Confidence: 0.8638146

 $00:01:01.320 \longrightarrow 00:01:03.294$ raising some of these concerns and

 $00:01:03.294 \longrightarrow 00:01:05.260$ what's the right way to go?

NOTE Confidence: 0.8638146

00:01:05.260 --> 00:01:06.330 Because I think right now,

NOTE Confidence: 0.8638146

 $00:01:06.330 \longrightarrow 00:01:06.596$ again,

NOTE Confidence: 0.8638146

 $00:01:06.596 \longrightarrow 00:01:08.458$ with the siloed nature of care and

NOTE Confidence: 0.8638146

 $00:01:08.458 \longrightarrow 00:01:10.600$ such an uptick in cases as many

NOTE Confidence: 0.8638146

00:01:10.600 --> 00:01:12.150 of you have probably encountered,

NOTE Confidence: 0.8638146

 $00:01:12.150 \longrightarrow 00:01:14.318$ referrals to eating disorder

NOTE Confidence: 0.8638146

00:01:14.318 --> 00:01:17.028 specialists are often quite lengthy

NOTE Confidence: 0.8638146

 $00:01:17.028 \longrightarrow 00:01:19.517$ in terms of the wait list.

NOTE Confidence: 0.8638146

 $00:01:19.520 \longrightarrow 00:01:21.914$ So why has this become so siloed?

NOTE Confidence: 0.8638146

 $00{:}01{:}21.920 \dashrightarrow 00{:}01{:}24.566$ I wish I had a a very clear straightforward

NOTE Confidence: 0.8638146

 $00:01:24.566 \longrightarrow 00:01:26.360$ addressable answer for everybody today,

NOTE Confidence: 0.8638146

 $00{:}01{:}26.360 \dashrightarrow 00{:}01{:}28.040$ but it really has for some reason

NOTE Confidence: 0.8638146

 $00{:}01{:}28.040 \dashrightarrow 00{:}01{:}29.058$ eating disorders have become

NOTE Confidence: 0.8638146

00:01:29.058 --> 00:01:30.552 this niche area and mental health

 $00:01:30.552 \longrightarrow 00:01:32.218$ training as well as medical training.

NOTE Confidence: 0.8638146

 $00{:}01{:}32.220 \dashrightarrow 00{:}01{:}34.089$ So when I talk with my colleagues

NOTE Confidence: 0.8638146

00:01:34.089 --> 00:01:35.677 in the pediatric hospital in

NOTE Confidence: 0.8638146

00:01:35.677 --> 00:01:37.137 adolescent medicine for this,

NOTE Confidence: 0.8638146

 $00:01:37.140 \longrightarrow 00:01:38.416$ they talk about that,

NOTE Confidence: 0.8638146

 $00:01:38.416 \longrightarrow 00:01:40.330$ that same experience of that it's

NOTE Confidence: 0.8638146

 $00:01:40.389 \longrightarrow 00:01:42.999$ kind of you do eating disorders or you don't,

NOTE Confidence: 0.8638146

 $00:01:43.000 \longrightarrow 00:01:44.968$ which has really led to again,

NOTE Confidence: 0.8638146

 $00{:}01{:}44.968 \dashrightarrow 00{:}01{:}47.584$ despite the fact that we often see

NOTE Confidence: 0.8638146

00:01:47.584 --> 00:01:49.236 co-occurring depression, anxiety,

NOTE Confidence: 0.863814600:01:49.240 --> 00:01:49.624 Um,

NOTE Confidence: 0.8638146

 $00:01:49.624 \longrightarrow 00:01:51.928$ other self injurious behaviors and number

NOTE Confidence: 0.8638146

00:01:51.928 --> 00:01:54.170 of concerning kind of presentations,

NOTE Confidence: 0.8638146

 $00:01:54.170 \longrightarrow 00:01:55.160$ it becomes this,

NOTE Confidence: 0.8638146

 $00:01:55.160 \longrightarrow 00:01:57.140$ this separate thing that we treat.

NOTE Confidence: 0.871179726428571

 $00:01:59.470 \longrightarrow 00:02:02.008$ So before going into a lot of those complex

00:02:02.008 --> 00:02:03.589 comorbidities and thinking about today,

NOTE Confidence: 0.871179726428571

 $00:02:03.590 \longrightarrow 00:02:05.606$ we're really talking about meeting the

NOTE Confidence: 0.871179726428571

 $00:02:05.606 \longrightarrow 00:02:08.432$ needs of of adolescents and I want to hit

NOTE Confidence: 0.871179726428571

 $00:02:08.432 \longrightarrow 00:02:10.211$ on some really important factors related

NOTE Confidence: 0.871179726428571

 $00:02:10.211 \longrightarrow 00:02:12.515$ to identity that are misrepresented when

NOTE Confidence: 0.871179726428571

 $00:02:12.515 \longrightarrow 00:02:14.526$ we're thinking about eating disorder

NOTE Confidence: 0.871179726428571

 $00:02:14.526 \longrightarrow 00:02:16.586$ treatment as well and assessment.

NOTE Confidence: 0.871179726428571

 $00{:}02{:}16.590 \dashrightarrow 00{:}02{:}18.582$ So I invite everyone here just to think

NOTE Confidence: 0.871179726428571

 $00{:}02{:}18.582 \dashrightarrow 00{:}02{:}20.597$ about what image comes to mind when you

NOTE Confidence: 0.871179726428571

 $00:02:20.597 \longrightarrow 00:02:22.603$ hear the term eating disorder and I show

NOTE Confidence: 0.871179726428571

00:02:22.603 --> 00:02:24.371 here the images that, when you Google

NOTE Confidence: 0.871179726428571

 $00:02:24.371 \longrightarrow 00:02:27.080$ it, are the first ones that come up and

NOTE Confidence: 0.871179726428571

 $00{:}02{:}27.155 \dashrightarrow 00{:}02{:}29.567$ and yes these are presentations

NOTE Confidence: 0.871179726428571

 $00:02:29.570 \longrightarrow 00:02:32.080$ of adolescent and young adults, white

NOTE Confidence: 0.871179726428571

 $00:02:32.080 \longrightarrow 00:02:35.080$ females that are experiencing low weight.

 $00:02:35.080 \longrightarrow 00:02:36.784$ But there's this very clear idea

NOTE Confidence: 0.871179726428571

 $00{:}02{:}36.784 \dashrightarrow 00{:}02{:}38.930$ of when you say eating disorder,

NOTE Confidence: 0.871179726428571

 $00:02:38.930 \longrightarrow 00:02:39.578$ what it looks like.

NOTE Confidence: 0.871179726428571

 $00:02:39.578 \longrightarrow 00:02:40.798$ And now I don't think that this

NOTE Confidence: 0.871179726428571

 $00:02:40.798 \longrightarrow 00:02:41.828$ is limited to eating disorder.

NOTE Confidence: 0.871179726428571

 $00:02:41.830 \longrightarrow 00:02:44.358$ I think to the point in both Michael

NOTE Confidence: 0.871179726428571

 $00{:}02{:}44.358 \longrightarrow 00{:}02{:}46.739$ and Youngsun's talk of hitting on

NOTE Confidence: 0.871179726428571

 $00:02:46.739 \longrightarrow 00:02:48.877$ of some of the different groups

NOTE Confidence: 0.871179726428571

 $00{:}02{:}48.877 \dashrightarrow 00{:}02{:}51.181$ that are kind of unduly affected

NOTE Confidence: 0.871179726428571

 $00:02:51.181 \longrightarrow 00:02:53.596$ by depression and suicidality,

NOTE Confidence: 0.871179726428571

 $00{:}02{:}53.596 \dashrightarrow 00{:}02{:}56.736$ we often have a misrepresentation.

NOTE Confidence: 0.871179726428571

 $00:02:56.740 \longrightarrow 00:02:59.008$ So in reality we know that feeding

NOTE Confidence: 0.871179726428571

 $00:02:59.008 \longrightarrow 00:03:00.787$ and eating disorders are complex

NOTE Confidence: 0.871179726428571

 $00:03:00.787 \longrightarrow 00:03:01.900$ and heterogeneous presentations

NOTE Confidence: 0.871179726428571

 $00{:}03{:}01.900 \longrightarrow 00{:}03{:}04.936$ that a lot of times couldn't be more

NOTE Confidence: 0.871179726428571

 $00:03:04.936 \longrightarrow 00:03:06.420$ different from one another.

00:03:06.420 --> 00:03:09.269 Now despite we lump all eating

NOTE Confidence: 0.871179726428571

 $00:03:09.269 \longrightarrow 00:03:11.259$ disorders into this one camp,

NOTE Confidence: 0.871179726428571

 $00{:}03{:}11.260 \dashrightarrow 00{:}03{:}12.982$ a lot of times the co-occurring

NOTE Confidence: 0.871179726428571

 $00:03:12.982 \longrightarrow 00:03:14.612$ concerns and the presentations and

NOTE Confidence: 0.871179726428571

 $00:03:14.612 \longrightarrow 00:03:16.276$ what we're addressing the rapeutically

NOTE Confidence: 0.871179726428571

 $00:03:16.276 \longrightarrow 00:03:18.593$ are more overlapping with non-eating

NOTE Confidence: 0.871179726428571

 $00:03:18.593 \longrightarrow 00:03:20.083$ disorder presentations and we'll hit

NOTE Confidence: 0.871179726428571

 $00:03:20.083 \longrightarrow 00:03:22.850$ on some of that of when we're thinking

NOTE Confidence: 0.871179726428571

 $00{:}03{:}22.850 \dashrightarrow 00{:}03{:}25.718$ about what to keep an eye out for.

NOTE Confidence: 0.871179726428571

 $00{:}03{:}25.720 \dashrightarrow 00{:}03{:}28.411$ So I pop up here the DSM or diagnostic

NOTE Confidence: 0.871179726428571

00:03:28.411 --> 00:03:30.264 manual's definition of eating and

NOTE Confidence: 0.871179726428571

 $00:03:30.264 \longrightarrow 00:03:32.490$ feeding disorders to just hit on

NOTE Confidence: 0.871179726428571

 $00{:}03{:}32.555 \dashrightarrow 00{:}03{:}35.051$ how broad it ends up being and what

NOTE Confidence: 0.871179726428571

 $00:03:35.051 \longrightarrow 00:03:37.310$ we're having to consider and or what

NOTE Confidence: 0.871179726428571

 $00:03:37.310 \longrightarrow 00:03:38.940$ we're thinking about with feeding

 $00:03:39.006 \longrightarrow 00:03:40.209$ and eating disorders.

NOTE Confidence: 0.871179726428571

 $00{:}03{:}40.210 \dashrightarrow 00{:}03{:}42.376$ So in essence to meet criteria,

NOTE Confidence: 0.871179726428571

00:03:42.380 --> 00:03:44.800 a persistence disturbance in eating

NOTE Confidence: 0.871179726428571

 $00:03:44.800 \longrightarrow 00:03:47.137$ or eating related behaviors that results

NOTE Confidence: 0.871179726428571

 $00:03:47.137 \longrightarrow 00:03:49.916$ in an altered consumption of food and

NOTE Confidence: 0.871179726428571

00:03:49.916 --> 00:03:51.292 significantly impairs functioning,

NOTE Confidence: 0.871179726428571

 $00:03:51.292 \longrightarrow 00:03:53.376$ either physical or psychosocial.

NOTE Confidence: 0.871179726428571

 $00:03:53.380 \longrightarrow 00:03:56.124$ So in essence if it's clinically significant and

NOTE Confidence: 0.871179726428571

 $00:03:56.130 \longrightarrow 00:03:57.228$ it has to do with food,

NOTE Confidence: 0.871179726428571

 $00:03:57.230 \longrightarrow 00:03:58.609$ then it it fits in that camp.

NOTE Confidence: 0.871179726428571

 $00{:}03{:}58.610 {\:{\circ}{\circ}{\circ}}>00{:}04{:}01.714$ So you can imagine the variety of what

NOTE Confidence: 0.871179726428571

 $00:04:01.714 \longrightarrow 00:04:04.550$ that means and what that looks like.

NOTE Confidence: 0.871179726428571

00:04:04.550 --> 00:04:06.636 Hitting some on then to that point

NOTE Confidence: 0.871179726428571

 $00:04:06.636 \longrightarrow 00:04:08.678$ of the diversity that we actually

NOTE Confidence: 0.871179726428571

 $00:04:08.678 \longrightarrow 00:04:10.488$ see an eating disorder presentations

NOTE Confidence: 0.871179726428571

 $00:04:10.488 \longrightarrow 00:04:12.767$ based on a number of aspects of

00:04:12.767 --> 00:04:14.545 identity and again that image

NOTE Confidence: 0.871179726428571

 $00:04:14.545 \longrightarrow 00:04:15.970$ that often comes to mind,

NOTE Confidence: 0.871179726428571

 $00{:}04{:}15.970 \dashrightarrow 00{:}04{:}18.292$ these are some prevalence rates that

NOTE Confidence: 0.871179726428571

00:04:18.292 --> 00:04:21.454 have been put forward by both the

NOTE Confidence: 0.871179726428571

 $00{:}04{:}21.454 \dashrightarrow 00{:}04{:}23.963$ National Eating Disorder Association as

NOTE Confidence: 0.871179726428571

 $00:04:23.963 \longrightarrow 00:04:29.989$ well as the association for or the ANAD.

NOTE Confidence: 0.871179726428571

 $00:04:29.990 \longrightarrow 00:04:32.480$ So we actually see that BIPOC

NOTE Confidence: 0.871179726428571

 $00{:}04{:}32.480 \dashrightarrow 00{:}04{:}34.140$ individuals are significantly less

NOTE Confidence: 0.871179726428571

 $00:04:34.140 \longrightarrow 00:04:35.725$ likely than their white counterparts

NOTE Confidence: 0.871179726428571

 $00:04:35.725 \longrightarrow 00:04:37.810$ to have been asked by a provider

NOTE Confidence: 0.871179726428571

 $00{:}04{:}37.810 \dashrightarrow 00{:}04{:}39.586$ about eating disorder symptoms.

NOTE Confidence: 0.871179726428571

 $00:04:39.590 \longrightarrow 00:04:41.846$ This is even in the context of when

NOTE Confidence: 0.871179726428571

 $00{:}04{:}41.846 \dashrightarrow 00{:}04{:}43.889$ self reporting eating disorder concerns.

NOTE Confidence: 0.871179726428571

 $00{:}04{:}43.890 \dashrightarrow 00{:}04{:}45.934$ So raising this to think about the

NOTE Confidence: 0.871179726428571

 $00:04:45.934 \longrightarrow 00:04:47.856$ students that you may be working with

 $00:04:47.856 \longrightarrow 00:04:50.138$ in some of just the data that we have

NOTE Confidence: 0.871179726428571

 $00{:}04{:}50.138 \dashrightarrow 00{:}04{:}52.375$ of how some of these things can be

NOTE Confidence: 0.871179726428571

 $00{:}04{:}52.375 \dashrightarrow 00{:}04{:}55.405$ missed in different systems of care.

NOTE Confidence: 0.857243292631579

 $00:04:55.410 \longrightarrow 00:04:57.125$ BIPOC individuals are half as

NOTE Confidence: 0.857243292631579

 $00:04:57.125 \longrightarrow 00:04:59.493$ likely to be diagnosed or receive

NOTE Confidence: 0.857243292631579

 $00:04:59.493 \longrightarrow 00:05:01.825$ treatment when experiencing clinically

NOTE Confidence: 0.857243292631579

 $00:05:01.825 \longrightarrow 00:05:04.157$ significant eating disorder concerns.

NOTE Confidence: 0.857243292631579

 $00{:}05{:}04.160 \dashrightarrow 00{:}05{:}06.035$ Black individuals and Black youth

NOTE Confidence: 0.857243292631579

 $00{:}05{:}06.035 \dashrightarrow 00{:}05{:}07.910$ are significantly less likely to

NOTE Confidence: 0.857243292631579

 $00:05:07.972 \longrightarrow 00:05:09.932$ be diagnosed with a presentation

NOTE Confidence: 0.857243292631579

 $00{:}05{:}09.932 \dashrightarrow 00{:}05{:}11.500$ of restricting like anorexia,

NOTE Confidence: 0.857243292631579

 $00:05:11.500 \longrightarrow 00:05:13.492$ but may but experience the condition

NOTE Confidence: 0.857243292631579

 $00:05:13.492 \longrightarrow 00:05:16.482$ as a result for a longer period of time

NOTE Confidence: 0.857243292631579

 $00:05:16.482 \longrightarrow 00:05:18.977$ and develop more likely to develop than

NOTE Confidence: 0.857243292631579

 $00:05:18.977 \longrightarrow 00:05:21.467$ what we call a protracted presentation.

NOTE Confidence: 0.857243292631579

 $00:05:21.470 \longrightarrow 00:05:22.625$ And in reality,

00:05:22.625 --> 00:05:25.230 Black teenagers are 50% more likely

NOTE Confidence: 0.857243292631579

 $00{:}05{:}25.230 \to 00{:}05{:}27.880$ to exhibit compensatory behaviors or

NOTE Confidence: 0.857243292631579

 $00:05:27.880 \longrightarrow 00:05:30.611$ bulimic behaviors of purging, excessive

NOTE Confidence: 0.857243292631579

 $00:05:30.611 \longrightarrow 00:05:34.314$ exercise, in addition to the binge behaviors.

NOTE Confidence: 0.857243292631579 00:05:34.320 --> 00:05:34.771 Similarly, NOTE Confidence: 0.857243292631579

 $00:05:34.771 \longrightarrow 00:05:37.928$ we see that being more present in

NOTE Confidence: 0.857243292631579

 $00:05:37.928 \longrightarrow 00:05:39.939$ Hispanic and Latinx youth.

NOTE Confidence: 0.857243292631579

 $00{:}05{:}39.940 \dashrightarrow 00{:}05{:}42.160$ We see actually Asian college

NOTE Confidence: 0.857243292631579

00:05:42.160 --> 00:05:43.936 students reporting higher rates

NOTE Confidence: 0.857243292631579

 $00:05:43.936 \longrightarrow 00:05:46.964$ of restriction as well as higher

NOTE Confidence: 0.857243292631579

 $00:05:46.964 \longrightarrow 00:05:48.708$ rates of body dissatisfaction.

NOTE Confidence: 0.845517160357143

 $00{:}05{:}50.880 \rightarrow 00{:}05{:}52.887$ To a point that I will, I could give

NOTE Confidence: 0.845517160357143

 $00{:}05{:}52.887 \dashrightarrow 00{:}05{:}55.075$ money talks on this and I know Ashley

NOTE Confidence: 0.845517160357143

 $00:05:55.075 \longrightarrow 00:05:57.198$ Rutherford will be hitting on considerations

NOTE Confidence: 0.845517160357143

 $00:05:57.198 \longrightarrow 00:05:59.273$ in gender dysphoria this afternoon,

 $00:05:59.280 \longrightarrow 00:06:01.528$ but this is something I think for anyone

NOTE Confidence: 0.845517160357143

 $00{:}06{:}01.528 \dashrightarrow 00{:}06{:}03.133$ working with a dolescents in school

NOTE Confidence: 0.845517160357143

 $00:06:03.133 \longrightarrow 00:06:05.107$ systems or clinical settings to be

NOTE Confidence: 0.845517160357143

 $00:06:05.107 \longrightarrow 00:06:07.215$ aware of is the clinically significant

NOTE Confidence: 0.845517160357143

 $00:06:07.215 \longrightarrow 00:06:09.420$ concerns of disordered eating in both

NOTE Confidence: 0.845517160357143

 $00:06:09.420 \longrightarrow 00:06:11.820$ sexual and gender minority individuals.

NOTE Confidence: 0.845517160357143

 $00:06:11.820 \longrightarrow 00:06:14.620$ And this is going to be very broad

NOTE Confidence: 0.845517160357143

 $00:06:14.620 \longrightarrow 00:06:17.255$ strokes overview but we see in gay

NOTE Confidence: 0.845517160357143

 $00{:}06{:}17.255 \dashrightarrow 00{:}06{:}19.740$ men and gay adolescents or self

NOTE Confidence: 0.845517160357143

 $00:06:19.740 \longrightarrow 00:06:22.080$ reporting gay adolescents seven times

NOTE Confidence: 0.845517160357143

 $00{:}06{:}22.080 \dashrightarrow 00{:}06{:}25.277$ more likely to report binge eating and

NOTE Confidence: 0.845517160357143

 $00:06:25.277 \longrightarrow 00:06:28.007$ 12 times as likely to report purging.

NOTE Confidence: 0.845517160357143

 $00:06:28.010 \longrightarrow 00:06:30.565$ Significantly more likely to engage

NOTE Confidence: 0.845517160357143

 $00:06:30.565 \longrightarrow 00:06:32.609$ in any compensatory behaviors,

NOTE Confidence: 0.845517160357143

 $00:06:32.610 \longrightarrow 00:06:34.528$ to the point of an important distinction

NOTE Confidence: 0.845517160357143

 $00:06:34.528 \longrightarrow 00:06:36.520$ that would be happy to answer questions

 $00:06:36.520 \longrightarrow 00:06:38.567$ about our talk more about the distinction

NOTE Confidence: 0.845517160357143

 $00:06:38.567 \longrightarrow 00:06:40.786$ of being a sexual and gender minority.

NOTE Confidence: 0.845517160357143

 $00:06:40.790 \longrightarrow 00:06:42.646$ But in transgender individuals,

NOTE Confidence: 0.845517160357143

 $00:06:42.646 \longrightarrow 00:06:45.430$ we see eating disorders four times

NOTE Confidence: 0.845517160357143

 $00:06:45.505 \longrightarrow 00:06:48.250$ higher than their cisgender classmates.

