

BHN Newsletter

**Behavioral
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Association

Setting the Standard for Nutrition in Behavioral Healthcare



Christine M. Palumbo

Relationship Building for Career Success

By Christine M. Palumbo, MBA, RD

We've come a long way, baby! Until recently, the term networking brought the image of trying to meet as many people as you could while furtively

passing out business cards. Today, networking is all about social media. Or is it?

Actually, effective networking is a blend of both social (online) and the old-fashioned kind that's up close and personal. Most networking experts consider both vital in order to be successful.

The Basics

For some people, networking is almost as important as breathing. The more events they attend and the more people they meet, the happier they are. For others, it's as painful as pulling toenails. But networking needn't be painful, and it's something that builds on itself. Meeting people and building relationships is the key to being successful. That's because the world goes round through personal connections. Whether it's filling a job opening or finding a vendor, people tend to call people they know.

Networking is actually an outdated term. I prefer relationship building or connecting. It's all about having a conversation which connects two or more people. Dietitians and Dietetic Technicians, Registered are natural connectors. And it's ALL about making the connections.

Why Build Your Network?

There are four key reasons to build relationships: for advice, information, referrals and support. You want others to think of YOUR name when they think of your job, organization or skills. Building your network is the most powerful, most effective, easiest, surest way to land a position or increase

referrals if you're in private practice. Astute professionals are always networking.

To climb the ladder of success, you don't need more techniques and strategies. You need more friends. As the saying goes, "who you know" can make a difference. Yet how many know YOU makes an even bigger difference. Networking becomes even more important as you advance in your career. The more complex the job, the more likely it will be filled by networking, rather than a formal posting.

"Networking does enhance success," relates Behavioral Health Nutrition member Anthony Sepe, BS, DTR, who is currently working on a cookbook that's all about the intermingling of nutrition and taste. Sepe's relationship with a dietitian who works with a big name celebrity chef will allow him to feature his recipe in the cookbook.

The more people you meet, the greater the chance you'll meet someone who will change your life. All it takes is one person to suggest your name, speak highly of you or promote you to create a life-changing opportunity!

How to Build and Maintain Relationships

People love to share their opinions and ideas as it makes them feel valued. Actively solicit those thoughts from them and listen in an engaged manner.

When developing new relationships, always try to give first. Determine how you can be a resource for the other person. Try to make deposits in a "favor bank" that you may be able to withdraw from at some point, though not necessarily from the people you helped.

Teresa Pangan, PhD, RD, career and personal brand strategist and co-owner of Feed Your Career recommends having 20 key relationships on which to focus. "Reconnect at least once every 90 days. In many cases this is too long, but this is

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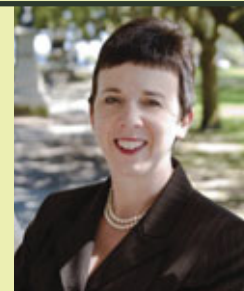
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From the Chair

Charlotte Caperton-Kilburn, MS, RD, CSSD, LDN



Welcome to the Behavioral Health Nutrition (BHN) Dietetic Practice Group (DPG). We are so glad to have you as a member new or returning. Thanks for choosing to join us on our journey. The 2011-2012 Executive Committee is ready. Our official theme is "Let's Get It Started." We'll be focusing on starting and improving our social media communication, increasing resources in all four areas served by BHN and offering webinars in all 4 areas.

We are planning some exciting things at our BHN Member Reception at the Food & Nutrition Conference & Expo (FNCE) in San Diego on Saturday night after the keynote speaker. Look for more information soon. Also, look for a FNCE schedule of events on page 14.

The past year was a busy one for BHN with

- the Eating Disorder SOP/SOPP in progress under the leadership of Mary Tholking, MS, RD, (it will be available soon)
- the soon to be published Children with Special Health Care Needs (CSHCN) pocket guide co-authored by Past BHN Chair, Andrea Shotton, MS, RD,
- the continuing work of the IDD SOP/SOPP under the leadership of Paula Cushing, RD, and
- the many great webinars in 2010-2011.

Thanks to BHN's Past Chair, Kathy Russell, MS, RD, for all that she did during the 2010-2011 year and for her continued guidance.

