

**Innovation in Eating Disorders Research and Practice: Expanding Our Community and Perspectives at the 2018 International Conference on Eating Disorders**

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## **Innovation in Eating Disorders Research and Practice: Expanding Our Community and Perspectives at the 2018 International Conference on Eating Disorders**

This virtual issue of the *International Journal of Eating Disorders (IJED)* highlights the excellent and innovative research and practice discussed at the 2018 International Conference on Eating Disorders held in Chicago, Illinois, USA. The issue contains a series of articles recently published in *IJED*, which we have curated to reflect and expand on the insights delivered during the conference keynote and plenary presentations<sup>1</sup>. In line with the conference theme of *Innovation in Research and Practice: Expanding our Community and Perspectives*, we hope this collection of articles will spark new ideas for research, practice, and collaboration to accelerate knowledge on eating disorder risk factors and recovery, and the reach and impact of evidence-based treatment, prevention, and policy efforts.

### **The Need for Innovation and Expansion**

The field of eating disorder research has made tremendous progress in identifying risk factors, assessing treatment outcomes, and developing effective treatment and prevention interventions. However, despite this progress, broad scale uptake of evidence-based interventions in real-world settings has been limited. Most interventions target individuals rather than also addressing societal and macro-level change. Furthermore, our treatments and prevention interventions are not effective for everyone. As a result, the clinical impact and potential benefits of many eating disorder research insights and interventions are yet to be fully realised outside the ivory towers of science.

The delay in research being translated into routine practice in real-world settings is not unique to our field. It takes an average of 17 years to translate original medical research into routine clinical practice (Brownson, Colditz, & Proctor, 2012). As with all grand challenges facing health and society, progress will require the expansion of our ideas and

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<sup>1</sup> The articles contained in this special virtual issue are referenced in bold throughout this editorial.

communities. The keynote and plenary speakers at ICED 2018 offered a range of innovative perspectives to address these challenges. The articles contained in this issue, many of which were co-authored by ICED 2018 speakers, expand on these ideas further.

### **Accelerating the reach and impact of treatment and prevention interventions (Keynote)**

In this issue, **Kazdin et al. (2017)** highlight key barriers to (1) overcoming the gap between evidence-based eating disorders interventions and the treatment that is delivered in actual practice, and (2) providing treatments to individuals who currently receive nothing. Barriers include the often prohibitive cost of mental health services, policy and legal constraints, and the dominant model of treatment delivery, which relies on in-person sessions delivered by highly skilled providers to individual clients in a clinical setting. The authors provide recommendations for how our field can reduce this gap. These include task-shifting intervention delivery to community providers, using technology to extend service provision and enhance training, and creating more low-dose, cost-effective, and scalable interventions. They also acknowledge that higher-level support and policy are crucial to our field's success in reducing the research-practice gap.

### **Strategic Science to Influence Policy and Practice (Plenary I)**

The importance of policy-based approaches to addressing the burden of eating disorders has long been acknowledged and championed by Austin (2016), who became President-Elect of the Academy for Eating Disorders at ICED 2018. In this issue, **Roberto and Brownell (2017)** propose a model for conducting strategic science to inform eating disorders-related policy. They suggest that engaging policy makers in crafting research questions and design is key to moving evidence-based policy forward. **Rodgers et al. (2017)** provide an example of strategic science in action with their study targeting the fashion industry to reduce harmful and extreme standards of thinness among models. **Whiteford and Weissman (2017)** also address the role of economic factors in influencing government policy

stakeholders and review relevant eating disorders research in this area, including assessments of the economic cost of eating disorders and subsequent interventions, as well as the cost of not providing adequate and accessible treatment.

### **Defining Recovery (Plenary II)**

Developing a consensus definition for ‘recovery’ from eating disorders is emerging as a priority for advancing effective assessment and treatment. The current lack of consensus greatly limits our field’s ability to synthesise research and knowledge across studies on rates and predictors of recovery, and our ability to refine interventions and classify treatments as effective. Adding to the discussion on what characterises recovery, in this issue **Bardone-Cone et al. (2016)** show that reduced impulsivity -- specifically, negative urgency -- distinguishes recovered individuals from those with a current eating disorder. **Murray et al. (2017)** also address barriers to recovery and argue that addressing fear of weight gain with evidence of long-term body mass index (BMI) trajectories may facilitate treatment engagement among women with anorexia nervosa (AN) and bulimia nervosa.

The role of weight restoration and broader psychological, social, and economic outcomes in conceptualising recovery is also discussed in two papers contained within this issue. **Bamford et al. (2015)** investigated quality of life as a treatment focus for women with severe and enduring AN, in response to suggestions that focusing on weight restoration as an endpoint for recovery may act as a barrier to treatment engagement. Similarly, **Mustelin et al. (2015)** assessed recovery outcomes beyond weight restoration among a community sample of women with AN 10-years after their initial assessment, compared to control women. Outcomes evaluated included education, employment, self-perceived health, financial status, and relationships. Their data indicate promising prognoses for weight restoration *and* sociodemographic factors among community samples of women with AN.

### **Engaging Communities in Research and Interventions (Plenary III)**

Expanding our perspectives by engaging community stakeholders as equal research partners was also highlighted at ICED 2018 as a key strategy to rapidly innovating eating disorder research and intervention development. Community-based participatory research (CBPR) disrupts traditional research power hierarchies in which participants simply provide data to researchers, and better ensures that interventions meet the needs of communities. For example, CBPR has been credited as essential to the success of the global dissemination of an evidence-based eating disorder prevention program (Becker et al., 2017a). In this issue, **Ciao et al. (2018)** provides a further case example of CBPR research in action. They outline a qualitative study that sought opinions from a diverse sample of college students on how to adapt an evidence-based eating disorder prevention program for universal and inclusive use. **Becker et al. (2017b)** also provide an example of CBPR in this issue, in which they partnered with a local foodbank organisation to investigate the relationship between food insecurity and eating pathology among adults seeking food from food pantries.

#### **Investigating the Role of the Gut Microbiome in Eating Disorders (Plenary IV)**

Expanding our horizons to consider research trends outside the field of eating disorders may provide novel strategies to improving knowledge about aetiology and subsequent interventions. Recently, the gut microbiome has attracted considerable attention in relation to its role in physical and mental health. In this issue, **Kleiman et al. (2015)** argue that investigating intestinal microbiota on adiposity and behaviour may offer new insights into the aetiology and treatment of eating disorders. They present compelling evidence demonstrating how intestinal microbiota affects key features of AN, including weight regulation, metabolism, and psychological well-being. Similarly, **Mörkl et al. (2017)** report differences in gut microbiome characteristics across women with different levels of BMI and physical activity. **Kleiman et al. (2015)** outline potential avenues for future microbiota

research in relation to eating disorders that may unlock novel and effective intervention strategies for AN.

### **Concluding Comments**

The papers presented in this IJED virtual issue challenge us to expand our thinking and our communities. We hope that ICED 2018 and this virtual issue stimulate innovation in our field to rapidly reduce the research-practice gap, improve knowledge of the causes and trajectories of eating disorders and recovery, and make our work and community more inclusive of the diverse array of people affected by eating disorders.

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