NOTE Confidence: 0.845517160357143

 $00:06:48.250 \longrightarrow 00:06:50.889$ One in three individuals, this is again

NOTE Confidence: 0.845517160357143

 $00:06:50.890 \longrightarrow 00:06:52.482$ based on prevalence studies,

NOTE Confidence: 0.845517160357143

 $00{:}06{:}52.482 \dashrightarrow 00{:}06{:}54.472$ reporting using disordered eating as

NOTE Confidence: 0.845517160357143

 $00{:}06{:}54.472 \dashrightarrow 00{:}06{:}56.860$ a way to modify their body without

NOTE Confidence: 0.845517160357143

 $00:06:56.860 \longrightarrow 00:06:58.989$ hormones is just some research that

NOTE Confidence: 0.845517160357143

 $00:06:58.989 \longrightarrow 00:07:00.949$ we've been replicating within our

NOTE Confidence: 0.845517160357143

 $00:07:00.949 \longrightarrow 00:07:03.681$ gender program and we see gender

NOTE Confidence: 0.845517160357143

 $00{:}07{:}03.681 \to 00{:}07{:}05.749$ dysphoria and body dissatisfaction

NOTE Confidence: 0.845517160357143

 $00:07:05.749 \longrightarrow 00:07:09.158$ often key links in disordered eating.

NOTE Confidence: 0.845517160357143

 $00:07:09.160 \longrightarrow 00:07:11.584$ And this is again true for not just

00:07:11.584 --> 00:07:13.610 our binary trans masculine and

NOTE Confidence: 0.845517160357143

 $00{:}07{:}13.610 --> 00{:}07{:}15.414 \ {\rm trans \ feminine \ individuals},$

NOTE Confidence: 0.845517160357143

 $00:07:15.420 \longrightarrow 00:07:19.518$ but also for non binary individuals.

NOTE Confidence: 0.845517160357143

 $00:07:19.520 \longrightarrow 00:07:21.296$ To build on the last talk of our

NOTE Confidence: 0.845517160357143

 $00:07:21.296 \longrightarrow 00:07:22.916$ high risk presentations that we often

NOTE Confidence: 0.845517160357143

00:07:22.916 --> 00:07:24.951 have to think of these co-occurring

NOTE Confidence: 0.845517160357143

00:07:24.951 --> 00:07:26.727 concerns that it will then carry

NOTE Confidence: 0.845517160357143

 $00:07:26.727 \longrightarrow 00:07:28.932$ over into the afternoon specifically

NOTE Confidence: 0.845517160357143

00:07:28.932 --> 00:07:31.556 in gender minority youth.

NOTE Confidence: 0.845517160357143

00:07:31.560 --> 00:07:33.872 This is a kind of just a highlight

NOTE Confidence: 0.845517160357143

 $00{:}07{:}33.872 \dashrightarrow 00{:}07{:}36.336$ why we can't treat these things

NOTE Confidence: 0.845517160357143

 $00:07:36.336 \longrightarrow 00:07:38.596$ separately. In some prevalence work

NOTE Confidence: 0.845517160357143

 $00:07:38.596 \longrightarrow 00:07:40.743$ that has looked at comorbidities

NOTE Confidence: 0.845517160357143

00:07:40.743 --> 00:07:44.258 of eating disorders with suicide,

NOTE Confidence: 0.845517160357143

 $00:07:44.260 \longrightarrow 00:07:45.980$ suicidal ideation and suicide

NOTE Confidence: 0.845517160357143

 $00:07:45.980 \longrightarrow 00:07:48.130$ attempts actually, in individuals who

 $00:07:48.130 \longrightarrow 00:07:49.430$ identify as trans both

NOTE Confidence: 0.845517160357143

00:07:49.430 --> 00:07:51.740 binary and non binary, research showed

NOTE Confidence: 0.845517160357143

 $00:07:51.740 \longrightarrow 00:07:54.351$ that for those youth who identify as

NOTE Confidence: 0.845517160357143

00:07:54.351 --> 00:07:56.675 both trans and having a history of

NOTE Confidence: 0.845517160357143

 $00:07:56.747 \longrightarrow 00:07:58.781$ an eating disorder being 20 times

NOTE Confidence: 0.845517160357143

 $00:07:58.781 \longrightarrow 00:08:01.259$ based on the odds ratios to have

NOTE Confidence: 0.845517160357143

 $00:08:01.259 \longrightarrow 00:08:03.497$ attempted suicide in the past year.

NOTE Confidence: 0.845517160357143

 $00{:}08{:}03.500 \dashrightarrow 00{:}08{:}05.555$ Then two really important

NOTE Confidence: 0.845517160357143

 $00:08:05.555 \longrightarrow 00:08:06.377$ comparison groups,

NOTE Confidence: 0.845517160357143

 $00{:}08{:}06.380 \dashrightarrow 00{:}08{:}08.135$ both cisgender females with an

NOTE Confidence: 0.845517160357143

 $00:08:08.135 \longrightarrow 00:08:09.890$ eating disorder who are already

NOTE Confidence: 0.845517160357143

 $00:08:09.950 \longrightarrow 00:08:11.480$ at higher risk for suicide,

NOTE Confidence: 0.845517160357143

 $00{:}08{:}11.480 \dashrightarrow 00{:}08{:}13.300$ as well as trans individuals

NOTE Confidence: 0.845517160357143

 $00:08:13.300 \longrightarrow 00:08:14.756$ without an eating disorder.

NOTE Confidence: 0.845517160357143

 $00:08:14.760 \longrightarrow 00:08:16.104$ And to the point of the last talk,

 $00:08:16.110 \longrightarrow 00:08:19.486$ that is also a very high risk population.

NOTE Confidence: 0.845517160357143

 $00{:}08{:}19.490 \dashrightarrow 00{:}08{:}22.178$ We also see that about 3/4 of trans

NOTE Confidence: 0.845517160357143

 $00:08:22.178 \longrightarrow 00:08:24.528$ youth with an eating disorder

NOTE Confidence: 0.845517160357143

 $00:08:24.528 \longrightarrow 00:08:26.660$ endorse either suicide attempts,

NOTE Confidence: 0.845517160357143

 $00:08:26.660 \longrightarrow 00:08:28.832$ suicidal ideation or engaging in non

NOTE Confidence: 0.845517160357143

 $00:08:28.832 \longrightarrow 00:08:31.130$ suicidal self injury within the last year.

NOTE Confidence: 0.845517160357143 00:08:31.130 --> 00:08:31.652 So again, NOTE Confidence: 0.845517160357143

00:08:31.652 --> 00:08:33.479 this is to highlight in the purpose

NOTE Confidence: 0.845517160357143

 $00{:}08{:}33.479 \dashrightarrow 00{:}08{:}35.517$ of our our talk today why we have

NOTE Confidence: 0.845517160357143

00:08:35.517 --> 00:08:37.324 to think about these high risk

NOTE Confidence: 0.845517160357143

 $00{:}08{:}37.324 \dashrightarrow 00{:}08{:}38.676$ adolescents very holistically and

NOTE Confidence: 0.845517160357143

 $00:08:38.676 \longrightarrow 00:08:41.206$ and of these complex interacting

NOTE Confidence: 0.845517160357143

 $00:08:41.206 \longrightarrow 00:08:44.996$ kind of presentations that they're

NOTE Confidence: 0.845517160357143

 $00:08:44.996 \longrightarrow 00:08:47.270$ experiencing as well.

NOTE Confidence: 0.845517160357143

 $00:08:47.270 \longrightarrow 00:08:48.650$ I'm hitting on some other things,

NOTE Confidence: 0.845517160357143

 $00{:}08{:}48.650 \dashrightarrow 00{:}08{:}50.612$ just considerations that we do see

 $00:08:50.612 \longrightarrow 00:08:52.401$ higher rates of disordered eating

NOTE Confidence: 0.845517160357143

 $00:08:52.401 \longrightarrow 00:08:54.496$ concerns in individuals with physical

NOTE Confidence: 0.845517160357143

 $00:08:54.496 \longrightarrow 00:08:56.594$ disabilities and individuals with autism

NOTE Confidence: 0.845517160357143

 $00:08:56.594 \longrightarrow 00:08:58.429$ and other forms of neurodiversity,

NOTE Confidence: 0.845517160357143

00:08:58.430 --> 00:09:00.174 including ADHD,

NOTE Confidence: 0.845517160357143 00:09:00.174 --> 00:09:02.790 as well as

NOTE Confidence: 0.855915268

 $00:09:02.790 \longrightarrow 00:09:05.580$ in individuals with ASD traits.

NOTE Confidence: 0.81633773

 $00:09:07.910 \dashrightarrow 00:09:09.702$ And again building on the points that I

NOTE Confidence: 0.81633773

 $00:09:09.702 \dashrightarrow 00:09:11.568$ think Wendy had raised up that we can't,

NOTE Confidence: 0.81633773

 $00:09:11.570 \longrightarrow 00:09:13.208$ even though we often think about adolescence,

NOTE Confidence: 0.81633773

 $00{:}09{:}13.210 \dashrightarrow 00{:}09{:}14.890$ young a dult with eating disorders,

NOTE Confidence: 0.81633773

 $00:09:14.890 \longrightarrow 00:09:16.390$ thinking about those risk

NOTE Confidence: 0.81633773

 $00{:}09{:}16.390 \dashrightarrow 00{:}09{:}18.265$ factors at a younger age.

NOTE Confidence: 0.81633773

 $00{:}09{:}18.270 \dashrightarrow 00{:}09{:}20.146$ In some prevalence work that has been

NOTE Confidence: 0.81633773

 $00:09:20.146 \longrightarrow 00:09:22.585$ done in the school systems over 40% of

00:09:22.585 --> 00:09:25.105 1st to 3rd grade girls in the sample,

NOTE Confidence: 0.81633773

 $00{:}09{:}25.110 \dashrightarrow 00{:}09{:}27.350$ in a nationally representative sample,

NOTE Confidence: 0.81633773

 $00:09:27.350 \longrightarrow 00:09:29.590$ reporting wanting to be thinner.

NOTE Confidence: 0.81633773

 $00:09:29.590 \longrightarrow 00:09:32.974$ Over 80% of 10 year old children reported a

NOTE Confidence: 0.81633773

 $00:09:32.974 \longrightarrow 00:09:36.410$ fear of being fat or fat being a bad thing.

NOTE Confidence: 0.81633773

 $00:09:36.410 \longrightarrow 00:09:38.480$ Close to half of 9 to 11 year olds

NOTE Confidence: 0.81633773

 $00:09:38.480 \longrightarrow 00:09:40.288$ in the sample reporting sometimes

NOTE Confidence: 0.81633773

 $00:09:40.288 \longrightarrow 00:09:42.183$ are very often on diets.

NOTE Confidence: 0.81633773

 $00{:}09{:}42.190 \dashrightarrow 00{:}09{:}44.118$ Now what I highlight here is this is

NOTE Confidence: 0.81633773

 $00:09:44.118 \longrightarrow 00:09:46.208$ the self report of a 9 to 11 year old.

NOTE Confidence: 0.81633773

 $00:09:46.210 \longrightarrow 00:09:48.298$ So what that diet entails is not

NOTE Confidence: 0.81633773

 $00:09:48.298 \longrightarrow 00:09:50.685$ clear and may not actually be the

NOTE Confidence: 0.81633773

 $00:09:50.685 \longrightarrow 00:09:52.129$ behaviors of severe restriction,

NOTE Confidence: 0.81633773

 $00:09:52.130 \longrightarrow 00:09:53.858$ but that we're thinking about that

NOTE Confidence: 0.81633773

 $00:09:53.858 \longrightarrow 00:09:56.161$ cognitive mindset of I need to lose weight

NOTE Confidence: 0.81633773

 $00:09:56.161 \longrightarrow 00:09:58.110$ or there's something wrong with my body.

 $00:09:58.110 \longrightarrow 00:10:00.931$ We see a high prevalence of adolescent

NOTE Confidence: 0.81633773

 $00{:}10{:}00{.}931 \dashrightarrow 00{:}10{:}02.828$ girls engaging in compensatory

NOTE Confidence: 0.81633773

 $00{:}10{:}02.828 \dashrightarrow 00{:}10{:}05.888$ behaviors and and maladaptive dieting

NOTE Confidence: 0.81633773

 $00:10:05.890 \longrightarrow 00:10:06.632$ behaviors.

NOTE Confidence: 0.81633773

 $00:10:06.632 \longrightarrow 00:10:09.600$ And in college samples,

NOTE Confidence: 0.81633773

 $00:10:09.600 \longrightarrow 00:10:12.402$ over 90% of women reporting attempting

NOTE Confidence: 0.81633773

00:10:12.402 --> 00:10:15.316 to control their weight due to

NOTE Confidence: 0.81633773

 $00:10:15.316 \longrightarrow 00:10:17.736$ dissatisfaction with body and dieting.

NOTE Confidence: 0.81633773

 $00{:}10{:}17.740 \dashrightarrow 00{:}10{:}19.833$ So an important piece to consider here

NOTE Confidence: 0.81633773

 $00:10:19.833 \longrightarrow 00:10:21.894$ with all these risk factors though and

NOTE Confidence: 0.81633773

 $00:10:21.894 \longrightarrow 00:10:24.302$ what we'll get back to in terms of

NOTE Confidence: 0.81633773

 $00:10:24.302 \longrightarrow 00:10:26.366$ again what populations are affected is

NOTE Confidence: 0.81633773

 $00{:}10{:}26.366 \dashrightarrow 00{:}10{:}28.632$ actually when we're looking at truly

NOTE Confidence: 0.81633773

 $00:10:28.632 \longrightarrow 00:10:30.597$ what's income encompassed by that

NOTE Confidence: 0.81633773

 $00:10:30.600 \longrightarrow 00:10:32.676$ the diagnosis of an eating disorder.

00:10:32.680 --> 00:10:33.408 And yes,

NOTE Confidence: 0.81633773

00:10:33.408 --> 00:10:34.864 there are those specifically

NOTE Confidence: 0.81633773

 $00:10:34.864 \longrightarrow 00:10:36.320$ related to severe restriction,

NOTE Confidence: 0.81633773

 $00:10:36.320 \longrightarrow 00:10:38.323$ but actually less than 6% of

NOTE Confidence: 0.81633773

 $00:10:38.323 \longrightarrow 00:10:39.838$ individuals with eating disorders are

NOTE Confidence: 0.81633773

 $00{:}10{:}39.838 \dashrightarrow 00{:}10{:}41.320$ actually in the underweight zone.

NOTE Confidence: 0.81633773

 $00:10:41.320 \longrightarrow 00:10:43.255$ So that clinically significant impairment

NOTE Confidence: 0.81633773

 $00:10:43.255 \longrightarrow 00:10:45.700$ on life that that is associated

NOTE Confidence: 0.81633773

 $00:10:45.700 \longrightarrow 00:10:47.890$ with having an eating disorder.

NOTE Confidence: 0.81633773

 $00{:}10{:}47.890 \dashrightarrow 00{:}10{:}50.270$ Less than 6% of individuals who meet

NOTE Confidence: 0.81633773

 $00:10:50.270 \longrightarrow 00:10:52.967$ criteria for other types of eating disorders,

NOTE Confidence: 0.81633773

 $00:10:52.970 \longrightarrow 00:10:53.938$ whether bulimia,

NOTE Confidence: 0.81633773

 $00:10:53.938 \longrightarrow 00:10:54.906$ binge eating,

NOTE Confidence: 0.81633773

 $00{:}10{:}54.906 \dashrightarrow 00{:}10{:}56.842$ other presentations that we'll

NOTE Confidence: 0.81633773

00:10:56.842 --> 00:10:59.409 talk about are actually look like

NOTE Confidence: 0.81633773

 $00:10:59.409 \longrightarrow 00:11:01.707$ what society has decided in eating

00:11:01.776 --> 00:11:03.120 disorder looks like.

NOTE Confidence: 0.81633773

 $00{:}11{:}03.120 \dashrightarrow 00{:}11{:}05.395$ And so yeah despite what all the

NOTE Confidence: 0.81633773

 $00:11:05.395 \longrightarrow 00:11:07.080$ all this data shows us,

NOTE Confidence: 0.81633773

 $00:11:07.080 \longrightarrow 00:11:09.036$ there's a swag stereotype that exists

NOTE Confidence: 0.81633773

 $00:11:09.036 \longrightarrow 00:11:10.980$ and thinking about the students and

NOTE Confidence: 0.81633773

00:11:10.980 --> 00:11:12.996 patients that you work with and

NOTE Confidence: 0.81633773

00:11:12.996 --> 00:11:14.978 some of what can lead to hesitancy

NOTE Confidence: 0.81633773

 $00:11:14.978 \longrightarrow 00:11:16.654$ of endorsing some of these behaviors

NOTE Confidence: 0.81633773

00:11:16.654 --> 00:11:18.698 is that to have an eating disorder

NOTE Confidence: 0.81633773

 $00:11:18.700 \longrightarrow 00:11:20.950$ you, it's a skinny white affluent

NOTE Confidence: 0.81633773

 $00:11:20.950 \longrightarrow 00:11:23.797$ girl when we know that as a result,

NOTE Confidence: 0.81633773

 $00:11:23.800 \longrightarrow 00:11:25.696$ a number of our current treatment

NOTE Confidence: 0.81633773

 $00{:}11{:}25.696 \dashrightarrow 00{:}11{:}28.530$ models are based on samples and this

NOTE Confidence: 0.81633773

 $00:11:28.530 \longrightarrow 00:11:30.786$ population sample of affluent, young adult,

NOTE Confidence: 0.81633773

 $00:11:30.790 \longrightarrow 00:11:32.106$ cisgender, neurotypical, white women.

00:11:32.106 --> 00:11:34.680 A big part of this that that will

NOTE Confidence: 0.81633773

 $00:11:34.680 \longrightarrow 00:11:36.288$ hit on briefly is also because

NOTE Confidence: 0.81633773

 $00:11:36.288 \longrightarrow 00:11:38.455$ of some of the models of care and

NOTE Confidence: 0.81633773

00:11:38.455 --> 00:11:40.902 often self pay models to accessing

NOTE Confidence: 0.81633773

 $00:11:40.902 \longrightarrow 00:11:42.990$ eating disorder treatment.

NOTE Confidence: 0.81633773

 $00:11:42.990 \longrightarrow 00:11:45.664$ And the swag stereotype that we see

NOTE Confidence: 0.81633773

 $00:11:45.664 \longrightarrow 00:11:48.340$ even what what what's illustrated?

NOTE Confidence: 0.81633773

 $00:11:48.340 \longrightarrow 00:11:50.228$ So to head on broadly and I'll be

NOTE Confidence: 0.81633773

 $00{:}11{:}50.228 \dashrightarrow 00{:}11{:}51.654$ mindful time to go through quickly

NOTE Confidence: 0.81633773

00:11:51.654 --> 00:11:53.638 to hit more on kind of treatment

NOTE Confidence: 0.81633773

 $00{:}11{:}53.638 \dashrightarrow 00{:}11{:}55.360$ approaches that could be used in

NOTE Confidence: 0.81633773

 $00:11:55.360 \longrightarrow 00:11:57.098$ the school systems more robustly.

NOTE Confidence: 0.81633773

 $00{:}11{:}57.098 \dashrightarrow 00{:}11{:}59.028$ But thinking about the diagnosis

NOTE Confidence: 0.81633773

 $00:11:59.028 \longrightarrow 00:11:59.800$ that are

NOTE Confidence: 0.836099282777778

 $00:11:59.861 \longrightarrow 00:12:02.156$ encompassed in that eating and

NOTE Confidence: 0.836099282777778

 $00{:}12{:}02.156 \dashrightarrow 00{:}12{:}03.533$ feeding disorder presentation.

 $00:12:03.540 \longrightarrow 00:12:06.780$ So we have pica, rumination disorder,

NOTE Confidence: 0.836099282777778

00:12:06.780 --> 00:12:07.995 avoidant and restrictive

NOTE Confidence: 0.836099282777778

 $00:12:07.995 \longrightarrow 00:12:09.210$ food intake disorder,

NOTE Confidence: 0.836099282777778

 $00:12:09.210 \longrightarrow 00:12:10.188$ I'll hit on each of these,

NOTE Confidence: 0.836099282777778

 $00:12:10.190 \longrightarrow 00:12:11.785$ this is something called ARFID

NOTE Confidence: 0.836099282777778

 $00:12:11.785 \longrightarrow 00:12:13.813$ that I'm sure folks are hearing

NOTE Confidence: 0.836099282777778

00:12:13.813 --> 00:12:15.638 more and more about, anorexia,

NOTE Confidence: 0.836099282777778

 $00{:}12{:}15.640 \dashrightarrow 00{:}12{:}18.910$ bulimia and then binge eating disorder.

NOTE Confidence: 0.836099282777778

00:12:18.910 --> 00:12:20.558 The really tough part,

NOTE Confidence: 0.836099282777778

 $00:12:20.558 \longrightarrow 00:12:22.618$ especially in from a developmental

NOTE Confidence: 0.836099282777778

00:12:22.618 --> 00:12:24.992 lens with adolescence is based

NOTE Confidence: 0.836099282777778

 $00{:}12{:}24.992 \dashrightarrow 00{:}12{:}26.884$ on DSM criteria classification

NOTE Confidence: 0.836099282777778

 $00:12:26.890 \longrightarrow 00:12:29.116$ to meet one of these diagnosis

NOTE Confidence: 0.836099282777778

 $00:12:29.116 \longrightarrow 00:12:30.229$ is mutually exclusive.

NOTE Confidence: 0.836099282777778

 $00:12:30.230 \longrightarrow 00:12:32.624$ And so for anybody who works with

 $00:12:32.624 \longrightarrow 00:12:34.310$ children or adolescents to and to.