BHN is always looking for members who would like to volunteer for various things over the year. If you have an interest in doing one project or more, I urge you to email me at nflperformance@yahoo.com. On August 12, 2011 10:00 AM PST, Elyse Resch, MS, RD, FADA, will present a webinar on Intuitive Eating. Please send your suggestions for other webinars to nflperformance@yahoo.com.

It is with pleasure that I serve as the Chair of BHN this year.

"Let's Get It Started,"

Charlotte Caperton-Kilburn, MS, RD, CSSD, LDN
BHN Chair 2011-2012

BHN Webinar: What is Intuitive Eating, Anyway?

August 12, 2011 @ 10 AM PST
Presenter: Elyse Resch, MS, RD, FADA

This webinar will present the physiological and psychological reasons why dieting is not a reliable method for weight loss and how diets can lower self-esteem. Participants will learn the importance of being present and mindful while eating and discuss how nutrition fits into the process of Intuitive Eating. Register at https://www.bhndpg.org/store/item_view.asp?estore_itemid=1000013
Members \$25 Non-members \$40

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the minimum to keep yourself in the memory of strategic relationships. These are career decision makers and career influencers. Focus on connecting, appreciating and helping these people. The people in your list will change, but this is where you want to focus your time and energy."

Career-changing connections can be made where you least expect them. BHN member Leslie Schilling, MA, RD, CSSD, LDN met two other young RDs at the ADA Leadership Institute several years ago. "We actually met in the pool and discussed the day's speakers during personal reflection time. We knew right away that we 'clicked.' We were all in private practice and had been told by someone we couldn't do it or needed much more experience. In that hour we became professional soul-mates. We had similar experiences and different ones to share along with collaborative skills." Leslie and the two others formed a peer support group that meets regularly by conference calls and Skype.

Pangan recommends reconnecting with someone you have been out of touch with by saying, "I want to continue to be connected with you. Tell me what you have done recently that you are proud of. I'd love to hear the details."

Also, consider the wisdom of Maya Angelou. "I've learned that people will forget what you said, people will forget what you did, but people will never forget how you made them feel." The key is to focus on the other person so they go away feeling great about the interaction.

The Luck Factor

Some people have all the luck. They're always in the right place at the right time, getting all the breaks. But is it blind chance? Are they fated to be blessed by good fortune? What are the essential traits of lucky people?

To a large extent, you create your own luck:

- Lucky people encourage good fortune by believing their own luck. They are optimistic and resilient.

- Lucky people are always prepared. They're the ones who put in a huge amount of effort, so that when that break came along, they were ready.
- Lucky people are open to unexpected opportunities. They see the bigger picture.

There are two types of people: Those who come into a room and say, "Well, here I am!" and those who come in and say, "Ah, there you are."

Fredrick Collin, lawyer and judge

Dr. Richard Wiseman of the University of Hertfordshire studied hundreds of lucky and unlucky people for more than a decade. In one experiment, he discovered that lucky people tended to attract other people. Wiseman planted a lucky and an unlucky person in a cafe, and then sent subjects in to buy coffee and sit down. Almost every subject decided to sit next to the lucky person.

Why? It's a subtle difference in body language. The lucky people have very open postures, a lot of eye contact, drawing people towards them or smiling, asking about them and not talking about themselves all the time. The unlucky people were exactly the opposite. They had their arms folded and weren't really interested in others. (1)

Online Networking

Social networking applies networking tools onto the Internet. If you haven't already, join the water-cooler discussion. Whether the chatter is on Twitter, Facebook or on the ADA Electronic Mailing Lists (EMLs) to which you belong, there are places where topics are aired and job opportunities can be advertised. You might discover relationships among people whom you didn't realize know each other who may be able to help you.

Blogs are great adjuncts to existing websites, but can also be published independently. Strategically developed, a promotional blog can effectively connect you with a widespread and continually growing community of current as well as potential clients.

It offers a very effective venue for marketing and branding purposes.

LinkedIn is a business networking group that exists solely to connect people. Choose your connections wisely. Although this is open to debate, I prefer to add only those people I actually know. I recently heard a business expert state that you should only link to someone with whom you could call on the telephone. LinkedIn is much more of a *quality* game than a *quantity* game. A recruiter may choose to contact one of your connections to ask about you; make sure that person is someone you know and trust.

Facebook can be used with both your profile and fan page if you have your own practice. The more you engage with your friends and those who "like" you, the more valuable your network is.