NOTE Confidence: 0.836099282777778

00:12:34.310 --> 00:12:35.798 I think a really important point

NOTE Confidence: 0.836099282777778

 $00:12:35.798 \longrightarrow 00:12:37.558$ that Dr. Bloch had raised in the

NOTE Confidence: 0.836099282777778

00:12:37.558 --> 00:12:38.992 last study of how sometimes our

NOTE Confidence: 0.836099282777778

00:12:38.992 --> 00:12:40.544 models of care for both assessment

NOTE Confidence: 0.836099282777778

00:12:40.544 --> 00:12:41.809 and treatment for youth are

NOTE Confidence: 0.836099282777778

00:12:41.810 --> 00:12:44.948 based on adult models of things,

NOTE Confidence: 0.836099282777778

00:12:44.950 --> 00:12:48.538 it's not uncommon that we see more of either

NOTE Confidence: 0.836099282777778

 $00:12:48.538 \longrightarrow 00:12:50.250$ sub threshold presentations that

NOTE Confidence: 0.836099282777778

00:12:50.250 --> 00:12:51.962 are still clinically significant

NOTE Confidence: 0.836099282777778

 $00{:}12{:}51.962 \dashrightarrow 00{:}12{:}54.263$ or things that kind of blend a few

NOTE Confidence: 0.836099282777778

 $00:12:54.263 \longrightarrow 00:12:56.254$ of these boxes and so then we end

NOTE Confidence: 0.836099282777778

 $00:12:56.254 \longrightarrow 00:12:58.790$ up with this catch all term of the

NOTE Confidence: 0.836099282777778

 $00:12:58.790 \longrightarrow 00:13:01.090$ other specified feeding and eating

NOTE Confidence: 0.836099282777778

 $00:13:01.090 \longrightarrow 00:13:03.773$ disorder when it is probably more

NOTE Confidence: 0.836099282777778

00:13:03.773 --> 00:13:06.299 accurate to have to dually identify

 $00:13:06.385 \longrightarrow 00:13:08.224$ the clinical conceptualization

NOTE Confidence: 0.836099282777778

 $00:13:08.224 \longrightarrow 00:13:10.676$ of multiple diagnoses.

NOTE Confidence: 0.836099282777778

 $00:13:10.680 \longrightarrow 00:13:13.232$ So I used this infographic as a as

NOTE Confidence: 0.836099282777778

00:13:13.232 --> 00:13:16.159 opposed to having to just walk you all

NOTE Confidence: 0.836099282777778

 $00{:}13{:}16.159 \dashrightarrow 00{:}13{:}18.700$ through the specific DSM diagnoses.

NOTE Confidence: 0.836099282777778

 $00:13:18.700 \longrightarrow 00:13:20.569$ But to hit on broadly what we're

NOTE Confidence: 0.836099282777778

 $00:13:20.569 \longrightarrow 00:13:22.262$ thinking of with these different

NOTE Confidence: 0.836099282777778

 $00{:}13{:}22.262 \dashrightarrow 00{:}13{:}23.922$ presentations and the conceptualization

NOTE Confidence: 0.836099282777778

 $00:13:23.922 \longrightarrow 00:13:26.502$ and to highlight why they're so

NOTE Confidence: 0.836099282777778

 $00:13:26.502 \longrightarrow 00:13:27.795$ actually distinctly different

NOTE Confidence: 0.836099282777778

00:13:27.795 --> 00:13:29.519 despite being lumped together,

NOTE Confidence: 0.836099282777778

 $00:13:29.520 \longrightarrow 00:13:32.467$ anorexia is what is more of

NOTE Confidence: 0.836099282777778

 $00{:}13{:}32.467 \dashrightarrow 00{:}13{:}33.730$ that quintessential traditional

NOTE Confidence: 0.836099282777778

 $00{:}13{:}33.800 \dashrightarrow 00{:}13{:}36.138$ idea of what an eating disorder is.

NOTE Confidence: 0.836099282777778

00:13:36.140 --> 00:13:37.860 So it's having significantly

00:13:37.860 --> 00:13:40.010 low weight or significantly low

NOTE Confidence: 0.836099282777778

 $00{:}13{:}40.010 \dashrightarrow 00{:}13{:}42.095$ restriction that is associated with

NOTE Confidence: 0.836099282777778

 $00:13:42.095 \longrightarrow 00:13:44.590$ the unrealistic idea about body image

NOTE Confidence: 0.836099282777778

00:13:44.590 --> 00:13:46.984 and an intense fear of gaining weight.

NOTE Confidence: 0.836099282777778

 $00:13:46.990 \longrightarrow 00:13:48.590$ Now really important components here

NOTE Confidence: 0.836099282777778

 $00:13:48.590 \longrightarrow 00:13:50.535$ and thinking about what the students

NOTE Confidence: 0.836099282777778

 $00:13:50.535 \longrightarrow 00:13:52.305$ and patients that you're working with

NOTE Confidence: 0.836099282777778

00:13:52.305 --> 00:13:54.490 is even when you are seeing low weight

NOTE Confidence: 0.836099282777778

 $00:13:54.490 \longrightarrow 00:13:56.103$ to meet criteria for for anorexia,

NOTE Confidence: 0.836099282777778

00:13:56.103 --> 00:13:58.644 it is that intense fear of gaining

NOTE Confidence: 0.836099282777778

 $00{:}13{:}58.644 \dashrightarrow 00{:}14{:}00.953$ weight and then the unrealistic idea

NOTE Confidence: 0.836099282777778

 $00:14:00.953 \longrightarrow 00:14:03.983$ of body image is something that we call

NOTE Confidence: 0.836099282777778

 $00:14:03.983 \longrightarrow 00:14:06.783$ kind of an overvaluation of weight and shape.

NOTE Confidence: 0.836099282777778

00:14:06.790 --> 00:14:08.370 So when you're thinking about

NOTE Confidence: 0.836099282777778

 $00:14:08.370 \longrightarrow 00:14:10.190$ kind of an adolescent or

NOTE Confidence: 0.836099282777778

 $00:14:10.190 \longrightarrow 00:14:12.278$ child or a dult sense of self,

00:14:12.280 --> 00:14:14.240 their weight and body shape being one

NOTE Confidence: 0.836099282777778

 $00:14:14.240 \longrightarrow 00:14:16.688$ of the most important factors for that.

NOTE Confidence: 0.836099282777778

00:14:16.690 --> 00:14:18.650 And this is a really important piece

NOTE Confidence: 0.836099282777778

 $00:14:18.650 \longrightarrow 00:14:21.065$ to hit on because it is often what

NOTE Confidence: 0.836099282777778

00:14:21.065 --> 00:14:23.458 leads to kind of hesitancy to actually

NOTE Confidence: 0.836099282777778

00:14:23.458 --> 00:14:25.078 disclosing that that's happening

NOTE Confidence: 0.836099282777778

00:14:25.078 --> 00:14:27.477 or seeking treatment is when we

NOTE Confidence: 0.836099282777778

 $00{:}14{:}27.477 \dashrightarrow 00{:}14{:}29.031$ all have things that are important

NOTE Confidence: 0.836099282777778

 $00{:}14{:}29.031 \dashrightarrow 00{:}14{:}31.078$ to how we view ourselves as people.

NOTE Confidence: 0.836099282777778

 $00:14:31.080 \longrightarrow 00:14:33.120$ If if you're a provider in the school

NOTE Confidence: 0.836099282777778

00:14:33.120 --> 00:14:34.729 systems or clinical provider a lot

NOTE Confidence: 0.836099282777778

00:14:34.729 --> 00:14:36.775 of times you're work is a part of

NOTE Confidence: 0.836099282777778

 $00{:}14{:}36.775 \dashrightarrow 00{:}14{:}38.471$ it and maybe being a parent or a

NOTE Confidence: 0.836099282777778

 $00{:}14{:}38.480 \dashrightarrow 00{:}14{:}40.520$ daughter or a son or you know a

NOTE Confidence: 0.836099282777778 00:14:40.520 --> 00:14:41.142 a friend, NOTE Confidence: 0.836099282777778 $00:14:41.142 \longrightarrow 00:14:43.008$ a partner to somebody and maybe

NOTE Confidence: 0.836099282777778

 $00:14:43.008 \longrightarrow 00:14:45.218$ ways that we contribute to society.

NOTE Confidence: 0.836099282777778

 $00:14:45.220 \longrightarrow 00:14:47.964$ All these factors that impact how we

NOTE Confidence: 0.836099282777778

 $00:14:47.964 \longrightarrow 00:14:49.922$ evaluate ourselves and our judgment

NOTE Confidence: 0.836099282777778

 $00:14:49.922 \longrightarrow 00:14:52.170$ of ourself and youth and adult

NOTE Confidence: 0.836099282777778

00:14:52.170 --> 00:14:54.120 when experiencing anorexia is that

NOTE Confidence: 0.836099282777778

 $00:14:54.120 \longrightarrow 00:14:56.306$ there's such an over emphasis put

NOTE Confidence: 0.836099282777778

00:14:56.306 --> 00:14:58.310 on weight and shape that actually

NOTE Confidence: 0.871112784782609

 $00:14:58.381 \longrightarrow 00:15:00.481$ the getting better, the having to

NOTE Confidence: 0.871112784782609

 $00:15:00.481 \longrightarrow 00:15:02.016$ increase intake is almost telling

NOTE Confidence: 0.871112784782609

00:15:02.016 --> 00:15:04.090 all part of their brain that

NOTE Confidence: 0.871112784782609

 $00:15:04.090 \longrightarrow 00:15:06.040$ what they're doing is bad or wrong.

NOTE Confidence: 0.871112784782609

 $00:15:06.040 \longrightarrow 00:15:07.762$ So it really it's it's what we

NOTE Confidence: 0.871112784782609

 $00:15:07.762 \longrightarrow 00:15:10.390$ have to do to get better is almost

NOTE Confidence: 0.871112784782609

 $00:15:10.390 \longrightarrow 00:15:11.854$ antithetical to everything that

NOTE Confidence: 0.871112784782609

 $00:15:11.854 \longrightarrow 00:15:13.600$ their brain is telling them.

00:15:13.600 --> 00:15:15.080 Bulimia is, you know,

NOTE Confidence: 0.871112784782609

 $00:15:15.080 \longrightarrow 00:15:17.300$ it's interesting as I've had a

NOTE Confidence: 0.871112784782609

00:15:17.372 --> 00:15:19.634 colleague say that bulimia is a

NOTE Confidence: 0.871112784782609

00:15:19.634 --> 00:15:22.051 diagnosis of the past because now

NOTE Confidence: 0.871112784782609

00:15:22.051 --> 00:15:24.559 we're seeing much more of anorexia,

NOTE Confidence: 0.871112784782609

00:15:24.560 --> 00:15:25.752 binge purge type system,

NOTE Confidence: 0.871112784782609

 $00:15:25.752 \longrightarrow 00:15:26.944$ a lot of restrictions,

NOTE Confidence: 0.871112784782609

 $00:15:26.950 \longrightarrow 00:15:28.204$ significantly low weight.

NOTE Confidence: 0.871112784782609

 $00:15:28.204 \longrightarrow 00:15:31.296$ But with bulimia, it is a true binge episode.

NOTE Confidence: 0.871112784782609

 $00{:}15{:}31.300 \dashrightarrow 00{:}15{:}32.910$ So a significantly large amount

NOTE Confidence: 0.871112784782609

 $00:15:32.910 \longrightarrow 00:15:35.207$ of food and an experience of loss

NOTE Confidence: 0.871112784782609

 $00:15:35.207 \longrightarrow 00:15:36.762$ of control couldn't have stopped

NOTE Confidence: 0.871112784782609

 $00{:}15{:}36.762 \dashrightarrow 00{:}15{:}38.898$ self with then followed by some

NOTE Confidence: 0.871112784782609

 $00{:}15{:}38.898 \dashrightarrow 00{:}15{:}40.418$ type of compensatory behavior.

NOTE Confidence: 0.871112784782609

 $00:15:40.420 \longrightarrow 00:15:42.248$ So over exercise, severe

 $00:15:42.248 \longrightarrow 00:15:44.076$ fasting after the fact,

NOTE Confidence: 0.871112784782609

00:15:44.080 --> 00:15:46.640 or of course, purging behaviors,

NOTE Confidence: 0.871112784782609

 $00:15:46.640 \longrightarrow 00:15:50.010$ use of laxatives, even diuretics.

NOTE Confidence: 0.871112784782609

00:15:50.010 --> 00:15:51.895 Binge eating disorder is in

NOTE Confidence: 0.871112784782609

00:15:51.895 --> 00:15:53.780 essence the bulimia without the

NOTE Confidence: 0.871112784782609

 $00:15:53.850 \longrightarrow 00:15:55.770$ without the purging behaviors.

NOTE Confidence: 0.871112784782609

 $00:15:55.770 \longrightarrow 00:15:58.024$ So we still are seeing that eating

NOTE Confidence: 0.871112784782609

00:15:58.024 --> 00:15:59.380 that significantly large amount

NOTE Confidence: 0.871112784782609

00:15:59.380 --> 00:16:01.020 of food. An important component

NOTE Confidence: 0.871112784782609

 $00:16:01.020 \longrightarrow 00:16:02.925$ here to identify for the

NOTE Confidence: 0.871112784782609

 $00{:}16{:}02.925 \dashrightarrow 00{:}16{:}04.533$ clinical distress is the sense of

NOTE Confidence: 0.871112784782609

 $00:16:04.533 \longrightarrow 00:16:06.334$ loss of control. A patient wants

NOTE Confidence: 0.871112784782609 00:16:06.334 --> 00:16:06.966 you know, NOTE Confidence: 0.871112784782609

 $00:16:06.970 \longrightarrow 00:16:08.433$ we talked about like the trains left

NOTE Confidence: 0.871112784782609

00:16:08.433 --> 00:16:09.580 the station, couldn't have stopped

NOTE Confidence: 0.871112784782609

 $00:16:09.580 \longrightarrow 00:16:12.877$ self if tried, and so there's feelings of

 $00:16:12.877 \longrightarrow 00:16:16.269$ guilt and disgust associated afterwards.

NOTE Confidence: 0.871112784782609

 $00{:}16{:}16.270 \dashrightarrow 00{:}16{:}17.815$ Rumination disorder and Pica are

NOTE Confidence: 0.871112784782609

 $00:16:17.815 \longrightarrow 00:16:19.955$ those that we won't hit on these

NOTE Confidence: 0.871112784782609

 $00:16:19.955 \longrightarrow 00:16:22.277$ ones as much because these are more

NOTE Confidence: 0.871112784782609

 $00:16:22.277 \longrightarrow 00:16:26.519$ common in youth and adolescents with

NOTE Confidence: 0.871112784782609

 $00{:}16{:}26.519 \dashrightarrow 00{:}16{:}27.933$ neurodevelopmental disabilities.

NOTE Confidence: 0.871112784782609

 $00:16:27.940 \longrightarrow 00:16:29.850$ So rumination is the regurgitation,

NOTE Confidence: 0.871112784782609

 $00:16:29.850 \longrightarrow 00:16:32.165$ it's not the purging, regurgitation

NOTE Confidence: 0.871112784782609

 $00:16:32.165 \longrightarrow 00:16:35.539$ into the mouth and re swallowing and

NOTE Confidence: 0.871112784782609

 $00:16:35.539 \longrightarrow 00:16:38.948$ then pica eating the non food objects.

NOTE Confidence: 0.871112784782609

 $00{:}16{:}38.950 \dashrightarrow 00{:}16{:}41.062$ ARFID, or avoidant restrictive

NOTE Confidence: 0.871112784782609

00:16:41.062 --> 00:16:42.646 food intake disorder,

NOTE Confidence: 0.871112784782609

00:16:42.650 --> 00:16:43.940 this is one that we're seeing

NOTE Confidence: 0.871112784782609

 $00:16:43.940 \longrightarrow 00:16:45.429$ quite an uptake in the pandemic.

NOTE Confidence: 0.871112784782609

 $00:16:45.430 \longrightarrow 00:16:47.380$ And actually this really complicated

 $00:16:47.380 \longrightarrow 00:16:49.330$ blurred line between that and

NOTE Confidence: 0.871112784782609

 $00{:}16{:}49.395 \dashrightarrow 00{:}16{:}51.561$ anorexia because what ARFID is

NOTE Confidence: 0.871112784782609

00:16:51.561 --> 00:16:53.576 is severe restriction, low weight,

NOTE Confidence: 0.871112784782609

00:16:53.576 --> 00:16:55.428 malnutrition, malnutrition in youth/

NOTE Confidence: 0.871112784782609

 $00:16:55.430 \longrightarrow 00:16:57.025$ adolescents for reasons that don't

NOTE Confidence: 0.871112784782609

 $00:16:57.025 \longrightarrow 00:16:59.593$ have to do with that point I was

NOTE Confidence: 0.871112784782609

 $00:16:59.593 \longrightarrow 00:17:01.405$ saying of an overvaluation of weight

NOTE Confidence: 0.871112784782609

 $00:17:01.405 \longrightarrow 00:17:03.629$ and shape or fear of gaining weight.

NOTE Confidence: 0.871112784782609

 $00:17:03.630 \longrightarrow 00:17:05.997$ So we often see it due to a fear

NOTE Confidence: 0.871112784782609

 $00:17:05.997 \longrightarrow 00:17:07.768$ of or an avoidance of

NOTE Confidence: 0.871112784782609

00:17:07.770 --> 00:17:08.586 negative consequences.

NOTE Confidence: 0.871112784782609

 $00:17:08.586 \longrightarrow 00:17:08.994 \text{ So}$

NOTE Confidence: 0.871112784782609

 $00:17:08.994 \longrightarrow 00:17:09.810$ for example,

NOTE Confidence: 0.871112784782609

 $00:17:09.810 \longrightarrow 00:17:11.826$ we've seen quite a number of youth

NOTE Confidence: 0.871112784782609

 $00:17:11.826 \longrightarrow 00:17:13.376$ with GI complicated GI histories

NOTE Confidence: 0.871112784782609

 $00:17:13.376 \longrightarrow 00:17:14.951$ that will then avoid eating

 $00:17:14.951 \longrightarrow 00:17:16.658$ because there's a fear of pain.

NOTE Confidence: 0.871112784782609

 $00{:}17{:}16.660 \dashrightarrow 00{:}17{:}18.996$ Or we often see, because of food sensitivity,

NOTE Confidence: 0.871112784782609

 $00:17:19.000 \longrightarrow 00:17:21.012$ the textures of things,

NOTE Confidence: 0.871112784782609

 $00{:}17{:}21.012 \dashrightarrow 00{:}17{:}23.508$ severe restriction or kind of an

NOTE Confidence: 0.871112784782609

 $00:17:23.508 \longrightarrow 00:17:25.740$ unawareness of their own hunger cues.

NOTE Confidence: 0.871112784782609

 $00:17:25.740 \longrightarrow 00:17:27.780$ The challenging part here is when

NOTE Confidence: 0.871112784782609

00:17:27.780 --> 00:17:29.832 these were developed, ARFID, anorexia,

NOTE Confidence: 0.871112784782609

 $00{:}17{:}29.832 \dashrightarrow 00{:}17{:}31.380$ considered quite separate.

NOTE Confidence: 0.871112784782609

 $00:17:31.380 \longrightarrow 00:17:32.976$ But if you imagined all those points,

NOTE Confidence: 0.871112784782609

00:17:32.980 --> 00:17:35.044 I was saying of how especially

NOTE Confidence: 0.871112784782609

00:17:35.044 --> 00:17:36.759 young youth and adolescents are

NOTE Confidence: 0.871112784782609

 $00:17:36.759 \longrightarrow 00:17:38.385$ at such high risk for these,

NOTE Confidence: 0.871112784782609

 $00{:}17{:}38.390 --> 00{:}17{:}38.774 \text{ um},\\$

NOTE Confidence: 0.871112784782609

 $00{:}17{:}38.774 \dashrightarrow 00{:}17{:}40.310$ disordered eating concerns based

NOTE Confidence: 0.871112784782609

00:17:40.310 --> 00:17:42.893 on societal kind of body image on

 $00:17:42.893 \longrightarrow 00:17:44.993$ things that can be thrown at them.

NOTE Confidence: 0.871112784782609

 $00{:}17{:}45.000 \dashrightarrow 00{:}17{:}46.680$ You may have an adolescence who

NOTE Confidence: 0.871112784782609

 $00:17:46.680 \longrightarrow 00:17:48.587$ it started as this avoidance and

NOTE Confidence: 0.871112784782609

00:17:48.587 --> 00:17:50.043 restricting more indicative of

NOTE Confidence: 0.871112784782609

00:17:50.043 --> 00:17:52.244 ARFID though we also have body

NOTE Confidence: 0.871112784782609

 $00:17:52.244 \longrightarrow 00:17:53.954$ image concerns that are very

NOTE Confidence: 0.871112784782609

 $00:17:53.954 \longrightarrow 00:17:55.552$ understandable and adolescent so.

NOTE Confidence: 0.871112784782609

 $00{:}17{:}55.552 \dashrightarrow 00{:}17{:}57.840$ So this is where some of those diagnostic

NOTE Confidence: 0.844831627142857

 $00{:}17{:}57.891 \dashrightarrow 00{:}17{:}59.267$ lines become quite blurred.

NOTE Confidence: 0.908068365714286

 $00:18:01.630 \longrightarrow 00:18:04.304$ And so often we think about here,

NOTE Confidence: 0.908068365714286

00:18:04.310 --> 00:18:06.191 I would say we, we like to try to

NOTE Confidence: 0.908068365714286

00:18:06.191 --> 00:18:08.163 pull these things apart and say

NOTE Confidence: 0.908068365714286

 $00:18:08.163 \longrightarrow 00:18:09.527$ that there's those presentations

NOTE Confidence: 0.908068365714286

00:18:09.527 --> 00:18:11.359 of restriction like anorexia,

NOTE Confidence: 0.908068365714286

00:18:11.360 --> 00:18:14.230 anxiety, pain sensory, ARFID, pica,

NOTE Confidence: 0.908068365714286

00:18:14.230 --> 00:18:16.470 dysregulation, loss of control,

 $00:18:16.470 \longrightarrow 00:18:17.698$ bulimia, binge eating.