One way to use **Twitter** is to follow others whom you admire but do not yet know. Pangan suggests setting up a Google alert on these people so that you can follow their career successes. You can then Tweet congratulatory remarks in front of their followers, a huge compliment to them.

Electronic mailing lists (EMLs) - Frequent postings in your area of specialty is an ideal way to let others know what you do and can lead to direct referrals. When you find articles of interest in your particular field, send them to the group so you get known as the "expert" in that area.

Regardless of how active you are on the various social media, remember that a warm handshake or hug always "trumps" a cold mouse. That's not to say electronic communication isn't effective, but the social foundations have to be built in person. The bonding happens when you can look in someone's eye and read their body language. Trust is built face to face.

Business Cards

Are printed business cards still relevant? You bet! In fact, they're flourishing in a Web-based world. Cards tell others who you are and what you do. ALWAYS have several with you. Keep a few in your wallet so that in the event you change bags, you will still have some cards on you. I can't tell you

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how many times I've asked for someone's card and they sheepishly admit they left them in another purse.

When accepting another's card and while your memory is still fresh, note on the back:

- The event and date
- What was discussed
- Personal data (any kids, what's unique about that person, their passion)

Once back at your office, you can scan the cards then toss – or organize and keep them. I used to file them in a three hole-punched plastic sleeve designed to hold business cards, but I found keeping them in alphabetic order a nightmare. Now I simply keep them in several stacks in alphabetical order held together with rubber bands. Works for me.

Ways to get started

- Get in the pipeline. Become known. So many things go into an employee. Are you a prima donna? A complainer? A good fit with the staff? Being known beforehand will reduce the doubt.
- As film director Woody Allen once said, "The world is run by people who show up." Attend conferences and workshops and engage with others. Volunteer for committees and run for office with your affiliate. Participate in BHN events at the upcoming Food & Nutrition Conference & Expo (FNCE) in San Diego. Write newsletter articles.
- Call someone to ask a question about something in their area of expertise. This helps establish that you have a respect for their opinion and gives you an opportunity to keep your name in front of them. This can also be done by email, but getting some voice time is even more important.
- Join outside groups such as the local Chamber of Commerce, pro-

fessional networking groups or LEADS groups (which teach networking skills).

- Invite the dietitians and Dietetic Technicians, Registered in your area for an informal get together.
- Perri Capell once wrote in the Wall Street Journal, "Make friends with people who are networking geniuses. They will connect you with the people in their network. Such referrals will immediately break the ice for you and save time and trouble." How true.

Common Mistakes

Not giving the person full attention. Talking with someone – but looking over their shoulder to see who else is in the room – is a no-no.

Talking too much. Try to do more listening than talking.

Being a clumsy networker. Nobody likes hearing from people who connect only when they need help. Do you have an acquaintance who contacts you only when he or she needs something from you? I definitely have a few. It is so annoying to have them call or email because you just know they want a favor. They are all take – and no give.

Not keeping in touch. Reach out to people when something happens to them, not just to you. There's no memory longer than someone in transition who has been helped, or not helped. The fact you would call and see how they're doing will remain with them forever.

Not thanking people for help.

Being a promiscuous networker who collects cards without relationships, according to Pangan. "Volume doesn't work because people won't remember who you are. You are one in a stack of cards."

Not meeting face to face. There are likely some people you've only communicated with electronically or on the phone. Making a conscious effort to get face time with people you have

Pretend that every single person you meet has a sign around his or her neck that says, "Make me feel important."

Mary Kay Ash,
founder of Mary Kay Cosmetics

only interacted with over the phone and email is very important.

Yes You Can...

- Embed networking naturally into your day-to-day life. Chat with others on airplane rides, in line at the mall, on the sidelines of your child's sporting event, at the coffee shop. You never know who you might meet!
- Bloom where you are planted. Show initiative wherever you find yourself because it's the quality of your ideas and decision-making that shows an employer you are thinking beyond the present.
- Build a reputation as a go-to, make-it-happen person. Become known for a dedication to excellence in everything you do – your work, website, blog, e-mail and overall personal image.
- Build your network of luck. Remember that you are surrounded with opportunities (people). The gift is in the interaction and the connection with another person. And you never know where that gift might lead.