NOTE Confidence: 0.908068365714286

00:18:17.698 --> 00:18:19.368 But really there's this overlap,

NOTE Confidence: 0.908068365714286

00:18:19.370 --> 00:18:21.306 they really are more of these Venn diagrams,

NOTE Confidence: 0.908068365714286

00:18:21.310 --> 00:18:23.626 which again can make things like

NOTE Confidence: 0.908068365714286

 $00:18:23.626 \longrightarrow 00:18:24.784$ accessing appropriate assessment

NOTE Confidence: 0.908068365714286

 $00:18:24.784 \longrightarrow 00:18:26.519$ and treatment quite tricky.

NOTE Confidence: 0.828216233684211

 $00:18:29.020 \longrightarrow 00:18:30.707$ I share these rates because I know

NOTE Confidence: 0.828216233684211

 $00:18:30.707 \longrightarrow 00:18:32.526$ we're hitting a lot on today with

NOTE Confidence: 0.828216233684211

00:18:32.526 --> 00:18:33.836 the uptick during the pandemic.

NOTE Confidence: 0.828216233684211

 $00:18:33.840 \longrightarrow 00:18:35.862$ These are actually the most recently

NOTE Confidence: 0.828216233684211

00:18:35.862 --> 00:18:37.706 published rates by NIMH from

NOTE Confidence: 0.828216233684211

00:18:37.706 --> 00:18:39.430 their National Comorbidity survey

NOTE Confidence: 0.828216233684211

 $00{:}18{:}39.430 \dashrightarrow 00{:}18{:}41.154$ and the Adolescent Supplement.

NOTE Confidence: 0.828216233684211

00:18:41.160 --> 00:18:42.936 So this was from about 20 years ago

NOTE Confidence: 0.828216233684211

 $00:18:42.940 \longrightarrow 00:18:45.026$ and we have seen a significant increase

 $00:18:45.026 \longrightarrow 00:18:46.780$ during the pandemic that I'll hit on.

NOTE Confidence: 0.828216233684211

00:18:46.780 --> 00:18:49.700 But you see even at that time and prior to

NOTE Confidence: 0.828216233684211

 $00:18:49.770 \longrightarrow 00:18:52.618$ the current kind of crisis that we're in,

NOTE Confidence: 0.828216233684211

 $00:18:52.620 \longrightarrow 00:18:55.100$ you see what you saw by the time of 18,

NOTE Confidence: 0.828216233684211

00:18:55.100 --> 00:18:57.883 close to 4% of females and 1.5%

NOTE Confidence: 0.828216233684211

 $00:18:57.883 \longrightarrow 00:19:00.398$ of males meeting criteria

NOTE Confidence: 0.828216233684211

 $00:19:00.398 \longrightarrow 00:19:02.410$ for an eating disorder.

NOTE Confidence: 0.828216233684211

 $00:19:02.410 \longrightarrow 00:19:03.598$ Now during the pandemic,

NOTE Confidence: 0.828216233684211

 $00{:}19{:}03.598 \mathrel{--}{>} 00{:}19{:}05.380$ just like any of the concerns

NOTE Confidence: 0.828216233684211

 $00:19:05.441 \longrightarrow 00:19:07.146$ that we're talking about today,

NOTE Confidence: 0.828216233684211

 $00{:}19{:}07.150 \dashrightarrow 00{:}19{:}10.120$ it has just kind of significantly

NOTE Confidence: 0.828216233684211

 $00:19:10.120 \longrightarrow 00:19:11.110$ been exacerbated.

NOTE Confidence: 0.828216233684211

00:19:11.110 --> 00:19:12.001 So there's this,

NOTE Confidence: 0.828216233684211

 $00:19:12.001 \longrightarrow 00:19:13.783$ I remember this editorial that came

NOTE Confidence: 0.828216233684211

00:19:13.783 --> 00:19:15.921 out in May of 2020 and it was the

NOTE Confidence: 0.828216233684211

 $00:19:15.921 \longrightarrow 00:19:17.777$ COVID-19 and the implications for eating

00:19:17.777 --> 00:19:19.811 disorders and it kind of anticipated

NOTE Confidence: 0.828216233684211

 $00:19:19.820 \longrightarrow 00:19:21.164$ that we were going to see an uptick,

NOTE Confidence: 0.828216233684211

00:19:21.170 --> 00:19:23.470 but completely underestimated kind

NOTE Confidence: 0.828216233684211

 $00:19:23.470 \longrightarrow 00:19:27.098$ of what has actually happened. And the

NOTE Confidence: 0.828216233684211

 $00:19:27.098 \longrightarrow 00:19:28.968$ first publication pertinent to the

NOTE Confidence: 0.828216233684211

 $00:19:28.968 \longrightarrow 00:19:30.775$ children and adolescents that we're

NOTE Confidence: 0.828216233684211

00:19:30.775 --> 00:19:32.659 talking about a very severe cases

NOTE Confidence: 0.828216233684211

 $00:19:32.660 \longrightarrow 00:19:34.228$ that highlighted the increase

NOTE Confidence: 0.828216233684211

 $00:19:34.228 \longrightarrow 00:19:36.188$ in the most severe cases,

NOTE Confidence: 0.828216233684211

 $00:19:36.190 \longrightarrow 00:19:37.975$ so these are going to be youth

NOTE Confidence: 0.828216233684211

 $00:19:37.975 \longrightarrow 00:19:39.208$ who are hospitalized medically

NOTE Confidence: 0.828216233684211

 $00{:}19{:}39.208 \dashrightarrow 00{:}19{:}40.880$ for the complications associated

NOTE Confidence: 0.828216233684211

00:19:40.880 --> 00:19:42.134 with restrictive eating,

NOTE Confidence: 0.828216233684211

 $00:19:42.140 \longrightarrow 00:19:44.079$ so issues with vitals, what's going on

NOTE Confidence: 0.828216233684211

00:19:44.079 --> 00:19:46.059 with the heart and you know that that

 $00:19:46.059 \longrightarrow 00:19:48.367$ they have to be in the hospital to be

NOTE Confidence: 0.828216233684211

 $00{:}19{:}48.367 \dashrightarrow 00{:}19{:}50.250$ weight restored and stabilized,

NOTE Confidence: 0.828216233684211

 $00:19:50.250 \longrightarrow 00:19:54.264$ we saw published in July of 2021 from a

NOTE Confidence: 0.828216233684211

 $00:19:54.264 \longrightarrow 00:19:56.232$ hospital in Michigan that just noting

NOTE Confidence: 0.828216233684211

00:19:56.232 --> 00:19:58.319 the difference in admission rates

NOTE Confidence: 0.828216233684211

00:19:58.319 --> 00:20:00.429 and it being significantly higher

NOTE Confidence: 0.828216233684211

 $00:20:00.429 \longrightarrow 00:20:02.895$ that now in the last year we've seen

NOTE Confidence: 0.828216233684211

00:20:02.900 --> 00:20:04.220 replicated throughout the country

NOTE Confidence: 0.828216233684211

 $00:20:04.220 \longrightarrow 00:20:05.870$ as well as in Europe,

NOTE Confidence: 0.828216233684211

 $00:20:05.870 \longrightarrow 00:20:08.046$ and I'll hit on some of the data

NOTE Confidence: 0.828216233684211

 $00{:}20{:}08.046 \to 00{:}20{:}10.170$ that we've actually seen at the

NOTE Confidence: 0.828216233684211

00:20:10.170 --> 00:20:12.065 children's hospital in New Haven.

NOTE Confidence: 0.828216233684211

 $00:20:12.070 \longrightarrow 00:20:13.620$ When we think about what's

NOTE Confidence: 0.828216233684211

 $00:20:13.620 \longrightarrow 00:20:14.860$ exacerbated those prevalence rates,

NOTE Confidence: 0.828216233684211

 $00:20:14.860 \longrightarrow 00:20:17.128$ it really was the pandemic created a

NOTE Confidence: 0.828216233684211

00:20:17.128 --> 00:20:19.660 perfect storm for eating disorders to grow,

 $00:20:19.660 \longrightarrow 00:20:21.364$ both those related to restriction as

NOTE Confidence: 0.828216233684211

 $00:20:21.364 \longrightarrow 00:20:23.378$ well as those with loss of control.

NOTE Confidence: 0.828216233684211

 $00:20:23.380 \longrightarrow 00:20:25.320$ So there's this greater susceptibility

NOTE Confidence: 0.828216233684211

 $00:20:25.320 \longrightarrow 00:20:27.260$ to illness just associated with

NOTE Confidence: 0.828216233684211

 $00:20:27.319 \longrightarrow 00:20:28.539$ being in the pandemic.

NOTE Confidence: 0.828216233684211

 $00:20:28.540 \longrightarrow 00:20:29.620$ The presentation of,

NOTE Confidence: 0.828216233684211 00:20:29.620 --> 00:20:30.340 you know, NOTE Confidence: 0.828216233684211

00:20:30.340 --> 00:20:32.344 much related to eating disorders in

NOTE Confidence: 0.828216233684211

 $00{:}20{:}32.344 \dashrightarrow 00{:}20{:}34.372$ the camp of restricting being about

NOTE Confidence: 0.828216233684211

 $00:20:34.372 \longrightarrow 00:20:36.274$ control and what you're doing is

NOTE Confidence: 0.828216233684211

00:20:36.274 --> 00:20:38.482 taking away all control about the

NOTE Confidence: 0.828216233684211

 $00:20:38.482 \longrightarrow 00:20:39.998$ environment and really isolating

NOTE Confidence: 0.828216233684211

 $00{:}20{:}39.998 \dashrightarrow 00{:}20{:}42.484$ somebody and really being socially connected

NOTE Confidence: 0.828216233684211

 $00:20:42.484 \longrightarrow 00:20:45.070$ are some of the most protective factors

NOTE Confidence: 0.828216233684211

 $00:20:45.136 \longrightarrow 00:20:47.165$ here. And then there's the amount

 $00:20:47.165 \longrightarrow 00:20:48.230$ of virtual interaction,

NOTE Confidence: 0.828216233684211

00:20:48.230 --> 00:20:50.170 only seeing your peers online,

NOTE Confidence: 0.828216233684211

 $00:20:50.170 \longrightarrow 00:20:52.162$ only seeing filtered images of your

NOTE Confidence: 0.828216233684211

 $00:20:52.162 \longrightarrow 00:20:53.863$ friends online and the dangers

NOTE Confidence: 0.828216233684211

00:20:53.863 --> 00:20:55.729 of social media on body image.

NOTE Confidence: 0.828216233684211

00:20:55.730 --> 00:20:58.090 So not only only getting to connect via

NOTE Confidence: 0.828216233684211

00:20:58.090 --> 00:21:00.770 zoom and having to see yourself on screen,

NOTE Confidence: 0.828216233684211

 $00:21:00.770 \longrightarrow 00:21:02.470$ but then everything that you

NOTE Confidence: 0.828216233684211

 $00:21:02.470 \longrightarrow 00:21:04.170$ see online through social media

NOTE Confidence: 0.828216233684211

 $00:21:04.229 \longrightarrow 00:21:06.437$ engendering a more negative body image.

NOTE Confidence: 0.828216233684211

00:21:06.440 --> 00:21:08.416 And so I'm I'm sure that folks had

NOTE Confidence: 0.828216233684211

 $00:21:08.416 \longrightarrow 00:21:10.544$ seen that the time of when the pieces

NOTE Confidence: 0.828216233684211

 $00:21:10.544 \longrightarrow 00:21:12.390$ coming out from the Facebook and

NOTE Confidence: 0.828216233684211

 $00:21:12.390 \longrightarrow 00:21:14.326$ Instagram whistleblower of the

NOTE Confidence: 0.828216233684211

 $00:21:14.326 \longrightarrow 00:21:16.746$ algorithms that they actually identified

NOTE Confidence: 0.828216233684211

 $00:21:16.746 \longrightarrow 00:21:18.727$ that once youth and adolescents

 $00:21:18.727 \longrightarrow 00:21:20.869$ were starting to look at like

NOTE Confidence: 0.837507025454545

 $00{:}21{:}20.870 \dashrightarrow 00{:}21{:}23.096$ any types of thing on Instagram

NOTE Confidence: 0.837507025454545

00:21:23.096 --> 00:21:25.100 related to to body image,

NOTE Confidence: 0.837507025454545

00:21:25.100 --> 00:21:26.900 even more positive body image,

NOTE Confidence: 0.837507025454545

 $00{:}21{:}26.900 \dashrightarrow 00{:}21{:}28.418$ some of the algorithm could take

NOTE Confidence: 0.837507025454545

00:21:28.418 --> 00:21:30.350 them to pro Ana or pro anorexia

NOTE Confidence: 0.837507025454545

 $00:21:30.350 \longrightarrow 00:21:31.795$ sites because it increases the

NOTE Confidence: 0.837507025454545

 $00{:}21{:}31.795 \longrightarrow 00{:}21{:}33.562$ clicks of things and so that there

NOTE Confidence: 0.837507025454545

 $00:21:33.562 \longrightarrow 00:21:35.682$ really are a lot of these dangers

NOTE Confidence: 0.837507025454545

00:21:35.682 --> 00:21:38.137 to what could be vulnerability

NOTE Confidence: 0.837507025454545

 $00:21:38.137 \longrightarrow 00:21:41.338$ factors for the youth currently.

NOTE Confidence: 0.837507025454545

00:21:41.340 --> 00:21:42.755 When we're looking specifically, and

NOTE Confidence: 0.837507025454545

 $00:21:42.755 \longrightarrow 00:21:45.030$ for those of us that are in

NOTE Confidence: 0.837507025454545

 $00{:}21{:}45.030 \dashrightarrow 00{:}21{:}46.370$ Connecticut, at what we've actually

NOTE Confidence: 0.837507025454545

00:21:46.370 --> 00:21:48.353 seen at Yale New Haven Children's

 $00:21:48.353 \longrightarrow 00:21:50.093$ Hospital to highlight this increase.

NOTE Confidence: 0.837507025454545

 $00{:}21{:}50.100 \dashrightarrow 00{:}21{:}52.098$ So these are again youth hospitalized

NOTE Confidence: 0.837507025454545

 $00:21:52.098 \longrightarrow 00:21:54.039$ for the severe medical complications

NOTE Confidence: 0.837507025454545

 $00:21:54.039 \longrightarrow 00:21:56.219$ associated with restrictive eating.

NOTE Confidence: 0.837507025454545

 $00:21:56.220 \longrightarrow 00:21:57.840$ We did a medical record review

NOTE Confidence: 0.837507025454545

 $00:21:57.840 \longrightarrow 00:21:59.746$ of the three years prior to the

NOTE Confidence: 0.837507025454545

 $00:21:59.746 \longrightarrow 00:22:01.867$ start of the pandemic and had 48

NOTE Confidence: 0.837507025454545

00:22:01.867 --> 00:22:04.175 children hospitalized for those

NOTE Confidence: 0.837507025454545

 $00{:}22{:}04.175 \dashrightarrow 00{:}22{:}05.906$ severe medical complications.

NOTE Confidence: 0.837507025454545

 $00:22:05.910 \longrightarrow 00:22:07.654$ And then in looking in just the first

NOTE Confidence: 0.837507025454545

 $00{:}22{:}07.654 \dashrightarrow 00{:}22{:}09.236$ year and a half of the pandemic,

NOTE Confidence: 0.837507025454545

 $00:22:09.240 \longrightarrow 00:22:10.524$ we saw already 60.

NOTE Confidence: 0.837507025454545

 $00:22:10.524 \longrightarrow 00:22:12.847$ So we'll be looking again at the

NOTE Confidence: 0.837507025454545

 $00:22:12.847 \longrightarrow 00:22:15.129$ end of this calendar year for that

NOTE Confidence: 0.837507025454545

00:22:15.129 --> 00:22:16.740 full three-year period and of

NOTE Confidence: 0.837507025454545

 $00:22:16.740 \longrightarrow 00:22:18.660$ course not expecting just doubles,

 $00:22:18.660 \longrightarrow 00:22:20.244$ but to just show that in that time

NOTE Confidence: 0.837507025454545

 $00:22:20.244 \longrightarrow 00:22:22.019$ period we would expect it to more than

NOTE Confidence: 0.837507025454545

 $00{:}22{:}22.019 \dashrightarrow 00{:}22{:}23.600$ double or may be even triple to what

NOTE Confidence: 0.837507025454545

 $00:22:23.600 \longrightarrow 00:22:27.510$ we saw the three years before the pandemic.

NOTE Confidence: 0.837507025454545

 $00:22:27.510 \longrightarrow 00:22:28.910$ We also saw an increase

NOTE Confidence: 0.837507025454545

 $00:22:28.910 \longrightarrow 00:22:30.310$ in the length of stay.

NOTE Confidence: 0.837507025454545

00:22:30.310 --> 00:22:32.870 This was both due to lack of resource

NOTE Confidence: 0.837507025454545

 $00{:}22{:}32.870 \dashrightarrow 00{:}22{:}34.540$ and available for disposition or

NOTE Confidence: 0.837507025454545

 $00:22:34.540 \longrightarrow 00:22:36.780$ for where to refer folks as well

NOTE Confidence: 0.837507025454545

 $00:22:36.849 \longrightarrow 00:22:39.313$ as what we saw of the increase

NOTE Confidence: 0.837507025454545

 $00{:}22{:}39.313 \dashrightarrow 00{:}22{:}40.369$ in severity presentation.

NOTE Confidence: 0.837507025454545

 $00:22:40.370 \longrightarrow 00:22:42.134$ To the point that's been raised

NOTE Confidence: 0.837507025454545

00:22:42.134 --> 00:22:43.740 about how much more concern

NOTE Confidence: 0.837507025454545

 $00:22:43.740 \longrightarrow 00:22:45.570$ we're seeing in younger youth,

NOTE Confidence: 0.837507025454545

00:22:45.570 --> 00:22:47.766 a significantly higher number of youth

00:22:47.766 --> 00:22:50.744 under the age of 13 being hospitalized

NOTE Confidence: 0.837507025454545

 $00:22:50.744 \longrightarrow 00:22:53.154$ for the severe medical complication.

NOTE Confidence: 0.837507025454545

00:22:53.160 --> 00:22:56.274 Requiring medical, um, psychiatric medication,

NOTE Confidence: 0.837507025454545

 $00:22:56.274 \longrightarrow 00:22:58.350$ more patients

NOTE Confidence: 0.837507025454545

00:22:58.350 --> 00:22:59.655 requiring discharge to a higher

NOTE Confidence: 0.837507025454545

 $00:22:59.655 \longrightarrow 00:23:00.960$ level of care and again,

NOTE Confidence: 0.837507025454545

 $00:23:00.960 \longrightarrow 00:23:02.370$ what we've seen around the country.

NOTE Confidence: 0.83605680875

00:23:04.480 --> 00:23:06.600 To hit on some of the severity and why,

NOTE Confidence: 0.83605680875

 $00{:}23{:}06.600 \to 00{:}23{:}08.420$ including in the talk today and thinking

NOTE Confidence: 0.83605680875

00:23:08.420 --> 00:23:10.460 of how to provide more resources,

NOTE Confidence: 0.83605680875

00:23:10.460 --> 00:23:12.870 eating disorders are among the

NOTE Confidence: 0.83605680875

 $00:23:12.870 \longrightarrow 00:23:14.798$ deadliest mental illnesses,

NOTE Confidence: 0.83605680875

 $00:23:14.798 \longrightarrow 00:23:17.128$ second only to opioid overdoses.

NOTE Confidence: 0.83605680875

 $00{:}23{:}17.130 \dashrightarrow 00{:}23{:}18.946$ Anorexia specifically has a

NOTE Confidence: 0.83605680875

 $00:23:18.946 \longrightarrow 00:23:21.216$ relapse rate of approaching 50%.

NOTE Confidence: 0.83605680875

 $00:23:21.220 \longrightarrow 00:23:23.428$ So even when technically

 $00:23:23.428 \longrightarrow 00:23:25.084$ going into remission,

NOTE Confidence: 0.83605680875

 $00:23:25.090 \longrightarrow 00:23:27.910$ one in two individuals will relapse.

NOTE Confidence: 0.83605680875

00:23:27.910 --> 00:23:29.790 The standardized mortality ratio,

NOTE Confidence: 0.83605680875

 $00:23:29.790 \longrightarrow 00:23:32.177$ or what that means of somebody at

NOTE Confidence: 0.83605680875

00:23:32.177 --> 00:23:34.650 an age with anorexia compared to

NOTE Confidence: 0.83605680875

 $00:23:34.650 \longrightarrow 00:23:37.380$ somebody without is six times as

NOTE Confidence: 0.83605680875

 $00:23:37.380 \longrightarrow 00:23:39.969$ likely to to have early mortality.

NOTE Confidence: 0.83605680875

 $00{:}23{:}39.970 \dashrightarrow 00{:}23{:}41.965$ This is a really important point to

NOTE Confidence: 0.83605680875

 $00{:}23{:}41.965 \dashrightarrow 00{:}23{:}43.465$ working with children and adolescents.

NOTE Confidence: 0.83605680875

 $00:23:43.465 \longrightarrow 00:23:45.530$ It's about one in five individuals who,

NOTE Confidence: 0.83605680875

 $00:23:45.530 \longrightarrow 00:23:47.750$ once meeting criteria for individual

NOTE Confidence: 0.83605680875

 $00:23:47.750 \longrightarrow 00:23:49.268$ develop what we call a severe

NOTE Confidence: 0.83605680875

00:23:49.268 --> 00:23:50.027 and protracted illness,

NOTE Confidence: 0.83605680875

00:23:50.030 --> 00:23:52.658 which means it does never get

NOTE Confidence: 0.83605680875

00:23:52.658 --> 00:23:55.010 better until the until death.

 $00:23:55.010 \longrightarrow 00:23:57.250$ We see a death about once every hour

NOTE Confidence: 0.83605680875

 $00{:}23{:}57.250 \dashrightarrow 00{:}23{:}58.928$ attributed to an eating disorder.

NOTE Confidence: 0.83605680875

 $00:23:58.930 \longrightarrow 00:24:01.710$ And among individuals with anorexia,

NOTE Confidence: 0.83605680875

 $00:24:01.710 \longrightarrow 00:24:03.468$ we do see those higher rates

NOTE Confidence: 0.83605680875

 $00:24:03.468 \longrightarrow 00:24:05.150$ of suicide and of course,

NOTE Confidence: 0.83605680875

 $00:24:05.150 \longrightarrow 00:24:06.359$ the medical complications

NOTE Confidence: 0.83605680875

 $00:24:06.359 \longrightarrow 00:24:08.374$ associated with an early death.

NOTE Confidence: 0.863842613666667

00:24:10.900 --> 00:24:12.724 Eating disorders cost a great deal

NOTE Confidence: 0.863842613666667

00:24:12.724 --> 00:24:14.973 to both our hospital systems and,

NOTE Confidence: 0.863842613666667

 $00:24:14.973 \longrightarrow 00:24:17.227$ so this is again why we continue

NOTE Confidence: 0.863842613666667

 $00:24:17.296 \longrightarrow 00:24:19.340$ to think about other ways to both

NOTE Confidence: 0.863842613666667

00:24:19.340 --> 00:24:21.102 meet of course public health costs,

NOTE Confidence: 0.863842613666667

 $00:24:21.102 \longrightarrow 00:24:23.160$ but more so the individual need of

NOTE Confidence: 0.863842613666667

00:24:23.215 --> 00:24:24.979 our of our patients and students.

NOTE Confidence: 0.863842613666667

00:24:24.980 --> 00:24:26.408 Really important point here,

NOTE Confidence: 0.863842613666667

00:24:26.408 --> 00:24:29.153 again this isn't for those very severe

 $00:24:29.153 \longrightarrow 00:24:31.297$ restrictive presentations of anorexia,

NOTE Confidence: 0.863842613666667

 $00:24:31.300 \longrightarrow 00:24:32.830$ but about one in 10 individuals

NOTE Confidence: 0.863842613666667

 $00:24:32.830 \longrightarrow 00:24:34.370$ in their life meet criteria,

NOTE Confidence: 0.863842613666667

 $00:24:34.370 \longrightarrow 00:24:36.140$ clinical criteria for an eating disorder.

NOTE Confidence: 0.863842613666667

 $00:24:36.140 \longrightarrow 00:24:38.606$ This includes all those of the

NOTE Confidence: 0.863842613666667

 $00:24:38.606 \longrightarrow 00:24:39.839$ binge eating, bulimia,

NOTE Confidence: 0.863842613666667

00:24:39.840 --> 00:24:42.005 ARFID, so important to highlight

NOTE Confidence: 0.863842613666667

 $00{:}24{:}42.005 \dashrightarrow 00{:}24{:}45.002$ to again the likelihood of a number

NOTE Confidence: 0.863842613666667

 $00{:}24{:}45.002 \dashrightarrow 00{:}24{:}47.252$ of students or patients that you

NOTE Confidence: 0.863842613666667

 $00:24:47.252 \longrightarrow 00:24:49.792$ have that may be meeting criteria but

NOTE Confidence: 0.863842613666667

 $00:24:49.792 \longrightarrow 00:24:51.613$ not sharing. Our treatment

NOTE Confidence: 0.863842613666667

00:24:51.613 --> 00:24:53.539 approaches that I'll hit on where

NOTE Confidence: 0.863842613666667

00:24:53.539 --> 00:24:55.491 we're really working to build because

NOTE Confidence: 0.863842613666667

 $00:24:55.491 \longrightarrow 00:24:57.820$ we we haven't really hit on the

NOTE Confidence: 0.863842613666667

00:24:57.820 --> 00:24:59.208 most effective strategies yet.

00:24:59.210 --> 00:25:01.030 And unfortunately we don't have

NOTE Confidence: 0.863842613666667

 $00{:}25{:}01.030 \dashrightarrow 00{:}25{:}02.850$ medications that actually are FDA

NOTE Confidence: 0.863842613666667

 $00:25:02.914 \longrightarrow 00:25:05.098$ approved or shown to be effective

NOTE Confidence: 0.863842613666667

 $00:25:05.098 \longrightarrow 00:25:06.554$ currently for addressing eating

NOTE Confidence: 0.863842613666667

 $00:25:06.618 \longrightarrow 00:25:08.470$ disorder concerns in adolescents.

NOTE Confidence: 0.863842613666667

 $00:25:08.470 \longrightarrow 00:25:10.170$ We do have some efficacy

NOTE Confidence: 0.863842613666667

 $00:25:10.170 \longrightarrow 00:25:11.976$ in adults. Often when we see

NOTE Confidence: 0.863842613666667

 $00:25:11.976 \longrightarrow 00:25:13.808$ medications being used and if any

NOTE Confidence: 0.863842613666667

 $00{:}25{:}13.808 \to 00{:}25{:}15.218$ folks have questions on that,

NOTE Confidence: 0.863842613666667

 $00:25:15.220 \longrightarrow 00:25:16.936$ we fortunately have a number of

NOTE Confidence: 0.863842613666667

 $00{:}25{:}16.936 \dashrightarrow 00{:}25{:}19.144$ psychiatrists here on our panel today, as

NOTE Confidence: 0.863842613666667

 $00:25:19.144 \longrightarrow 00:25:20.834$ treating those co-occurring conditions.

NOTE Confidence: 0.863842613666667

 $00{:}25{:}20.840 \dashrightarrow 00{:}25{:}22.960$ So the co-occurring depression

NOTE Confidence: 0.863842613666667

 $00:25:22.960 \longrightarrow 00:25:25.890$ or anxiety or other concerns.

NOTE Confidence: 0.863842613666667

00:25:25.890 --> 00:25:27.730 So to the point of the high comorbidities,

NOTE Confidence: 0.863842613666667

 $00:25:27.730 \longrightarrow 00:25:29.575$ the high comorbidities again already

 $00:25:29.575 \longrightarrow 00:25:31.801$ hitting on the higher rates that

NOTE Confidence: 0.863842613666667

 $00:25:31.801 \longrightarrow 00:25:33.739$ we see in individuals with gender

NOTE Confidence: 0.863842613666667

 $00:25:33.739 \longrightarrow 00:25:35.777$ dysphoria as well as the higher

NOTE Confidence: 0.863842613666667

 $00:25:35.777 \longrightarrow 00:25:37.125$ rates of suicidal ideation.

NOTE Confidence: 0.863842613666667

00:25:37.130 --> 00:25:39.194 We do see greater negative long

NOTE Confidence: 0.863842613666667

 $00:25:39.194 \longrightarrow 00:25:41.372$ term effects when there are those

NOTE Confidence: 0.863842613666667

 $00:25:41.372 \longrightarrow 00:25:42.848$ associated comorbidities and why

NOTE Confidence: 0.863842613666667

 $00:25:42.848 \longrightarrow 00:25:45.388$ we want to treat the whole child.

NOTE Confidence: 0.863842613666667

 $00:25:45.390 \longrightarrow 00:25:48.225$ We see over half of adolescents with

NOTE Confidence: 0.863842613666667

 $00:25:48.225 \longrightarrow 00:25:51.079$ anorexia having some type of mood disorder.

NOTE Confidence: 0.863842613666667

 $00{:}25{:}51.080 \dashrightarrow 00{:}25{:}52.963$ The challenge here is that it's

NOTE Confidence: 0.863842613666667

00:25:52.963 --> 00:25:54.938 the chicken or the egg question

NOTE Confidence: 0.863842613666667

 $00{:}25{:}54.938 \dashrightarrow 00{:}25{:}56.414$ just because severe star vation

NOTE Confidence: 0.863842613666667

00:25:56.420 --> 00:25:58.865 can, of course,

NOTE Confidence: 0.863842613666667

 $00:25:58.865 \longrightarrow 00:26:02.011$ impact mood. We see about one in

 $00:26:02.011 \longrightarrow 00:26:03.974$ four individuals with anorexia meeting

NOTE Confidence: 0.863842613666667

 $00:26:03.974 \longrightarrow 00:26:06.219$ criteria for an anxiety disorder.

NOTE Confidence: 0.863842613666667

 $00:26:06.220 \longrightarrow 00:26:08.880$ One in four individuals have

NOTE Confidence: 0.863842613666667

00:26:08.880 --> 00:26:11.540 experiencing a substance abuse concern,

NOTE Confidence: 0.863842613666667

 $00:26:11.540 \longrightarrow 00:26:12.796$ most prevalent those associated

NOTE Confidence: 0.863842613666667

 $00:26:12.796 \longrightarrow 00:26:13.738$ with weight loss,

NOTE Confidence: 0.863842613666667

00:26:13.740 --> 00:26:16.620 including cocaine and amphetamines, and high

NOTE Confidence: 0.863842613666667

 $00:26:16.620 \longrightarrow 00:26:20.699$ rates of OCD in individuals with anorexia.

NOTE Confidence: 0.863842613666667

 $00:26:20.700 \longrightarrow 00:26:22.572$ One of an important distinction here

NOTE Confidence: 0.863842613666667

 $00{:}26{:}22.572 \dashrightarrow 00{:}26{:}24.795$ is because there is often such an

NOTE Confidence: 0.863842613666667

 $00:26:24.795 \longrightarrow 00:26:26.619$ obsession related to food and body

NOTE Confidence: 0.863842613666667

 $00:26:26.620 \longrightarrow 00:26:29.063$ image, a co-occurrence of OCD is

NOTE Confidence: 0.863842613666667

00:26:29.063 --> 00:26:31.304 only considered truly a co-occurring

NOTE Confidence: 0.863842613666667

00:26:31.304 --> 00:26:33.554 disorder if the OCD symptoms occur

NOTE Confidence: 0.863842613666667

 $00:26:33.554 \longrightarrow 00:26:35.978$ outside of eating and weight concerns.

NOTE Confidence: 0.846026795

00:26:38.160 --> 00:26:40.253 I highlight here again also just to

 $00:26:40.253 \longrightarrow 00:26:41.933$ show that these complex adolescents

NOTE Confidence: 0.846026795

 $00{:}26{:}41.933 \dashrightarrow 00{:}26{:}44.439$ and how all of these pieces come

NOTE Confidence: 0.846026795

00:26:44.439 --> 00:26:46.083 together that actually the NYSARC

NOTE Confidence: 0.846026795

 $00:26:46.083 \longrightarrow 00:26:48.330$ data set that looks, it's an adult

NOTE Confidence: 0.846026795

 $00:26:48.330 \longrightarrow 00:26:51.200$ data set that looks at a nationally

NOTE Confidence: 0.846026795

 $00:26:51.200 \longrightarrow 00:26:52.868$ representative sample across the

NOTE Confidence: 0.846026795

 $00:26:52.868 \longrightarrow 00:26:54.690$ country had, based on self report

NOTE Confidence: 0.846026795

 $00:26:54.690 \longrightarrow 00:26:56.913$ from a dults who had had a lifetime

NOTE Confidence: 0.846026795

 $00{:}26{:}56.913 \dashrightarrow 00{:}26{:}59.097$ diagnosis of eating disorder of an

NOTE Confidence: 0.846026795

00:26:59.097 --> 00:27:00.899 eating disorder showing how high,

NOTE Confidence: 0.846026795

 $00:27:00.900 \longrightarrow 00:27:03.402$ how high suicide attempt rates were.

NOTE Confidence: 0.846026795

 $00{:}27{:}03.402 \dashrightarrow 00{:}27{:}05.571$ So especially in that an orexia

NOTE Confidence: 0.846026795

00:27:05.571 --> 00:27:07.267 binge purge type, so

NOTE Confidence: 0.846026795

00:27:07.270 --> 00:27:08.640 experiencing like a loss of

NOTE Confidence: 0.846026795

00:27:08.640 --> 00:27:10.010 control with eating and purging,

 $00:27:10.010 \longrightarrow 00:27:11.460$ but still having that very

NOTE Confidence: 0.846026795

00:27:11.460 --> 00:27:12.330 significantly low weight.

NOTE Confidence: 0.85519921

 $00:27:14.840 \longrightarrow 00:27:16.664$ And the reality is despite us

NOTE Confidence: 0.85519921

 $00:27:16.664 \longrightarrow 00:27:17.576$ really understanding this,

NOTE Confidence: 0.85519921

 $00:27:17.580 \longrightarrow 00:27:19.569$ we continue to be in a crisis of care

NOTE Confidence: 0.85519921

 $00{:}27{:}19.569 \dashrightarrow 00{:}27{:}21.617$ in treating patients with an orexia.

NOTE Confidence: 0.85519921

 $00:27:21.620 \longrightarrow 00:27:23.096$ And this is true for adolescents.

NOTE Confidence: 0.85519921

00:27:23.100 --> 00:27:24.972 This is a wonderful, a wonderful

NOTE Confidence: 0.85519921

 $00{:}27{:}24.972 \dashrightarrow 00{:}27{:}27.109$ read for any body who has free time,

NOTE Confidence: 0.85519921

 $00:27:27.110 \longrightarrow 00:27:28.538$ just about a page and 1/2 paper

NOTE Confidence: 0.85519921

00:27:28.538 --> 00:27:30.375 that was in the journal JAMA

NOTE Confidence: 0.85519921

 $00:27:30.375 \longrightarrow 00:27:31.845$ Psychiatry last year that highlights

NOTE Confidence: 0.85519921

00:27:31.845 --> 00:27:33.517 kind of all the reasons for this.

NOTE Confidence: 0.85519921

00:27:33.520 --> 00:27:35.669 And why our team is really thinking

NOTE Confidence: 0.85519921

00:27:35.669 --> 00:27:37.349 again about meeting the complex

NOTE Confidence: 0.85519921

 $00{:}27{:}37.349 \dashrightarrow 00{:}27{:}39.431$ needs of a dolescence is how we've

 $00:27:39.431 \longrightarrow 00:27:41.102$ really developed into this siloed

NOTE Confidence: 0.85519921

 $00{:}27{:}41.102 \dashrightarrow 00{:}27{:}42.944$ nature of care from funding sources

NOTE Confidence: 0.85519921

 $00:27:42.944 \longrightarrow 00:27:45.210$ to how clinical care is provided.

NOTE Confidence: 0.85519921

00:27:45.210 --> 00:27:46.862 And why we really have to think

NOTE Confidence: 0.85519921

00:27:46.862 --> 00:27:48.250 about innovative ways of addressing,

NOTE Confidence: 0.85519921

 $00{:}27{:}48.250 \to 00{:}27{:}51.570$ especially through prevention efforts.

NOTE Confidence: 0.85519921

 $00:27:51.570 \longrightarrow 00:27:53.586$ So some of the common evidence based

NOTE Confidence: 0.85519921

 $00{:}27{:}53.586 \dashrightarrow 00{:}27{:}55.291$ treatments for eating disorders and I

NOTE Confidence: 0.85519921

00:27:55.291 --> 00:27:57.132 I often like to say evidence informed

NOTE Confidence: 0.85519921

 $00{:}27{:}57.185 \dashrightarrow 00{:}27{:}58.851$ just because even though and you know

NOTE Confidence: 0.85519921

 $00{:}27{:}58.851 \dashrightarrow 00{:}28{:}01.325$ I think of course very highly of all

NOTE Confidence: 0.85519921

 $00:28:01.325 \longrightarrow 00:28:03.438$ these approaches, is our remission rates

NOTE Confidence: 0.85519921

 $00:28:03.438 \longrightarrow 00:28:05.766$ aren't where we would like them to be.

NOTE Confidence: 0.85519921

 $00:28:05.770 \longrightarrow 00:28:07.624$ So but these are the ones that we

NOTE Confidence: 0.85519921

 $00:28:07.624 \longrightarrow 00:28:09.684$ are often using to when somebody is

 $00:28:09.684 \longrightarrow 00:28:11.183$ engaged in eating disorder treatment

NOTE Confidence: 0.85519921

00:28:11.183 --> 00:28:13.127 I'll hit on some of the most the

NOTE Confidence: 0.85519921

00:28:13.127 --> 00:28:16.120 most common ones and the most

NOTE Confidence: 0.85519921

 $00:28:16.120 \longrightarrow 00:28:18.870$ frequently used. So in adolescents,

NOTE Confidence: 0.85519921

 $00:28:18.870 \longrightarrow 00:28:20.654$ so if you if you have any students

NOTE Confidence: 0.85519921

00:28:20.654 --> 00:28:22.118 or patients that you are seeing

NOTE Confidence: 0.85519921

 $00:28:22.120 \longrightarrow 00:28:24.521$ truly it is restricting and we need

NOTE Confidence: 0.85519921

 $00:28:24.521 \longrightarrow 00:28:27.009$ to focus on weight restoration,

NOTE Confidence: 0.85519921

 $00{:}28{:}27.010 \dashrightarrow 00{:}28{:}29.416$ family based treatment is one of

NOTE Confidence: 0.85519921

00:28:29.416 --> 00:28:31.020 the most effective modalities

NOTE Confidence: 0.85519921

 $00:28:31.090 \longrightarrow 00:28:32.578$ for weight restoration.

NOTE Confidence: 0.85519921

 $00:28:32.580 \longrightarrow 00:28:35.455$ What this therapeutic approach

NOTE Confidence: 0.85519921

 $00{:}28{:}35.455 \dashrightarrow 00{:}28{:}38.914$ entails and is in essence the idea

NOTE Confidence: 0.85519921

 $00:28:38.914 \longrightarrow 00:28:40.666$ that when somebody has entered into

NOTE Confidence: 0.85519921

 $00:28:40.666 \longrightarrow 00:28:42.624$ the eating disorder mindset right, and

NOTE Confidence: 0.85519921

 $00:28:42.624 \longrightarrow 00:28:44.598$ that they're that for an adolescent

 $00:28:44.658 \longrightarrow 00:28:46.555$ that isn't able to think as clearly

NOTE Confidence: 0.85519921

 $00:28:46.555 \longrightarrow 00:28:48.562$ because of the way that it really

NOTE Confidence: 0.85519921

00:28:48.562 --> 00:28:50.350 has kind of taken over thought

NOTE Confidence: 0.85519921

 $00:28:50.419 \longrightarrow 00:28:52.369$ processes and the way that that,

NOTE Confidence: 0.85519921

 $00{:}28{:}52.370 \dashrightarrow 00{:}28{:}53.865$ because of that overvaluation of

NOTE Confidence: 0.85519921

NOTE Confidence: 0.85519921

 $00:28:55.700 \longrightarrow 00:28:57.723$ the way of engaging in things like

NOTE Confidence: 0.85519921

 $00:28:57.723 \longrightarrow 00:28:58.900$ cognitive behavioral strategies.

NOTE Confidence: 0.85519921

 $00:28:58.900 \longrightarrow 00:29:01.014$ The idea from a developmental lens is

NOTE Confidence: 0.85519921

 $00{:}29{:}01.014 \dashrightarrow 00{:}29{:}03.586$ that we have to turn over nurturing the

NOTE Confidence: 0.85519921

 $00:29:03.586 \longrightarrow 00:29:05.920$ the child or adolescent to the parent.

NOTE Confidence: 0.85519921

 $00:29:05.920 \longrightarrow 00:29:06.422$ So this,

NOTE Confidence: 0.85519921

 $00{:}29{:}06.422 \dashrightarrow 00{:}29{:}07.928$ the first phase is the parents

NOTE Confidence: 0.85519921

 $00:29:07.928 \longrightarrow 00:29:09.872$ kind of have to completely take

NOTE Confidence: 0.85519921

 $00:29:09.872 \longrightarrow 00:29:11.597$ over the weight restoration phase.

 $00:29:11.600 \longrightarrow 00:29:13.544$ Then there's a second phase of

NOTE Confidence: 0.85519921

00:29:13.544 --> 00:29:15.509 really trying to transition back over

NOTE Confidence: 0.85519921

 $00:29:15.509 \longrightarrow 00:29:17.321$ control to eating to the adolescent

NOTE Confidence: 0.85519921

00:29:17.321 --> 00:29:18.944 and then thinking before launching

NOTE Confidence: 0.85519921

 $00:29:18.944 \longrightarrow 00:29:21.177$ of how to address some of those

NOTE Confidence: 0.85519921

00:29:21.180 --> 00:29:23.000 factors that may have contributed

NOTE Confidence: 0.85519921

 $00:29:23.000 \longrightarrow 00:29:25.648$ to the eating disorder in the 1st place.

NOTE Confidence: 0.85519921

00:29:25.650 --> 00:29:28.135 Now because of this FBT, or family

NOTE Confidence: 0.85519921

 $00{:}29{:}28.135 \mathrel{--}{>} 00{:}29{:}30.234$ based treatment, is the most

NOTE Confidence: 0.85519921

00:29:30.234 --> 00:29:32.150 effective for weight restoration,

NOTE Confidence: 0.85519921

 $00:29:32.150 \longrightarrow 00:29:33.910$ but it does not work for all families.

NOTE Confidence: 0.85519921

 $00:29:33.910 \longrightarrow 00:29:35.800$ And so this is one of the places that

NOTE Confidence: 0.85519921

 $00:29:35.800 \longrightarrow 00:29:37.596$ we're getting into with these complex

NOTE Confidence: 0.85519921

 $00:29:37.596 \longrightarrow 00:29:39.707$ adolescents is for anybody here and I

NOTE Confidence: 0.85519921

 $00:29:39.707 \longrightarrow 00:29:41.261$ know you know probably everybody here

NOTE Confidence: 0.85519921

 $00:29:41.261 \longrightarrow 00:29:42.964$ who works with children and adolescents,

 $00:29:42.964 \longrightarrow 00:29:45.057$ some of the rule outs for things

NOTE Confidence: 0.85519921

 $00{:}29{:}45.057 \dashrightarrow 00{:}29{:}47.470$ like this are you know the more toxic

NOTE Confidence: 0.85519921

00:29:47.470 --> 00:29:49.444 or negative family dynamics or any

NOTE Confidence: 0.85519921

 $00:29:49.444 \longrightarrow 00:29:51.208$ issues in the family system that

NOTE Confidence: 0.85519921

00:29:51.208 --> 00:29:53.410 would get in the way of treatment.