Reference

1. The Luck Factor. (2003). Richard Wiseman, PhD.

About the author: Christine M. Palumbo comes from a long line of schmoozers. She writes the Good Sense Eating column for *Chicago Parent* magazine, as well as *Long Island Family*, and four other NYC-based Family Publications. She is also a contributing editor to *Environmental Nutrition*. Christine speaks on career topics to dietetic groups. Does she ever have stories to tell about how networking shaped her career! Follow her on Facebook at Christine Palumbo Nutrition or contact her at Chris@ChristinePalumbo.com.

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For more on relationship building for career success from Teresa Pangan, PhD, RD, plan to attend FNCE session, "Networking is Out: Build Lasting Relationships through Coaching and Appreciative Focus" on Tuesday, September 27, 2011 from 8 a.m. - 9:30 a.m.

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Resources

Maximize Your Time with 20 Strategic Connections

<http://www.feedyourcareer.com/?q=maximizeyourtime>

Five Steps to Building Your Network

http://blogs.hbr.org/cs/2011/04/five_steps_to_building_your_ne.html

Five Tips for Smarter Social Networking

<http://blogs.hbr.org/bigshift/2011/01/five-tips-for-smarter-social-n.html>

Recruiters Rethink Online Playbook

<http://online.wsj.com/article/SB10001424052748704307404576080492613858846.html>

Is the Hidden Job Market a Myth

http://www.quintcareers.com/hidden_job_market_myth.html

Networking is More Than a Cardboard Connection

<http://www.jeancaton.com/ArticlesforArticleBank/Networking.html>

How Facebook and Twitter Are Changing the Business World. And How They Aren't

<http://www.fastcompany.com/1679825/how-facebook-and-twitter-are-changing-the-business-world-and-how-they-aren-t>

5 Ways to Reach Out Personally at Work

<http://smartblogs.com/leadership/2010/07/12/5-ways-to-reach-out-personally-at-work/>

Make Luck Work in Your Favor

<http://blogs.hbr.org/tjan/2010/10/make-luck-work-in-your-favor.html>

Why Networking in Person Still Matters

<http://newsissuestrends.com/entrepreneur/why-networking-in-person-still-matters/>

The Unwritten Rules of the Highly Effective Job Search by Orville Pierson

Let ADA Help You Find that Career Opportunity

Everyone wants to stay on top of their career options, particularly during challenging economic times. Dietetic practitioners need access to the most comprehensive job listings, latest career data, and the best employment tools to ensure they are well equipped during times of potential change.

ADA is here to help you. Our Career Center has a broad spectrum of resources that you can use to prepare yourself for a new opportunity, polish up your skills for your current position or help you grow professionally. Review our extensive career resources:

Peer Connection and Networking - don't underestimate the value of participating in your state affiliate, ADA national dietetic practice and member interest groups (DPGs or MIGS). According to the 2010 *Journal* Reader Survey, dietetic practitioners rely on state and district career Web sites to access local job opportunities.

Center for Career Opportunities - participate in a one-day exhibit held

on the last day of FNCE where you can meet face-to-face with employers who may be hiring immediately or in the near future.

ADACareerLink - At ADA's national online job service, you can post your resume, target your search by specialty or geographic location, respond directly to employer job listings and get e-mail alerts about new job openings. For a fee, you can recruit professionals for your own organization. Go to www.eatright.org/career-center/content.aspx?id=2310. Be sure you have your Member ID number and password.

Career Toolbox - Gearing up for your first job, promotion, or change in practice can be a daunting task. Get started with ADA's Career Toolbox. Go to www.eatright.org/members/content.aspx?id=2297

Here are some highlights:

- ADA Interactive Salary Tool and Compensation and Benefits Survey of the Dietetics Profession 2009 which gives

you a rough idea of what dietetic practitioners earn based on qualifications, education and supervisory experience.

- Career Video - a great resource for those in the early stages of their dietetic careers
- Mentoring and career guidance - take a sneak peak at our comprehensive eMentoring system available June 1, 2011. It will provide optimal matches between mentor and mentee based on such parameters as geographic location, years of experience and practice area
- Resume templates - an easy way to update your resume professionally
- Volunteer opportunities - build your leadership skills while networking with influential RDs

Market Yourself - Me, Inc. - Go to www.eatright.org/meinc to use our online branding toolkit to improve your brand.