NOTE Confidence: 0.853328585666667

 $00:29:53.410 \longrightarrow 00:29:55.265$ That parents have to be available to

NOTE Confidence: 0.853328585666667

 $00:29:55.265 \longrightarrow 00:29:57.415$ do refeeding at all the meals and be

NOTE Confidence: 0.853328585666667

 $00{:}29{:}57.415 \dashrightarrow 00{:}29{:}59.070$ monitoring those things and if there

NOTE Confidence: 0.853328585666667

 $00{:}29{:}59.070 \dashrightarrow 00{:}30{:}00.876$ are things like co-occurring suicidality

NOTE Confidence: 0.853328585666667

 $00:30:00.876 \dashrightarrow 00:30:02.902$ or high risk behaviors that it's

NOTE Confidence: 0.853328585666667

 $00:30:02.902 \longrightarrow 00:30:05.146$ it's often a counter indicator for

NOTE Confidence: 0.853328585666667

 $00:30:05.146 \longrightarrow 00:30:07.358$ family based treatment alone, itself.

NOTE Confidence: 0.853328585666667

 $00:30:07.360 \dashrightarrow 00:30:10.167$ So that makes, as we're seeing this

NOTE Confidence: 0.853328585666667

 $00:30:10.167 \longrightarrow 00:30:13.110$ uptick this uptick in very complex cases,

NOTE Confidence: 0.853328585666667

 $00:30:13.110 \longrightarrow 00:30:14.790$ often things that we can pull from

00:30:14.790 --> 00:30:15.510 for this approach,

NOTE Confidence: 0.853328585666667

 $00:30:15.510 \longrightarrow 00:30:17.974$ but can be difficult to only

NOTE Confidence: 0.853328585666667

 $00:30:17.974 \longrightarrow 00:30:20.374$ implement when we have to address

NOTE Confidence: 0.853328585666667

 $00:30:20.374 \longrightarrow 00:30:22.484$ these other high risk concerns.

NOTE Confidence: 0.853328585666667

 $00:30:22.490 \longrightarrow 00:30:24.422$ Some of the other strategies then

NOTE Confidence: 0.853328585666667

 $00:30:24.422 \longrightarrow 00:30:26.909$ that we think about as well are

NOTE Confidence: 0.853328585666667

00:30:26.909 --> 00:30:28.794 things pulling from for example

NOTE Confidence: 0.853328585666667

 $00:30:28.794 \longrightarrow 00:30:30.100$ cognitive behavior therapy.

NOTE Confidence: 0.853328585666667

 $00:30:30.100 \longrightarrow 00:30:32.206$ So what CBT for eating disorders

NOTE Confidence: 0.853328585666667

 $00:30:32.206 \longrightarrow 00:30:35.334$ looks at is in essence a multi stage

NOTE Confidence: 0.853328585666667

 $00:30:35.334 \longrightarrow 00:30:37.800$ approach of both kind of starting

NOTE Confidence: 0.853328585666667

 $00:30:37.878 \longrightarrow 00:30:40.720$ with where somebody is at right after,

NOTE Confidence: 0.853328585666667

 $00:30:40.720 \longrightarrow 00:30:42.850$ especially more so after that immediate

NOTE Confidence: 0.853328585666667

 $00:30:42.850 \longrightarrow 00:30:45.007$ weight restoration that we need some

NOTE Confidence: 0.853328585666667

 $00:30:45.007 \longrightarrow 00:30:46.359$ stabilization there because again

NOTE Confidence: 0.853328585666667

 $00:30:46.359 \longrightarrow 00:30:48.928$ if somebody is in such a place of

 $00:30:48.928 \longrightarrow 00:30:51.248$ starvation or malnutrition engaging

NOTE Confidence: 0.853328585666667

00:30:51.248 --> 00:30:53.276 in cognitive strategies

NOTE Confidence: 0.853328585666667

 $00:30:53.280 \longrightarrow 00:30:55.898$ to change thoughts is you know an

NOTE Confidence: 0.853328585666667

00:30:55.898 --> 00:30:58.129 untenable task in a lot of ways.

NOTE Confidence: 0.853328585666667

 $00{:}30{:}58.130 \dashrightarrow 00{:}31{:}00.314$ So we have to have that immediate

NOTE Confidence: 0.853328585666667

 $00:31:00.314 \longrightarrow 00:31:01.901$ stabilization and then we're focusing

NOTE Confidence: 0.853328585666667

 $00:31:01.901 \longrightarrow 00:31:03.966$ on really what are the roots of

NOTE Confidence: 0.853328585666667

 $00:31:03.966 \dashrightarrow 00:31:05.948$ what's kind of perpetuated the

NOTE Confidence: 0.853328585666667

 $00:31:05.948 \longrightarrow 00:31:07.166$ disordered eating behavior.

NOTE Confidence: 0.853328585666667

 $00{:}31{:}07.170 \dashrightarrow 00{:}31{:}09.378$ So things related to body image

NOTE Confidence: 0.853328585666667

 $00:31:09.378 \longrightarrow 00:31:11.363$ and addressing those concerns, the

NOTE Confidence: 0.853328585666667

00:31:11.363 --> 00:31:12.249 dietary restraint,

NOTE Confidence: 0.853328585666667

 $00{:}31{:}12.250 \longrightarrow 00{:}31{:}13.660$ how do we just restructure our

NOTE Confidence: 0.853328585666667

 $00:31:13.660 \longrightarrow 00:31:15.599$ schedule in day to make sure getting

NOTE Confidence: 0.853328585666667

 $00:31:15.599 \longrightarrow 00:31:17.184$ enough, and then identifying events,

 $00:31:17.190 \longrightarrow 00:31:19.510$ moods and stressors and preparing

NOTE Confidence: 0.853328585666667

 $00:31:19.510 \longrightarrow 00:31:22.432$ to address for what could be

NOTE Confidence: 0.853328585666667

 $00:31:22.432 \longrightarrow 00:31:24.508$ more stressors moving forward.

NOTE Confidence: 0.853328585666667

 $00:31:24.510 \longrightarrow 00:31:25.970$ Another very interesting approach

NOTE Confidence: 0.853328585666667

 $00:31:25.970 \longrightarrow 00:31:28.160$ that people pull from is I'm

NOTE Confidence: 0.853328585666667

 $00{:}31{:}28.220 \dashrightarrow 00{:}31{:}30.692$ sure folks here are familiar with

NOTE Confidence: 0.853328585666667

00:31:30.692 --> 00:31:31.928 dialectical behavior therapy.

NOTE Confidence: 0.853328585666667

 $00:31:31.930 \longrightarrow 00:31:34.190$ What radically open dialectical behavior

NOTE Confidence: 0.853328585666667

00:31:34.190 --> 00:31:37.090 therapy is actually almost the opposite,

NOTE Confidence: 0.853328585666667

 $00:31:37.090 \longrightarrow 00:31:38.784$ to the extent or another end

NOTE Confidence: 0.853328585666667

 $00:31:38.784 \longrightarrow 00:31:39.510$ of the spectrum.

NOTE Confidence: 0.853328585666667

 $00:31:39.510 \longrightarrow 00:31:42.352$ So with the idea of DBT being

NOTE Confidence: 0.853328585666667

00:31:42.352 --> 00:31:44.491 for presentations of severe

NOTE Confidence: 0.853328585666667

00:31:44.491 --> 00:31:46.169 emotional dysregulation,

NOTE Confidence: 0.853328585666667

00:31:46.170 --> 00:31:49.010 radically open DBT focuses on

NOTE Confidence: 0.853328585666667

 $00{:}31{:}49.010 \dashrightarrow 00{:}31{:}51.850$ presentations of maladaptive over control.

 $00:31:51.850 \longrightarrow 00:31:54.066$ So you think about, and the idea with

NOTE Confidence: 0.853328585666667

 $00:31:54.070 \longrightarrow 00:31:54.474$ um,

NOTE Confidence: 0.853328585666667

00:31:54.474 --> 00:31:56.898 with individuals or youth with that,

NOTE Confidence: 0.853328585666667

 $00:31:56.900 \longrightarrow 00:31:59.150$ with something like anorexia are

NOTE Confidence: 0.853328585666667

 $00:31:59.150 \longrightarrow 00:32:00.950$ often very disconnected from

NOTE Confidence: 0.853328585666667

00:32:00.950 --> 00:32:03.279 others, socially isolating, feeling

NOTE Confidence: 0.853328585666667

 $00:32:03.280 \longrightarrow 00:32:04.700$ a distance that leads to

NOTE Confidence: 0.853328585666667

 $00:32:04.700 \longrightarrow 00:32:05.836$ the depression and anxiety,

NOTE Confidence: 0.853328585666667

 $00:32:05.840 \longrightarrow 00:32:07.877$ and really wanting to mask those feelings.

NOTE Confidence: 0.853328585666667 00:32:07.880 --> 00:32:08.422 And so, NOTE Confidence: 0.853328585666667

 $00:32:08.422 \longrightarrow 00:32:10.319$ so much of what the approach here

NOTE Confidence: 0.853328585666667

 $00:32:10.319 \longrightarrow 00:32:12.400$ is about being able to engage

NOTE Confidence: 0.853328585666667

 $00:32:12.400 \longrightarrow 00:32:13.796$ in more open expression,

NOTE Confidence: 0.853328585666667

00:32:13.800 --> 00:32:15.440 becoming more socially connected,

NOTE Confidence: 0.853328585666667

 $00:32:15.440 \longrightarrow 00:32:17.080$ feeling safe and secure.

 $00:32:17.080 \longrightarrow 00:32:19.560$ So it really is focusing in some ways

NOTE Confidence: 0.853328585666667

 $00{:}32{:}19.560 \dashrightarrow 00{:}32{:}22.318$ similar to other approaches of that

NOTE Confidence: 0.853328585666667

 $00:32:22.318 \longrightarrow 00:32:24.386$ social and interpersonal connectedness.

NOTE Confidence: 0.853328585666667

 $00:32:24.390 \longrightarrow 00:32:26.470$ I always like to bring this one into

NOTE Confidence: 0.853328585666667

 $00:32:26.470 \dashrightarrow 00:32:28.826$ the talk as well because I think that

NOTE Confidence: 0.853328585666667

 $00:32:28.826 \longrightarrow 00:32:30.741$ it highlights even the model

NOTE Confidence: 0.853328585666667

 $00:32:30.741 \longrightarrow 00:32:32.421$ here highlights why the pandemic

NOTE Confidence: 0.853328585666667

 $00:32:32.421 \longrightarrow 00:32:34.576$ was so damaging for eating disorders

NOTE Confidence: 0.853328585666667

 $00:32:34.576 \longrightarrow 00:32:36.486$ is we're saying being socially

NOTE Confidence: 0.853328585666667

 $00:32:36.486 \longrightarrow 00:32:38.747$ connected to others is so protective

NOTE Confidence: 0.853328585666667

 $00{:}32{:}38.747 \dashrightarrow 00{:}32{:}40.537$ for eating disorders because you

NOTE Confidence: 0.853328585666667

 $00{:}32{:}40.537 \dashrightarrow 00{:}32{:}42.677$ you know if you're so isolated and

NOTE Confidence: 0.853328585666667

 $00{:}32{:}42.677 \dashrightarrow 00{:}32{:}44.338$ so focused on the eating disorder

NOTE Confidence: 0.853328585666667

 $00{:}32{:}44.338 \dashrightarrow 00{:}32{:}45.608$ and the restricting the foods,

NOTE Confidence: 0.853328585666667

 $00:32:45.610 \longrightarrow 00:32:47.415$ itself that being connected

NOTE Confidence: 0.853328585666667

 $00{:}32{:}47.415 \dashrightarrow 00{:}32{:}49.220$ with others is really protective

 $00{:}32{:}49.278 \dashrightarrow 00{:}32{:}51.217$ against that and that was taken

NOTE Confidence: 0.853328585666667

 $00{:}32{:}51.217 \dashrightarrow 00{:}32{:}52.832$ away during the pandemic and had

NOTE Confidence: 0.853328585666667

 $00:32:52.832 \longrightarrow 00:32:54.272$ to be for the sake of

NOTE Confidence: 0.7826165

 $00:32:54.280 \longrightarrow 00:32:55.180$ of isolation.

NOTE Confidence: 0.890410156333333

 $00:32:57.440 \longrightarrow 00:32:59.428$ And then there is an approach here

NOTE Confidence: 0.890410156333333

 $00{:}32{:}59.428 {\:{\circ}{\circ}{\circ}\:} 00{:}33{:}01.348$ thinking of some almost just pragmatic

NOTE Confidence: 0.890410156333333

 $00:33:01.348 \longrightarrow 00:33:03.693$ and having resources for folks

NOTE Confidence: 0.890410156333333

 $00:33:03.749 \longrightarrow 00:33:05.702$ here that are looking for you know,

NOTE Confidence: 0.890410156333333

 $00{:}33{:}05.702 \dashrightarrow 00{:}33{:}07.460$ I'm seeing some some students or

NOTE Confidence: 0.890410156333333

 $00:33:07.460 \longrightarrow 00:33:09.166$ people that I work with some eating

NOTE Confidence: 0.890410156333333

00:33:09.166 --> 00:33:11.056 concerns that I would like to address.

NOTE Confidence: 0.890410156333333

00:33:11.060 --> 00:33:13.796 It's not needing to go to a specialty

NOTE Confidence: 0.890410156333333

 $00{:}33{:}13.796 \dashrightarrow 00{:}33{:}15.825$ eating disorder facility or requiring

NOTE Confidence: 0.890410156333333

 $00:33:15.825 \longrightarrow 00:33:18.381$ that type of intervention, is the

NOTE Confidence: 0.890410156333333

 $00:33:18.381 \longrightarrow 00:33:20.099$ integrative modalities therapy.

 $00:33:20.100 \longrightarrow 00:33:21.804$ So in essence what the authors did here

NOTE Confidence: 0.890410156333333

 $00:33:21.804 \longrightarrow 00:33:23.547$ was take a number of the treatment

NOTE Confidence: 0.890410156333333

 $00{:}33{:}23.547 \dashrightarrow 00{:}33{:}24.812$ approaches and create a buffet.

NOTE Confidence: 0.890410156333333

 $00:33:24.820 \longrightarrow 00:33:26.787$ So it's not a a structured protocol.

NOTE Confidence: 0.890410156333333

 $00:33:26.790 \longrightarrow 00:33:29.283$ Um, it is a manual but basically takes a

NOTE Confidence: 0.890410156333333

 $00{:}33{:}29.283 \dashrightarrow 00{:}33{:}31.478$ lot of the evidence based interventions

NOTE Confidence: 0.890410156333333

 $00:33:31.478 \longrightarrow 00:33:34.243$ that we have for eating concerns and

NOTE Confidence: 0.890410156333333

 $00:33:34.243 \longrightarrow 00:33:36.769$ has resources both for clinicians to

NOTE Confidence: 0.890410156333333

00:33:36.769 --> 00:33:38.900 utilize different formats used for group,

NOTE Confidence: 0.890410156333333

 $00:33:38.900 \longrightarrow 00:33:39.860$ for parent work,

NOTE Confidence: 0.890410156333333

00:33:39.860 --> 00:33:41.595 for individual work that

NOTE Confidence: 0.890410156333333

 $00:33:41.595 \longrightarrow 00:33:43.799$ hits on the foundations of these

NOTE Confidence: 0.890410156333333

 $00{:}33{:}43.799 \dashrightarrow 00{:}33{:}45.799$ different ones that I mentioned.

NOTE Confidence: 0.890410156333333

 $00:33:45.800 \longrightarrow 00:33:47.672$ So they take the foundations of

NOTE Confidence: 0.890410156333333

00:33:47.672 --> 00:33:49.267 family based treatment and doing

NOTE Confidence: 0.890410156333333

 $00:33:49.267 \longrightarrow 00:33:51.007$ some family work without having to

 $00:33:51.007 \longrightarrow 00:33:53.199$ do purely the family based treatment

NOTE Confidence: 0.890410156333333

 $00:33:53.199 \longrightarrow 00:33:55.299$ model, using acceptance and mindfulness

NOTE Confidence: 0.890410156333333

00:33:55.299 --> 00:33:57.283 based approaches, focusing on again

NOTE Confidence: 0.890410156333333

 $00:33:57.283 \longrightarrow 00:33:59.188$ because that dietary restraint that

NOTE Confidence: 0.890410156333333

00:33:59.188 --> 00:34:01.595 pack and happens, engaging in more

NOTE Confidence: 0.890410156333333

 $00:34:01.595 \longrightarrow 00:34:03.575$ regulative and appetite of eating.

NOTE Confidence: 0.890410156333333

 $00:34:03.580 \longrightarrow 00:34:05.589$ So that structure of how to

NOTE Confidence: 0.890410156333333

 $00{:}34{:}05.589 \dashrightarrow 00{:}34{:}07.524$ reconfigure those cues to let you know

NOTE Confidence: 0.890410156333333

 $00{:}34{:}07.524 \dashrightarrow 00{:}34{:}09.472$ when you're hungry and full and then

NOTE Confidence: 0.890410156333333

 $00{:}34{:}09.472 \dashrightarrow 00{:}34{:}11.277$ really focusing on body acceptance.

NOTE Confidence: 0.890410156333333

 $00:34:11.280 \longrightarrow 00:34:11.527$ So,

NOTE Confidence: 0.890410156333333

 $00:34:11.527 \longrightarrow 00:34:13.503$ so this is a wonderful one that I

NOTE Confidence: 0.890410156333333

 $00{:}34{:}13.503 \dashrightarrow 00{:}34{:}15.747$ think is a great resource for any body

NOTE Confidence: 0.890410156333333

 $00{:}34{:}15.747 \dashrightarrow 00{:}34{:}17.675$ working with students or patients

NOTE Confidence: 0.890410156333333

00:34:17.675 --> 00:34:19.979 in these age ranges because it does

 $00:34:19.980 \longrightarrow 00:34:22.076$ have the pieces that you can kind of

NOTE Confidence: 0.890410156333333

00:34:22.076 --> 00:34:24.151 pull from and you can download what

NOTE Confidence: 0.890410156333333

00:34:24.151 --> 00:34:25.997 why you can't download the whole

NOTE Confidence: 0.890410156333333

00:34:25.997 --> 00:34:27.809 manual online and it does have

NOTE Confidence: 0.890410156333333

 $00:34:27.810 \longrightarrow 00:34:29.060$ to be purchased they are,

NOTE Confidence: 0.890410156333333

 $00:34:29.060 \longrightarrow 00:34:30.929$ I do highlight that all of their

NOTE Confidence: 0.890410156333333

00:34:30.929 --> 00:34:32.382 worksheets and things are freely

NOTE Confidence: 0.890410156333333

 $00:34:32.382 \longrightarrow 00:34:33.887$ available online and they have

NOTE Confidence: 0.890410156333333

 $00:34:33.887 \longrightarrow 00:34:35.439$ available for folks to download.

NOTE Confidence: 0.865280381333334

 $00:34:37.640 \longrightarrow 00:34:40.259$ So before and, trying to be mindful of making

NOTE Confidence: 0.865280381333334

 $00:34:40.259 \longrightarrow 00:34:42.696$ time for discussion points or questions,

NOTE Confidence: 0.865280381333334

 $00:34:42.700 \longrightarrow 00:34:44.374$ I do want to hit on some of the

NOTE Confidence: 0.865280381333334

 $00:34:44.374 \longrightarrow 00:34:46.036$ things that are most effective here.

NOTE Confidence: 0.865280381333334

 $00:34:46.040 \longrightarrow 00:34:48.126$ And one we're thinking about what this

NOTE Confidence: 0.865280381333334

00:34:48.126 --> 00:34:50.009 uptick in concerns and what's actually

NOTE Confidence: 0.865280381333334

 $00:34:50.009 \longrightarrow 00:34:52.172$ most effective to caring for youth with

 $00:34:52.228 \longrightarrow 00:34:53.926$ these concerns is that early detection

NOTE Confidence: 0.865280381333334

 $00:34:53.926 \longrightarrow 00:34:55.626$ is the the most effective thing.

NOTE Confidence: 0.865280381333334

00:34:55.626 --> 00:34:57.324 So it is, unfortunately we've gotten

NOTE Confidence: 0.865280381333334

 $00:34:57.324 \longrightarrow 00:34:59.057$ to this place with the crisis and

NOTE Confidence: 0.865280381333334

 $00:34:59.057 \longrightarrow 00:35:01.050$ care that we're in of having to be so

NOTE Confidence: 0.865280381333334

 $00:35:01.050 \longrightarrow 00:35:02.597$ reactive that a lot of times people

NOTE Confidence: 0.865280381333334

00:35:02.597 --> 00:35:04.676 aren't able to access care until you

NOTE Confidence: 0.865280381333334

 $00:35:04.676 \dashrightarrow 00:35:06.479$ are requiring going to the hospital.

NOTE Confidence: 0.865280381333334

 $00:35:06.480 \longrightarrow 00:35:08.712$ But really what we know, because

NOTE Confidence: 0.865280381333334

 $00:35:08.712 \dashrightarrow 00:35:10.679$ how these presentations can become

NOTE Confidence: 0.865280381333334

 $00:35:10.679 \longrightarrow 00:35:13.139$ so severe and protracted, is early

NOTE Confidence: 0.865280381333334

 $00:35:13.139 \longrightarrow 00:35:15.085$ detection and addressing those things

NOTE Confidence: 0.865280381333334

 $00{:}35{:}15.085 \dashrightarrow 00{:}35{:}16.705$ that can lead to those,

NOTE Confidence: 0.865280381333334

 $00:35:16.710 \longrightarrow 00:35:17.954$ those very severe presentations

NOTE Confidence: 0.865280381333334

 $00:35:17.954 \longrightarrow 00:35:20.450$ is going to be the most effective.