For more information on all these career-related ADA member benefits, go to www.eatright.org/members/content.aspx?id=9993.



Marci E. Anderson

Harnessing the Power of Social Media: Tools for Eating Disorder Recovery and Positive Body Image

Marci E. Anderson, MS, RD, CPT

We live in a world where thin is glorified and unrealistic images of feminine beauty are

plastered online, in print, and on TV. These images are hard to avoid and they present serious challenges for clients struggling with eating disorders and body image concerns. In the Spring 2011 issue of the BHN newsletter, Katie R. Gilder, RD wrote an article outlining the very real threat of “thin-spiration” media that is widely available and easily accessible.

“Thinspiration” websites, forums, and YouTube videos provide pro-eating disorder advice and support to those looking for it. Recent research from the University of Haifa showed that “the more teenage girls are involved in Facebook, the higher their risk of having a negative body image and developing eating disorders such as anorexia and bulimia”(1). Additional research shows that idealistic images of female beauty affect mood, body dissatisfaction, and eating disorder recovery (2-5).

While social media presents challenges for those struggling with eating and body issues, a whole new world of eating disorder support and positive body image advocates exists online. According to the U.S. Government’s website, HowTo.gov, social media integrates technology, social interaction, and content creation using the “wisdom of crowds” to collaboratively connect online information. Through social media, people or groups can create, organize, edit, comment on, combine, and share content. (6)

This article will highlight one client’s experience of integrating social media into her recovery as well as provide a list of tools and resources that clinicians may share with their clients.

One Client’s Journey

Kay has suffered from an eating disorder for eight years and has actively been pursuing treatment for her eating disorder for the past eight months. Three months ago Kay was “stuck”. She believed that she could not possibly accept her body the way it was and also thought she couldn’t continue along the same self-destructive path that brought her to my office. Additionally, she truly believed that every woman hated her body and lived on a diet. She once said, “Marci, you are the only woman I know that seems to have a happy relationship with food and believes it’s possible to reject society’s expectations of a perfect body.” Aside from me, she felt she had no positive food or body role model around her. I advised that feeling better about herself was going to take consistent work. And that if she wanted a shift in her recovery, she’d need to fill up on positive messaging, even if she didn’t yet believe it for herself. Kay decided to accept my challenge and we created a plan for the coming week. This is what we agreed on:

- Take a break from reading any websites, TV shows, or magazines that left her feeling worse about herself.
- Write one thing each day that she likes about herself, physical or not.
- Read a positive body image blog for 5 minutes each day.
- Do her best to follow her meal plan.

She came back to my office one week later and to my surprise and relief she was ecstatic. In addition to what we agreed on, she spent an hour each day reading positive body image blogs and bought a book on self-acceptance (*Radical Acceptance* by Rosie Molinary). This week became a turning point in Kay’s recovery. She was amazed that even though her body hadn’t changed, the way she spoke to and thought about herself

did! Three months later, she and I continue to work on this project. Kay still has her struggles; she still has ups and downs. But rather than feeling stuck, she feels the grip of the eating disorder and self-hatred beginning to loosen. Hope and courage has replaced hopelessness and fear.

In Kay’s words:

“When I began the process of recovery, one of my biggest struggles was comparing me to others. I wanted to be “normal” in regards to my eating and body. But I didn’t realize that normal is different for everyone! It’s not the ideal body type that we see in mainstream media. I felt like I was surrounded by messages that counteracted my recovery. I felt like I couldn’t escape the negative messaging about never being good enough in my own skin. When I reached a particularly low point I decided to actively seek out the messaging that I was looking for. I perused the web for blogs, websites, and twitter feeds for anything I could find that would help cultivate complete body and self acceptance. I couldn’t believe the amount of information I found! Suddenly I was surrounded by people just like me, virtually, who were promoting and passing on the messages that I needed to keep me going on the path to recovery and self love. Now it’s a daily ritual of mine to go through my newsfeed of positive messaging and journal about how I feel after reading them. It makes me feel like I have a community that is supporting me on a positive path, whereas I used to feel so alone in my struggles.”

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Harnessing the Power of Social Media...