 $00:35:20.450 \longrightarrow 00:35:22.766$ And so there are some really

NOTE Confidence: 0.865280381333334

 $00{:}35{:}22.766 \to 00{:}35{:}24.310$ wonderful prevention programs that

NOTE Confidence: 0.865280381333334

 $00:35:24.376 \longrightarrow 00:35:25.906$ are really aimed at this.

NOTE Confidence: 0.865280381333334

 $00:35:25.910 \longrightarrow 00:35:28.334$ So one thinking specifically to school

NOTE Confidence: 0.865280381333334

 $00:35:28.334 \longrightarrow 00:35:30.792$ systems but have been implemented in

NOTE Confidence: 0.865280381333334

 $00:35:30.792 \longrightarrow 00:35:33.096$ other settings are things known as

NOTE Confidence: 0.865280381333334

00:35:33.096 --> 00:35:36.702 the body project. So for folks who

NOTE Confidence: 0.865280381333334

 $00:35:36.702 \longrightarrow 00:35:37.818$ aren't familiar,

NOTE Confidence: 0.865280381333334

 $00:35:37.820 \longrightarrow 00:35:40.070$ it's what's called a cognitive

NOTE Confidence: 0.865280381333334

 $00:35:40.070 \longrightarrow 00:35:41.420$ dissonance based program.

NOTE Confidence: 0.865280381333334

 $00:35:41.420 \longrightarrow 00:35:43.388$ It was actually developed to be

NOTE Confidence: 0.865280381333334

 $00:35:43.388 \longrightarrow 00:35:45.390$ implemented in high schools with

NOTE Confidence: 0.865280381333334

 $00:35:45.390 \longrightarrow 00:35:47.595$ with high school girls and what it

NOTE Confidence: 0.865280381333334

 $00:35:47.595 \longrightarrow 00:35:49.650$ does is really engender or promote

NOTE Confidence: 0.865280381333334

 $00:35:49.650 \longrightarrow 00:35:51.671$ a positive body image and social

NOTE Confidence: 0.865280381333334

 $00:35:51.671 \longrightarrow 00:35:53.777$ connectedness with the idea of then

 $00{:}35{:}53.777 \dashrightarrow 00{:}35{:}55.819$ being a preventative approach to

NOTE Confidence: 0.865280381333334

 $00:35:55.819 \longrightarrow 00:35:57.675$ developing disordered eating concerns.

NOTE Confidence: 0.865280381333334

00:35:57.680 --> 00:35:59.416 Now of course during the course of

NOTE Confidence: 0.865280381333334

 $00:35:59.416 \longrightarrow 00:36:01.505$ the pandemic when at home for all the

NOTE Confidence: 0.865280381333334

 $00:36:01.505 \longrightarrow 00:36:02.795$ reasons that our behavioral health

NOTE Confidence: 0.865280381333334

 $00:36:02.846 \longrightarrow 00:36:04.508$ concerns escalated in the 1st place

NOTE Confidence: 0.865280381333334

 $00:36:04.508 \longrightarrow 00:36:06.017$ was quite difficult to implement.

NOTE Confidence: 0.865280381333334

 $00:36:06.017 \longrightarrow 00:36:09.193$ So what the the approach does is really

NOTE Confidence: 0.865280381333334

00:36:09.193 --> 00:36:11.189 challenge unwanted body comments,

NOTE Confidence: 0.865280381333334

00:36:11.190 --> 00:36:13.665 focuses on improving body image

NOTE Confidence: 0.865280381333334

 $00:36:13.665 \longrightarrow 00:36:15.150$ and connects other,

NOTE Confidence: 0.865280381333334

 $00:36:15.150 \longrightarrow 00:36:17.100$ connects students and patients with

NOTE Confidence: 0.865280381333334

 $00{:}36{:}17.100 \dashrightarrow 00{:}36{:}19.548$ others that are impacted by the

NOTE Confidence: 0.865280381333334

 $00{:}36{:}19.548 \dashrightarrow 00{:}36{:}21.280$ complicated relationship of food

NOTE Confidence: 0.865280381333334

 $00:36:21.280 \longrightarrow 00:36:23.479$ and exercise and really focuses

 $00:36:23.479 \longrightarrow 00:36:24.808$ on that validation.

NOTE Confidence: 0.865280381333334

00:36:24.810 --> 00:36:25.716 Because again,

NOTE Confidence: 0.865280381333334

00:36:25.716 --> 00:36:27.981 eating disorders are such isolating

NOTE Confidence: 0.865280381333334

 $00:36:27.981 \longrightarrow 00:36:29.710$ presentations that really feeling

NOTE Confidence: 0.865280381333334

 $00:36:29.710 \longrightarrow 00:36:31.838$ connected to others and validated in a,

NOTE Confidence: 0.865280381333334

 $00:36:31.838 \longrightarrow 00:36:34.657$ is a way of being protected and commits

NOTE Confidence: 0.865280381333334

 $00:36:34.657 \longrightarrow 00:36:36.936$ to making positive change as a group.

NOTE Confidence: 0.865280381333334

 $00{:}36{:}36{.}936 \dashrightarrow 00{:}36{:}38{.}910$ So for folks that that are interested

NOTE Confidence: 0.865280381333334

 $00:36:38.975 \longrightarrow 00:36:41.152$ just to provide one resource and

NOTE Confidence: 0.865280381333334

00:36:41.152 --> 00:36:43.349 know no conflicts of interest on my

NOTE Confidence: 0.865280381333334

 $00{:}36{:}43.349 \dashrightarrow 00{:}36{:}45.149$ end to disclose just thinking more

NOTE Confidence: 0.865280381333334

 $00:36:45.150 \longrightarrow 00:36:46.670$ of resources that are available.

NOTE Confidence: 0.865280381333334

00:36:46.670 --> 00:36:48.386 They do have workshops and things

NOTE Confidence: 0.865280381333334

 $00:36:48.386 \longrightarrow 00:36:50.229$ online to both train individuals who

NOTE Confidence: 0.865280381333334

 $00:36:50.229 \longrightarrow 00:36:52.167$ are interested in running such groups

NOTE Confidence: 0.865280381333334

 $00:36:52.167 \longrightarrow 00:36:54.114$ or even providing to students and

 $00:36:54.114 \longrightarrow 00:36:55.986$ families and patients of, for some

NOTE Confidence: 0.865280381333334

 $00{:}36{:}55.990 \dashrightarrow 00{:}36{:}57.886$ of their online resources as well

NOTE Confidence: 0.865280381333334

 $00:36:57.890 \longrightarrow 00:37:00.020$ that really focuses on again that

NOTE Confidence: 0.865280381333334

 $00:37:00.020 \longrightarrow 00:37:01.838$ way of engendering healthy body

NOTE Confidence: 0.865280381333334

 $00:37:01.838 \longrightarrow 00:37:03.860$ images and self esteem within the

NOTE Confidence: 0.865280381333334

 $00:37:03.860 \longrightarrow 00:37:05.679$ school systems and really addressing

NOTE Confidence: 0.865280381333334

 $00:37:05.679 \longrightarrow 00:37:07.539$ more of that prevention.

NOTE Confidence: 0.865280381333334

 $00:37:07.540 \longrightarrow 00:37:10.924$ As opposed to why do we react when somebody,

NOTE Confidence: 0.865280381333334

 $00:37:10.930 \longrightarrow 00:37:12.460$ when something develops so significantly

NOTE Confidence: 0.865280381333334

 $00:37:12.460 \longrightarrow 00:37:14.470$ to require being in the hospital.

NOTE Confidence: 0.865280381333334

 $00:37:14.470 \longrightarrow 00:37:16.255$ But these all these things that we

NOTE Confidence: 0.865280381333334

 $00:37:16.255 \longrightarrow 00:37:18.308$ know that are risk factors for getting

NOTE Confidence: 0.865280381333334

 $00{:}37{:}18.308 \dashrightarrow 00{:}37{:}20.156$ to that point and really building

NOTE Confidence: 0.865280381333334

00:37:20.214 --> 00:37:21.818 more healthful both connections

NOTE Confidence: 0.865280381333334

 $00:37:21.818 \longrightarrow 00:37:23.823$ with others and healthful practices,

 $00:37:23.830 \longrightarrow 00:37:26.962$ learning those things early on in

NOTE Confidence: 0.865280381333334

 $00{:}37{:}26.962 \dashrightarrow 00{:}37{:}29.134$ a validating environment. OK.

NOTE Confidence: 0.865280381333334

 $00:37:29.134 \longrightarrow 00:37:32.758$ And I will stop there

NOTE Confidence: 0.907761066

 $00:37:32.760 \longrightarrow 00:37:35.752$ and would be open to any questions that

NOTE Confidence: 0.907761066

 $00:37:35.752 \longrightarrow 00:37:38.490$ that have been raised by the group.

NOTE Confidence: 0.638663212

 $00:37:42.990 \longrightarrow 00:37:46.490$ So I unmuted Nicole.

NOTE Confidence: 0.638663212

 $00{:}37{:}46.490 \dashrightarrow 00{:}37{:}48.722$ I don't know if you want to ask your

NOTE Confidence: 0.638663212

 $00:37:48.722 \longrightarrow 00:37:50.409$ question or you want me to ask it.

NOTE Confidence: 0.945946922857143

 $00{:}37{:}51.350 \dashrightarrow 00{:}37{:}54.654$ Oh yeah, I can definitely do that.

NOTE Confidence: 0.945946922857143

00:37:54.660 --> 00:37:58.012 My biggest struggle is I work with younger

NOTE Confidence: 0.945946922857143

 $00{:}37{:}58.012 \dashrightarrow 00{:}38{:}00.922$ adolescents and I can usually see risk

NOTE Confidence: 0.945946922857143

 $00:38:00.922 \longrightarrow 00:38:03.505$ factors for eating disorders and they're

NOTE Confidence: 0.945946922857143

 $00:38:03.505 \longrightarrow 00:38:06.095$ not meeting criteria for diagnosis.

NOTE Confidence: 0.945946922857143

 $00:38:06.100 \longrightarrow 00:38:09.220$ What would you suggest as the best treatment,

NOTE Confidence: 0.945946922857143

 $00:38:09.220 \longrightarrow 00:38:12.200$ especially if there's minimal parent

NOTE Confidence: 0.945946922857143

 $00:38:12.200 \longrightarrow 00:38:15.733$ engagement and their behaviors can be

00:38:15.733 --> 00:38:18.166 impacting the risk? For reference,

NOTE Confidence: 0.945946922857143

 $00:38:18.166 \dashrightarrow 00:38:21.827$ I'm in a school based clinical setting.

NOTE Confidence: 0.945946922857143

 $00:38:21.830 \longrightarrow 00:38:24.502$ Nicole, it's a really great question and I

NOTE Confidence: 0.945946922857143

 $00:38:24.502 \longrightarrow 00:38:27.125$ think that this is a crux of some of our,

NOTE Confidence: 0.945946922857143

 $00:38:27.130 \dashrightarrow 00:38:29.048$ I guess to highlight why I think

NOTE Confidence: 0.945946922857143

 $00:38:29.048 \longrightarrow 00:38:31.004$ preventative work is so much more important

NOTE Confidence: 0.945946922857143

 $00:38:31.004 \longrightarrow 00:38:33.482$ is there's this whole idea of like a

NOTE Confidence: 0.945946922857143

 $00{:}38{:}33.482 \dashrightarrow 00{:}38{:}35.096$ clinical staging model of probably what

NOTE Confidence: 0.945946922857143

 $00{:}38{:}35.096 \dashrightarrow 00{:}38{:}37.212$ you are seeing are the patients that

NOTE Confidence: 0.945946922857143

00:38:37.212 --> 00:38:38.850 if when intervention doesn't happen,

NOTE Confidence: 0.945946922857143

00:38:38.850 --> 00:38:41.368 we end up seeing those more, you know,

NOTE Confidence: 0.945946922857143

 $00:38:41.368 \longrightarrow 00:38:43.213$ severe presentations and that question

NOTE Confidence: 0.945946922857143

 $00{:}38{:}43.213 \dashrightarrow 00{:}38{:}46.288$ comes up of why don't we intervene earlier.

NOTE Confidence: 0.945946922857143

 $00:38:46.290 \longrightarrow 00:38:47.088$ To that point,

NOTE Confidence: 0.945946922857143

00:38:47.088 --> 00:38:48.684 I completely hear what you're saying.

 $00:38:48.690 \longrightarrow 00:38:50.522$ We're then it's hard to often get parental

NOTE Confidence: 0.945946922857143

 $00:38:50.522 \longrightarrow 00:38:52.250$ engagement to get the appropriate resources.

NOTE Confidence: 0.94594692285714300:38:52.250 --> 00:38:52.587 Right.

NOTE Confidence: 0.945946922857143

 $00:38:52.587 \longrightarrow 00:38:54.609$ Because if somebody's not meeting criteria

NOTE Confidence: 0.945946922857143

 $00:38:54.609 \longrightarrow 00:38:56.689$ for a diagnosis that we can put down

NOTE Confidence: 0.945946922857143

 $00:38:56.689 \longrightarrow 00:38:58.734$ all the, all of the things that can make

NOTE Confidence: 0.945946922857143

 $00:38:58.734 \longrightarrow 00:39:00.591$ it more of a challenge for providers.

NOTE Confidence: 0.945946922857143

00:39:00.591 --> 00:39:04.110 I think really what I what we know

NOTE Confidence: 0.945946922857143

00:39:04.193 --> 00:39:07.089 across eating disorder presentations,

NOTE Confidence: 0.945946922857143

 $00:39:07.090 \longrightarrow 00:39:09.298$ what are some of the underlying

NOTE Confidence: 0.945946922857143

 $00{:}39{:}09.300 \dashrightarrow 00{:}39{:}11.544$ challenges with the exception of those

NOTE Confidence: 0.945946922857143

 $00:39:11.544 \longrightarrow 00:39:14.226$ that are more related to like food

NOTE Confidence: 0.945946922857143

00:39:14.226 --> 00:39:16.987 sensitivity and if it truly is like

NOTE Confidence: 0.945946922857143

 $00:39:16.987 \longrightarrow 00:39:19.491$ a fear avoidance of textures or

NOTE Confidence: 0.945946922857143

 $00:39:19.491 \longrightarrow 00:39:22.289$ or pain, is the the benefits of body

NOTE Confidence: 0.945946922857143 00:39:22.290 --> 00:39:22.643 acceptance.

00:39:22.643 --> 00:39:25.114 So this is true of whether somebody's

NOTE Confidence: 0.945946922857143

 $00:39:25.114 \longrightarrow 00:39:27.208$ experiencing more loss of control or

NOTE Confidence: 0.945946922857143

 $00:39:27.208 \longrightarrow 00:39:28.868$ purging behaviors or more restrictive

NOTE Confidence: 0.945946922857143

 $00:39:28.868 \longrightarrow 00:39:30.602$ eating is really engendering and

NOTE Confidence: 0.945946922857143

 $00:39:30.602 \longrightarrow 00:39:31.946$ focusing on those pieces.

NOTE Confidence: 0.945946922857143

 $00:39:31.950 \longrightarrow 00:39:33.805$ So that even though it's the

NOTE Confidence: 0.945946922857143

 $00:39:33.805 \longrightarrow 00:39:35.295$ interesting part of eating disorder

NOTE Confidence: 0.945946922857143

 $00:39:35.295 \longrightarrow 00:39:37.215$ treatment of when somebody has developed

NOTE Confidence: 0.945946922857143

00:39:37.215 --> 00:39:38.772 a very, very severe presentation,

NOTE Confidence: 0.945946922857143

 $00{:}39{:}38.772 \dashrightarrow 00{:}39{:}41.286$ almost what we have to do to stabilize

NOTE Confidence: 0.945946922857143

 $00:39:41.286 \longrightarrow 00:39:43.533$ them is so opposite of what

NOTE Confidence: 0.945946922857143

 $00:39:43.533 \longrightarrow 00:39:45.324$ actually helps long term right is

NOTE Confidence: 0.945946922857143

 $00:39:45.324 \dashrightarrow 00:39:47.614$ because it's so focused on on the food,

NOTE Confidence: 0.945946922857143

 $00:39{:}47.614 \dashrightarrow 00:39{:}49.274$ just getting into enough calories.

NOTE Confidence: 0.945946922857143

 $00:39:49.280 \longrightarrow 00:39:50.862$ But when you have somebody with more

 $00:39:50.862 \longrightarrow 00:39:52.680$ of that sub threshold presentation

NOTE Confidence: 0.945946922857143

 $00{:}39{:}52.680 {\:{\mbox{--}}\!>}\ 00{:}39{:}54.660$ or the subclinical and you can

NOTE Confidence: 0.945946922857143

00:39:54.660 --> 00:39:57.128 really focus more so on engendering

NOTE Confidence: 0.945946922857143

00:39:57.128 --> 00:39:59.294 that positive body image and if

NOTE Confidence: 0.945946922857143

 $00:39:59.294 \longrightarrow 00:40:01.367$ possible to be able to identify what

NOTE Confidence: 0.945946922857143

 $00{:}40{:}01.367 \dashrightarrow 00{:}40{:}03.570$ are some of those things at home that

NOTE Confidence: 0.945946922857143

 $00:40:03.570 \longrightarrow 00:40:05.220$ actually might be doing the opposite

NOTE Confidence: 0.945946922857143

 $00:40:05.277 \longrightarrow 00:40:07.048$ in a strength based way for parents,

NOTE Confidence: 0.945946922857143 00:40:07.050 --> 00:40:07.341 right. NOTE Confidence: 0.945946922857143

 $00:40:07.341 \longrightarrow 00:40:09.087$ If the child can identify things

NOTE Confidence: 0.945946922857143

 $00{:}40{:}09.087 \dashrightarrow 00{:}40{:}11.279$ that do make them want to skip meals

NOTE Confidence: 0.945946922857143

 $00:40:11.279 \longrightarrow 00:40:13.235$ or you know really focusing on

NOTE Confidence: 0.945946922857143

00:40:13.235 --> 00:40:15.149 that communication of it to really

NOTE Confidence: 0.945946922857143

 $00:40:15.149 \longrightarrow 00:40:16.975$ promote as opposed to here is what

NOTE Confidence: 0.945946922857143

00:40:16.975 --> 00:40:18.290 parents are doing wrong, right.

NOTE Confidence: 0.945946922857143

 $00:40:18.290 \longrightarrow 00:40:20.450$ But rather here's what we just

 $00:40:20.450 \longrightarrow 00:40:22.800$ know would be the most helpful.

NOTE Confidence: 0.945946922857143

 $00:40:22.800 \longrightarrow 00:40:23.604$ Yeah, that's great.

NOTE Confidence: 0.945946922857143 00:40:23.604 --> 00:40:24.140 Thank you. NOTE Confidence: 0.747501115555556

00:40:27.750 --> 00:40:31.323 So I'll ask a follow up question to Nicole's.

NOTE Confidence: 0.747501115555556

 $00:40:31.330 \longrightarrow 00:40:33.490$ I don't quite know how to ask the question.

NOTE Confidence: 0.747501115555556

 $00:40:33.490 \longrightarrow 00:40:36.685$ So Rebecca, try to make some sense of it.

NOTE Confidence: 0.747501115555556

00:40:36.690 --> 00:40:39.283 I guess I was just thinking in if I were

NOTE Confidence: 0.747501115555556

 $00:40:39.283 \longrightarrow 00:40:41.867$ in schools the thing I'd be really struggling,

NOTE Confidence: 0.747501115555556

 $00:40:41.870 \longrightarrow 00:40:43.385$ there are multiple things that

NOTE Confidence: 0.747501115555556

00:40:43.385 --> 00:40:44.900 I'd really struggle with in

NOTE Confidence: 0.747501115555556

 $00:40:44.953 \longrightarrow 00:40:46.519$ in sort of helping these kids,

NOTE Confidence: 0.747501115555556

00:40:46.520 --> 00:40:49.248 the first one is sort of thinking about

NOTE Confidence: 0.747501115555556

 $00{:}40{:}49.250 \dashrightarrow 00{:}40{:}52.125$ group level, school level interventions

NOTE Confidence: 0.747501115555556

 $00:40:52.125 \longrightarrow 00:40:55.000$ versus individual interventions and just

NOTE Confidence: 0.747501115555556

 $00:40:55.000 \longrightarrow 00:40:56.860$ here are your thoughts more

 $00:40:56.860 \longrightarrow 00:40:58.720$ about that and then what,

NOTE Confidence: 0.747501115555556

 $00:40:58.720 \longrightarrow 00:41:01.175$ what should someone do if

NOTE Confidence: 0.747501115555556

 $00:41:01.175 \longrightarrow 00:41:03.630$ they actually see a kid

NOTE Confidence: 0.747501115555556

 $00:41:03.630 \longrightarrow 00:41:05.170$ sort of struggling

NOTE Confidence: 0.747501115555556

 $00:41:05.170 \longrightarrow 00:41:06.710$ in this school setting,

NOTE Confidence: 0.747501115555556

 $00:41:06.710 \longrightarrow 00:41:08.575$ like what's the appropriate

NOTE Confidence: 0.747501115555556

 $00:41:08.575 \longrightarrow 00:41:10.067$ place of teachers and

NOTE Confidence: 0.741627865714286

 $00:41:12.180 \longrightarrow 00:41:14.595$ and adults to intervene and have

NOTE Confidence: 0.741627865714286

 $00:41:14.600 \longrightarrow 00:41:16.550$ what's an effective way to

NOTE Confidence: 0.741627865714286

00:41:16.550 --> 00:41:18.110 actually think about intervening?

NOTE Confidence: 0.856378479333333

 $00{:}41{:}19.640 \dashrightarrow 00{:}41{:}20.980$ Both really great questions.