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Virtual Resources Offer Hope and Healing

I share this story, because as an eating disorder clinician I've experienced clients who feel trapped, not realizing that there are options to living a life of self-hatred. They are astounded and relieved to know that there is a huge community of people fighting their same struggle, raising a voice of hope and healing. While the social media scene may seem like a land mine for our clients, some of the best treasures are there for the taking, if only they knew where to look. Here are some of my favorite social media resources*:

Pro-Recovery Virtual Communities

- MentorConnect:
www.mentorconnect-ed.org
- Something Fishy:
www.something-fishy
- Voice-in-Recovery:
www.voiceinrecovery.com

Positive Body Image Blogs

- Body & Brood:
www.bodyandbrood.com
- Guiltless:
www.iamguiltless.blogspot.com
- Medicinal Marzipan:
www.medicinalmarzipan.com
- Nourishing the Soul:
www.nourishing-the-soul.com
- The Body Image Project:
bodyimageproject.com
- Operation Beautiful:
operationbeautiful.com
- Voice-in-Recovery:
www.voiceinrecovery.com
- Weightless on Psych Central:
blogs.psychcentral.com/weightless

Twitter Chat Parties

- These are a very fun and interactive way to chat about a specific topic. There are a couple of twitter chats specific to eating disorder recovery. This is a useful primer for anyone new to using Twitter chats (7).
- #endED: a monthly chat on ending eating disorders. Typically the last

Wednesday of every month at 8:30 a.m. EST. Visit www.facebook.com/marciRD, then click on past events to learn more.

- #MHSM: a weekly Mental Health and Social Media Chat on Tuesdays at 9:00 a.m. EST.
- #VIRChat: a weekly pro-recovery chat on Mondays at 9:00 a.m. EST. Visit www.voiceinrecovery.com to learn more.

Media Literacy Websites

- www.newmoon.com
 - www.beautyredefined.net
 - www.revolutionofrealwomen.com
- *The websites are offered by the author and BHN and ADA do not endorse any of the above websites.

Research

When looking for research on the benefits of social media and its potential positive effects on eating disorder recovery and promotion of positive body image, two university studies published in the '90s looked at the effect of media on attitudes and behaviors regarding body image (8, 9). In 1998 *JAMA* published a consensus statement on interactive health communication (IHC) (10). Their conclusion was that the use of IHC had potential benefit to improve health, but they cautioned the IHC may also cause harm. Few applications have been evaluated. (10). It appears that no research has been published regarding IHC and social pressure on body image in the past 10 years, hence this is an area that deserves attention for future research.

Conclusion

The ADA Standards of Practice (SOP) and Standards for Professional Performance (SOPP) on disordered eating and eating disorders (DE & ED) are scheduled to be published in the *Journal* August 2011 along with the updated position paper on eating disorders. These publications will be a welcome addition to support registered dietitians in effectively treating eating disorders. The field of dietetics,

especially working in counseling clients with DE & ED is both an art and a science. As clinicians, we can benefit from having multiple tools in our tool box as we continue to do our part in offering our clients support, guidance, and hope for recovery from DE, ED and body image issues.

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About the Author: Marci E. Anderson is a dietitian in private practice in Cambridge, MA. She specializes in treating eating disorders and body image concerns. She blogs at www.marciRD.com and can be followed on Twitter @MarciRD. She created and hosts the monthly Twitter chat #endED which is dedicated to ending eating disorders through education, discussion, and support.

From the Electronic Mailing List (EML): Food and Nutrition Apps

By Paula Cushing, RD, LDN

A short time ago a question was posted on the BHN electronic mailing list (EML) relating to apps, "Does anyone have a good suggestion for a computer app for nutrition analysis?"

If you're not very "tech savvy," like me, but want to learn more, you might be asking, "So what is an app?" An app is the abbreviation for the word application and is a software program that runs on the internet, on your computer, or on your phone or other electronic device. There are cooking, nutrition and fitness apps, sports apps, travel apps, and apps on almost any topic you can imagine. Apps may be free or available for a fee and may be compatible with only certain mobile devices, such as an iPhone, blackberry, android, or iPad.

Apps can serve as valuable teaching tools for dietitians in their practice. The clients of today's generation are asking for and wanting tools to assist in making healthy food choices and becoming fit. Now that we have defined an app, let's find out how BHN members responded to the question about suggested nutrition apps. Listed are some of the apps that were recommended along with their marketing descriptors.

- My Net Diary <http://www.mynetdiary.com/> Weight management tool
- Diabetes Carb Counter and Planner <http://www.coheso.com/track-d.html> Look up nutrition information of meals, adjust the number of servings, log when and what you ate, note glucose levels, monitor exercise, and track oral medications and insulin.
- Fit Day <http://www.fitday.com/> Track and analyze your nutrition, weight loss, diet and fitness.
- Lose It <http://www.loseit.com/> Offers calorie counting, exercise log and goal setting.
- Calorieking www.calorieking.com Search an entire food database (over 50,000 foods!), track food intake, and weight.

- MyPyramid <http://www.choosemyplate.gov/guidelines/index.html>

In addition to suggestions from the BHN EML, other dietitians have shared with me the following software applications:

- Fooducate <http://www.fooducate.com/> Use the app's bar-code scanning feature in your own kitchen or at the grocery store to recognize more than 200,000 food items. Each item is graded according to its nutritional value. There are warnings about trans fats, sugar and controversial additives. The app will also compare two items and offer healthier alternatives from its database.
- Chow and Chatter <http://itunes.apple.com/us/app/chow-and-chatter/id400685844?mt=8#> Renowned blogger, Rebecca Subbiah, RD, has taken over 80 of the best recipes and created an iPhone App. Rebecca travels around the world and brings you unique and healthy recipes from her travels.
- Food Focus: Fruits <http://www.nutritionvision.info/> Created by Catherine Frederico, RD, to start the conversation about eating healthy.
- MyLilCoach <http://itunes.apple.com/us/app/mylilcoach-2/id424476735?mt=8> Developed by Lisa Bunce, RD, to help her patients change behavior and comply with the basics of a healthy lifestyle, eating right, drinking enough water, exercise, and stress reduction.

Joan Guthrie Medlen, RD and BHN member was one of my contacts. Being a parent of a son with special needs and working in the IDD field for many years, she shared the following apps and how they might assist with implementing a diet and exercise regimen. She says these are just a few examples of more tools that could be used to set the direct support staff and family up for success in creating a quality life. Some apps may not be

specific to nutrition, but they can improve access to the world, which with health coaching, improves quality of life and health. Here's a website to additional apps Joan has reviewed for her health literacy blog:

<http://tinyurl.com/5sdtkut>.

- Time Timer <http://itunes.apple.com/us/app/time-timer/id332520417?mt=8> Time timer is a visual timer. It can be used to help show how much time is left in a given activity and help a person to transition from one activity to another. Many people use physical Time Timer products (time-timer.com) for this purpose. For dietitians/trainers, it can be used to set length of time to exercise without showing the numbers. It could also be used to show when a meal will be done or when to take something out of the oven.
- My Talk Tools <http://www.mytalktools.com/dnn/> This is an augmentative communication tool that is very flexible. If you're working with someone who is nonverbal, you could load in (as they do in their demo) an order at a restaurant, for example. It's very flexible and easy to program and uses pictures/drawings rather than requiring a person to spell.
- First Then Visual Schedule <http://itunes.apple.com/us/app/first-then-visual-schedule/id355527801?mt=8> This app is a visual schedule app. It could be used to create visual schedules for cooking, cleaning, using a coffeemaker, etc.

There are over 130,000 apps available and several thousand of those are nutrition and health-related. New apps are available all the time and older apps are constantly being improved and updated. Keeping up with what is available can be challenging, even for the tech savvy RD. In addition to helping people set personal health and fitness goals and

continued on page 9

From the EML...*continued from page 8*

track calories and exercise, there are apps that plan menus, take pictures of meals (in lieu of a food diary), help to locate healthy food options when looking for a restaurant, look up nutrition information when eating out, and put together shopping lists by category, aisle, or brand. The

following web links list other popular food and nutrition apps.

- Food and Nutrition Apps for iPhone <http://www.eatright.org/Members/content.aspx?id=8286&terms=nutrition+apps>
- "Software for Shaping Up" by Molly Baker, Wall Street Journal March 21, 2011 <http://online.wsj.com/article/SB10001424052748703961104576148732585957902.html>

As with any health and nutrition resource, be it the internet, books, media, or news articles, it's important to always analyze an app before recommending it, to ensure the app provides you and your clients with sound nutrition advice.

BHN/ADA do not endorse any of the above apps or their websites; they are offered as possible tools to use.