NOTE Confidence: 0.856378479333333

 $00:41:20.980 \longrightarrow 00:41:23.447$ I think that to the point of

NOTE Confidence: 0.856378479333333

 $00:41:23.447 \longrightarrow 00:41:24.987$ the individual versus group,

NOTE Confidence: 0.856378479333333

 $00:41:24.990 \longrightarrow 00:41:26.910$ I think when resources are available

NOTE Confidence: 0.856378479333333

00:41:26.910 --> 00:41:29.709 for group and if it is kind of being

NOTE Confidence: 0.856378479333333

00:41:29.709 --> 00:41:31.710 more implemented in a school setting,

 $00:41:31.710 \longrightarrow 00:41:33.010$ that's always what I would

NOTE Confidence: 0.856378479333333

 $00:41:33.010 \longrightarrow 00:41:34.050$ go with because again,

NOTE Confidence: 0.856378479333333

00:41:34.050 --> 00:41:36.282 I think that there's that to the point of

NOTE Confidence: 0.856378479333333

00:41:36.282 --> 00:41:38.787 how these presentations can be so isolating,

NOTE Confidence: 0.856378479333333

 $00:41:38.790 \longrightarrow 00:41:41.282$ it's that really it can be very

NOTE Confidence: 0.856378479333333

00:41:41.282 --> 00:41:42.350 validating and supportive.

NOTE Confidence: 0.856378479333333

 $00:41:42.350 \longrightarrow 00:41:44.317$ Now the reason that I bring up

NOTE Confidence: 0.856378479333333

 $00:41:44.317 \longrightarrow 00:41:46.130$ in the schools that that does

NOTE Confidence: 0.856378479333333

 $00:41:46.130 \longrightarrow 00:41:48.230$ seem and feel safer is when there

NOTE Confidence: 0.856378479333333

 $00:41:48.297 \longrightarrow 00:41:50.297$ are really severe presentations

NOTE Confidence: 0.856378479333333

 $00:41:50.300 \longrightarrow 00:41:51.728$ sometimes that can be less helpful

NOTE Confidence: 0.856378479333333

 $00:41:51.728 \longrightarrow 00:41:53.255$ right at like the inpatient level

NOTE Confidence: 0.856378479333333

 $00{:}41{:}53.255 \dashrightarrow 00{:}41{:}55.082$ or things like that where more of

NOTE Confidence: 0.856378479333333

00:41:55.082 --> 00:41:56.403 because people aren't really in

NOTE Confidence: 0.856378479333333

00:41:56.403 --> 00:41:57.915 that place often of being ready

 $00:41:57.920 \longrightarrow 00:42:00.027$ to make changes of sharing some of

NOTE Confidence: 0.856378479333333

00:42:00.027 --> 00:42:03.031 the ways to more engage in the

NOTE Confidence: 0.856378479333333

 $00:42:03.031 \longrightarrow 00:42:04.659$ more problematic eating behavior.

NOTE Confidence: 0.856378479333333

 $00:42:04.660 \longrightarrow 00:42:06.641$ So group at higher levels of care

NOTE Confidence: 0.856378479333333

00:42:06.641 --> 00:42:08.389 aren't always the most effective

NOTE Confidence: 0.856378479333333

 $00:42:08.390 \longrightarrow 00:42:10.441$ but in the school based setting when

NOTE Confidence: 0.856378479333333

00:42:10.441 --> 00:42:12.335 we're thinking more from preventative,

NOTE Confidence: 0.856378479333333

 $00:42:12.335 \longrightarrow 00:42:13.778$ sub threshold presentations,

NOTE Confidence: 0.856378479333333

00:42:13.780 --> 00:42:14.839 getting socially connected,

NOTE Confidence: 0.856378479333333

 $00:42:14.839 \longrightarrow 00:42:16.604$ normalizing that it makes sense

NOTE Confidence: 0.856378479333333

 $00:42:16.604 \longrightarrow 00:42:18.741$ that these students are feeling

NOTE Confidence: 0.856378479333333

00:42:18.741 --> 00:42:21.060 uncomfortable about their bodies in this way,

NOTE Confidence: 0.856378479333333

 $00:42:21.060 \longrightarrow 00:42:23.472$ trying to promote more healthful ways

NOTE Confidence: 0.856378479333333

 $00:42:23.472 \longrightarrow 00:42:25.548$ that actually and healthful ways

NOTE Confidence: 0.856378479333333

00:42:25.548 --> 00:42:27.133 of managing relationships with food,

NOTE Confidence: 0.856378479333333

00:42:27.133 --> 00:42:28.958 as well as thinking about promoting

00:42:28.958 --> 00:42:31.015 not focusing on food so much what

NOTE Confidence: 0.856378479333333

 $00:42:31.015 \longrightarrow 00:42:32.940$ are the other kind of things we're

NOTE Confidence: 0.856378479333333

 $00:42:32.940 \longrightarrow 00:42:35.152$ focusing on in life that makes life

NOTE Confidence: 0.856378479333333

 $00:42:35.152 \longrightarrow 00:42:37.512$ worth living is the most protective.

NOTE Confidence: 0.856378479333333

 $00:42:37.512 \longrightarrow 00:42:39.516$ When doing individual work

NOTE Confidence: 0.856378479333333

00:42:39.520 --> 00:42:41.389 though to that point I think ways

NOTE Confidence: 0.856378479333333

00:42:41.389 --> 00:42:43.391 to continue to just provide that

NOTE Confidence: 0.856378479333333

 $00{:}42{:}43.391 \rightarrow 00{:}42{:}45.286$ validating environment is the most

NOTE Confidence: 0.856378479333333

 $00:42:45.286 \longrightarrow 00:42:47.240$ important thing of kind of normalizing

NOTE Confidence: 0.856378479333333

 $00:42:47.240 \longrightarrow 00:42:49.241$ why this makes so much sense that

NOTE Confidence: 0.856378479333333

00:42:49.241 --> 00:42:51.278 the youth is struggling with it and

NOTE Confidence: 0.856378479333333

 $00:42:51.280 \longrightarrow 00:42:53.460$ also you providing that validation

NOTE Confidence: 0.856378479333333

 $00{:}42{:}53.460 {\:{\circ}{\circ}{\circ}}>00{:}42{:}56.529$ and acceptance to try to make change

NOTE Confidence: 0.856378479333333

00:42:56.530 --> 00:42:58.924 to then challenge some of those more

NOTE Confidence: 0.856378479333333

 $00:42:58.924 \longrightarrow 00:43:00.875$ negative thoughts. I think to the

 $00:43:00.875 \longrightarrow 00:43:02.884$ point or the to the question about

NOTE Confidence: 0.856378479333333

 $00{:}43{:}02.948 {\:\raisebox{--}{\text{--}}}{\:\raisebox{--}{\text{--}}}{\:\raisebox{--}{\text{--}}} 00{:}43{:}05.209$ the resources though and where to go,

NOTE Confidence: 0.856378479333333

 $00:43:05.210 \longrightarrow 00:43:06.875$ one of the you know, a lot of times

NOTE Confidence: 0.856378479333333

00:43:06.875 --> 00:43:08.666 as part of kind of series of talks

NOTE Confidence: 0.856378479333333

 $00:43:08.666 \longrightarrow 00:43:10.706$ I often have to give a talk on why

NOTE Confidence: 0.856378479333333

00:43:10.706 --> 00:43:12.240 parents are often very much in

NOTE Confidence: 0.856378479333333

 $00:43:12.240 \longrightarrow 00:43:14.190$ denial of realizing how severe their

NOTE Confidence: 0.856378479333333

 $00:43:14.190 \longrightarrow 00:43:15.800$ their child's presentation is.

NOTE Confidence: 0.856378479333333

 $00:43:15.800 \longrightarrow 00:43:17.872$ So I raised this to your point Dr

NOTE Confidence: 0.856378479333333

00:43:17.872 --> 00:43:20.181 Bloch is I think that that's something

NOTE Confidence: 0.856378479333333

 $00{:}43{:}20.181 \dashrightarrow 00{:}43{:}22.244$ for school providers to be mindful

NOTE Confidence: 0.856378479333333

 $00:43:22.244 \longrightarrow 00:43:25.566$ of is just that we we do see with

NOTE Confidence: 0.856378479333333

 $00:43:25.566 \longrightarrow 00:43:27.489$ presentation with eating disorder

NOTE Confidence: 0.856378479333333

 $00:43:27.489 \longrightarrow 00:43:29.660$ concerns more more frequently we

NOTE Confidence: 0.856378479333333

00:43:29.660 --> 00:43:31.940 see parents kind of being resistant

NOTE Confidence: 0.856378479333333

 $00:43:32.010 \longrightarrow 00:43:34.098$ to acknowledging the severity of it

 $00:43:34.098 \longrightarrow 00:43:36.459$ because so many of the behaviors

NOTE Confidence: 0.856378479333333

 $00:43:36.460 \longrightarrow 00:43:37.543$ start very healthfully.

NOTE Confidence: 0.856378479333333

 $00:43:37.543 \longrightarrow 00:43:40.070$ And then there's this this line

NOTE Confidence: 0.856378479333333

 $00:43:40.141 \longrightarrow 00:43:42.235$ of when it does become maladaptive

NOTE Confidence: 0.856378479333333

 $00:43:42.235 \longrightarrow 00:43:44.744$ and these are, because these are often

NOTE Confidence: 0.856378479333333

00:43:44.744 --> 00:43:46.489 students or children who present

NOTE Confidence: 0.856378479333333

 $00:43:46.489 \longrightarrow 00:43:47.822$ as very high achieving,

NOTE Confidence: 0.856378479333333

 $00:43:47.822 \longrightarrow 00:43:49.718$ they're a bit anxious maybe you

NOTE Confidence: 0.856378479333333

00:43:49.718 --> 00:43:51.938 know kind of have, do really well in

NOTE Confidence: 0.856378479333333

 $00:43:51.938 \longrightarrow 00:43:53.570$ school doing all the things right

NOTE Confidence: 0.856378479333333

 $00:43:53.570 \longrightarrow 00:43:55.509$ and seeing things start to go in

NOTE Confidence: 0.856378479333333

 $00:43:55.509 \longrightarrow 00:43:57.814$ this scary more negative direction

NOTE Confidence: 0.856378479333333

 $00{:}43{:}57.814 \dashrightarrow 00{:}44{:}00.344$ parents are understandably avoidant of.

NOTE Confidence: 0.856378479333333

 $00:44:00.350 \longrightarrow 00:44:01.520$ So there's been some qualitative

NOTE Confidence: 0.856378479333333

00:44:01.520 --> 00:44:02.690 work with parents who have

 $00:44:02.730 \longrightarrow 00:44:03.918$ you know in the interviews they

NOTE Confidence: 0.846783859333333

 $00:44:03.918 \longrightarrow 00:44:05.503$ talk about like "we had to be at the

NOTE Confidence: 0.846783859333333

00:44:05.503 --> 00:44:06.912 point of having go to the hospital

NOTE Confidence: 0.846783859333333

 $00:44:06.912 \longrightarrow 00:44:08.216$ before I could even

NOTE Confidence: 0.846783859333333

00:44:08.216 --> 00:44:09.740 acknowledge what was going on."

NOTE Confidence: 0.846783859333333

00:44:09.740 --> 00:44:11.780 So I think for school providers

NOTE Confidence: 0.846783859333333

00:44:11.780 --> 00:44:13.640 that are noticing those things,

NOTE Confidence: 0.846783859333333

00:44:13.640 --> 00:44:15.338 trying to think about how to

NOTE Confidence: 0.846783859333333

00:44:15.338 --> 00:44:17.110 approach with parents in that very

NOTE Confidence: 0.846783859333333

00:44:17.110 --> 00:44:18.844 supportive way and just being mindful

NOTE Confidence: 0.846783859333333

 $00:44:18.844 \longrightarrow 00:44:20.620$ of the parent potentially being

NOTE Confidence: 0.846783859333333

 $00:44:20.620 \longrightarrow 00:44:22.525$ very resistant to this feedback.

NOTE Confidence: 0.846783859333333

 $00:44:22.530 \longrightarrow 00:44:24.490$ And so very much in a

NOTE Confidence: 0.846783859333333

00:44:24.490 --> 00:44:25.684 non judgmental observation of just

NOTE Confidence: 0.846783859333333

 $00:44:25.684 \longrightarrow 00:44:27.430$ what has been noticed at school.

NOTE Confidence: 0.846783859333333

 $00:44:27.430 \longrightarrow 00:44:28.840$ The student is isolating more.

 $00:44:28.840 \longrightarrow 00:44:29.910$ The student is sitting alone

NOTE Confidence: 0.846783859333333

 $00:44:29.910 \longrightarrow 00:44:30.980$ at lunch and not eating.

NOTE Confidence: 0.846783859333333

00:44:30.980 --> 00:44:32.825 Just providing the data without

NOTE Confidence: 0.846783859333333

 $00:44:32.825 \longrightarrow 00:44:35.100$ any judgment to it and then

NOTE Confidence: 0.846783859333333

 $00:44:35.100 \longrightarrow 00:44:36.865$ providing some of the

NOTE Confidence: 0.846783859333333

 $00:44:36.870 \longrightarrow 00:44:40.086$ um, the ideas for resources to the families.

NOTE Confidence: 0.846783859333333

00:44:40.090 --> 00:44:42.550 I think approaching the if,

NOTE Confidence: 0.846783859333333

 $00:44:42.550 \longrightarrow 00:44:44.370$ I think offering to the child if

NOTE Confidence: 0.846783859333333

 $00:44:44.370 \longrightarrow 00:44:46.456$ there are groups going on is always

NOTE Confidence: 0.846783859333333

 $00:44:46.456 \longrightarrow 00:44:48.294$ a valuable thing and things that

NOTE Confidence: 0.846783859333333

 $00:44:48.294 \longrightarrow 00:44:50.226$ can be more related to the social,

NOTE Confidence: 0.846783859333333

 $00:44:50.230 \longrightarrow 00:44:51.409$ the social connection.

NOTE Confidence: 0.846783859333333

00:44:51.409 --> 00:44:52.588 I think though,

NOTE Confidence: 0.846783859333333

 $00:44:52.590 \longrightarrow 00:44:54.500$ unless the child is actually

NOTE Confidence: 0.846783859333333

 $00:44:54.500 \longrightarrow 00:44:56.028$ raising the eating concerns,

 $00:44:56.030 \longrightarrow 00:44:57.920$ that can be a quite a challenging

NOTE Confidence: 0.846783859333333

 $00{:}44{:}57.920 \dashrightarrow 00{:}44{:}59.667$ things to raise at school because

NOTE Confidence: 0.846783859333333

00:44:59.667 --> 00:45:01.419 it is something that really just

NOTE Confidence: 0.846783859333333

 $00:45:01.419 \longrightarrow 00:45:02.941$ as part of the presentation

NOTE Confidence: 0.846783859333333

 $00:45:02.941 \longrightarrow 00:45:04.693$ is kept so much more hidden.

NOTE Confidence: 0.86304470625

00:45:06.690 --> 00:45:08.630 OK, last question because I

NOTE Confidence: 0.86304470625

 $00:45:08.630 \longrightarrow 00:45:10.570$ don't want to stand between

NOTE Confidence: 0.86304470625

 $00:45:10.643 \longrightarrow 00:45:12.689$ people and the and their lunch.

NOTE Confidence: 0.86304470625

00:45:12.690 --> 00:45:13.802 I guess another thing,

NOTE Confidence: 0.86304470625

00:45:13.802 --> 00:45:16.026 I may be projecting a little bit on

NOTE Confidence: 0.86304470625

 $00:45:16.026 \longrightarrow 00:45:17.762$ to the people who work at schools,

NOTE Confidence: 0.86304470625

 $00:45:17.770 \longrightarrow 00:45:20.662$ but another thing that would worry

NOTE Confidence: 0.86304470625

 $00:45:20.662 \longrightarrow 00:45:23.218$ me about trying to implement some

NOTE Confidence: 0.86304470625

 $00{:}45{:}23.218 {\: -->\:} 00{:}45{:}25.600$ of these more school based group

NOTE Confidence: 0.86304470625

 $00:45:25.672 \longrightarrow 00:45:27.622$ interventions is not having anything

NOTE Confidence: 0.86304470625

 $00:45:27.622 \longrightarrow 00:45:30.899$ to do with the kids that you identify

 $00:45:30.899 \longrightarrow 00:45:32.989$ as having more severe problems

NOTE Confidence: 0.86304470625

 $00{:}45{:}32.990 \dashrightarrow 00{:}45{:}34.610$ if you did the interventions.

NOTE Confidence: 0.86304470625

00:45:34.610 --> 00:45:36.304 And so I guess it's two parts.

NOTE Confidence: 0.86304470625

 $00:45:36.310 \longrightarrow 00:45:37.792$ Could you really do the interventions

NOTE Confidence: 0.86304470625

00:45:37.792 --> 00:45:39.419 if you don't have a good place

NOTE Confidence: 0.86304470625

 $00:45:39.420 \longrightarrow 00:45:41.724$ to send kids who are struggling?

NOTE Confidence: 0.86304470625

 $00:45:41.724 \longrightarrow 00:45:44.592$ And then are there any places that

NOTE Confidence: 0.86304470625

 $00:45:44.592 \longrightarrow 00:45:46.687$ are good resources for families?

NOTE Confidence: 0.828785158947368

 $00:45:48.090 \longrightarrow 00:45:49.142$ It's a great question.

NOTE Confidence: 0.828785158947368

 $00:45:49.142 \longrightarrow 00:45:51.319$ So I guess highlighting to the point of

NOTE Confidence: 0.828785158947368

00:45:51.319 --> 00:45:53.244 unfortunately the place that we're in is,

NOTE Confidence: 0.828785158947368

 $00:45:53.250 \longrightarrow 00:45:55.196$ there is and this is why we're

NOTE Confidence: 0.828785158947368

 $00{:}45{:}55.196 \dashrightarrow 00{:}45{:}57.754$ trying to do more work of making

NOTE Confidence: 0.828785158947368

 $00:45:57.754 \longrightarrow 00:45:59.824$ eating disorder care more robustly

NOTE Confidence: 0.828785158947368

 $00:45:59.824 \longrightarrow 00:46:01.797$ available because it has become

 $00:46:01.797 \longrightarrow 00:46:03.662$ these very siloed niche areas.

NOTE Confidence: 0.828785158947368

 $00{:}46{:}03.670 \dashrightarrow 00{:}46{:}06.080$ Those specialty places often do

NOTE Confidence: 0.828785158947368

 $00:46:06.080 \longrightarrow 00:46:08.490$ have more significant wait lists.

NOTE Confidence: 0.828785158947368

 $00:46:08.490 \longrightarrow 00:46:11.145$ But I think to the point of seeing more

NOTE Confidence: 0.828785158947368

 $00:46:11.150 \longrightarrow 00:46:13.010$ subclinical or less severe presentations

NOTE Confidence: 0.828785158947368

 $00:46:13.010 \longrightarrow 00:46:14.870$ but still clinically notable of

NOTE Confidence: 0.828785158947368

 $00:46:14.924 \longrightarrow 00:46:16.688$ wanting to address making sure just

NOTE Confidence: 0.828785158947368

00:46:16.688 --> 00:46:18.749 connected to a mental health provider

NOTE Confidence: 0.828785158947368

 $00:46:18.750 \longrightarrow 00:46:20.868$ to address what's often the

NOTE Confidence: 0.828785158947368

00:46:20.868 --> 00:46:22.707 co-occurring concerns is very important

NOTE Confidence: 0.828785158947368

 $00{:}46{:}22.707 \dashrightarrow 00{:}46{:}25.220$ that then can integrate some of the

NOTE Confidence: 0.828785158947368

 $00:46:25.220 \longrightarrow 00:46:27.617$ work related to to body image concerns.

NOTE Confidence: 0.828785158947368

 $00:46:27.620 \longrightarrow 00:46:31.228$ I think for if they are seeing more

NOTE Confidence: 0.828785158947368

 $00:46:31.228 \longrightarrow 00:46:32.817$ significant presentations but a

NOTE Confidence: 0.828785158947368

 $00:46:32.817 \longrightarrow 00:46:35.241$ lack of kind of access to an eating

NOTE Confidence: 0.828785158947368

00:46:35.321 --> 00:46:37.319 disorder specific facility,

00:46:37.320 --> 00:46:42.133 there is a program called equip EQUIP

NOTE Confidence: 0.828785158947368

 $00{:}46{:}42.133 \dashrightarrow 00{:}46{:}46.171$ that is a telehealth resource that

NOTE Confidence: 0.828785158947368

 $00:46:46.171 \longrightarrow 00:46:48.770$ provides an interdisciplinary team.

NOTE Confidence: 0.828785158947368

00:46:48.770 --> 00:46:50.470 And virtually for families who

NOTE Confidence: 0.828785158947368

 $00:46:50.470 \longrightarrow 00:46:52.170$ aren't able to access it,

NOTE Confidence: 0.828785158947368

 $00:46:52.170 \longrightarrow 00:46:54.550$ again in person care is always preferred,

NOTE Confidence: 0.828785158947368

 $00:46:54.550 \longrightarrow 00:46:57.014$ but they they do integrate elements of

NOTE Confidence: 0.828785158947368

 $00:46:57.014 \longrightarrow 00:46:59.284$ family based treatment as well as with

NOTE Confidence: 0.828785158947368

 $00{:}46{:}59.284 \dashrightarrow 00{:}47{:}01.310$ strategies from things like CBT or DBT.

NOTE Confidence: 0.828785158947368

 $00:47:01.310 \longrightarrow 00:47:03.950$ And I know for some of our families

NOTE Confidence: 0.828785158947368

 $00:47:03.950 \longrightarrow 00:47:06.352$ that haven't been able to access the

NOTE Confidence: 0.828785158947368

00:47:06.352 --> 00:47:08.524 appropriate kind of levels of care,

NOTE Confidence: 0.828785158947368

 $00:47:08.530 \longrightarrow 00:47:10.511$ it is a resource that we have

NOTE Confidence: 0.828785158947368

 $00:47:10.511 \longrightarrow 00:47:11.940$ used with some success.