Connect, Collaborate, Create

By Joan Medlen, MEd, RD

Today's internet is filled with powerful tools. One of those tools is the ability to connect with people, virtually face-to-face, anytime, anywhere. This is a huge advantage to nutrition professionals working in smaller, less appreciable specialties such as behavioral health nutrition for people with intellectual and developmental disabilities. In the past it was difficult to find people to talk with and share ideas. Now, with tools such as Skype®, Adobe Connect®, GoToMeeting®, and WebEx®, we can connect with each other no matter where we are on the map. If you can't be at your computer, all of these programs have mobile apps

that can be used on smart phones. All you need to participate in a web meeting is an internet connection and, preferably, a USB headset.

The most powerful and dynamic moments in my career have been those in which I have been able to connect, collaborate, and create with people who share my interests and challenges. I walk away from those discussions to implement ideas we explore together. Until now, they've been limited to chance meetings or occasional trips to the Food & Nutrition Conference & Expo (FNCE).

Internet-based communication tools coupled with the flexibility of continuing education activities such

as study groups are a great combination for building relationships to hone skills for good work.

Study groups are a great tool for obtaining continuing education. More flexible than a journal club, ADA study groups can share and discuss lectures, videos, self-study programs, books, and more. For areas of practice such as intellectual and developmental disabilities, this flexibility is essential for knowledge and skills to provide the best nutrition practices.

What an exciting way to connect, collaborate, and create.

IDD Nutrition Study Group

For information about the Phronesis Study Group for nutrition professionals in intellectual and developmental disabilities contact Joan Guthrie Medlen, MEd, RD at joan@downsyndromenutrition.com

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For information on these and other member benefits, inquire at assistU@bhndpg.org or check www.bhndpg.org.



Stephanie Joppa

Student Corner

Nutrition in Behavioral Health Rife with Challenge and Global Opportunity

By Stephanie Joppa

As the world seems to grow smaller due to ease of travel and technology, it is interesting to observe the cultures around the world, particularly in one's field of interest. Many dietitians would be interested to examine the roles played by their overseas counterparts. I recently had the opportunity to interview Nicolas Sahuc, RD, a French diététicien (dietitian), who works with eating disorder patients in the cities of Nîmes and Montpellier, France. Mr. Sahuc has an accomplished resumé: he not only has a degree in dietetics, but he has advanced qualifications in sports nutrition, eating disorders, cognitive therapy, behavioral therapy, acceptance and commitment therapy, and cognitive and remediation therapy. All of this stems from his sincere wish to aid those suffering from eating disorders. Indeed, the most rewarding part of his job is "seeing a person who suffers from an eating disorder smile" (1).

His care for his patients is clear when he says, "The quest of happiness is at the base of human development and that we are in need of rediscovering what is good for one's self." He has taken this passion and wisdom and used it to further his field in France. He states, "The lack of contacts in this field was a handicap. I therefore created an association in

order to reduce waiting time before hospitalization and to offer new treatments." His future goals are no less ambitious- Mr. Sahuc wants to create a clinic for those who suffer from disordered eating. He adds that goals continue to enrich him personally and that they open up the world.

As many of the readers will acknowledge, the field of behavioral nutrition is often rife with challenges. In the U.S. many dietitians struggle to get insurance companies to pay for their client's treatment. While the French health care system is ranked number one in the world (2), there are still problems with insurance coverage. In this specialty in France, only the physicians and psychiatrists are reimbursed, while psychologists and dietitians are often not (1).

Among the private insurances that do reimburse dietitians and psychologists, many have different payment schedules, such as an annual sum. Mr. Sahuc also notes that many of those who often suffer from eating disorders are students, who can have true financial difficulties. This shows that even in the best health care system in the world, there are real problems ensuring proper treatment coverage. He indicated that it's necessary for food and nutrition professionals around the world to work together to address not only these problems, but the goal of successfully treating a patient (1).

Successful treatment means a lot of things to a lot of different professionals. One thing seems certain; however, if this field wants to progress, a key factor is cooperation across borders. The more health care staffs are able to share their experiences, triumphs, and discoveries, the more the patient will benefit. The more one is willing to share information (while, of course, not violating patient privacy laws) with people from related fields, psychologists, psychiatrists, researchers, nurses, and even students, the more everyone grows together in that they may benefit those who suffer. When asked how professionals internationally can work together, Mr. Sahuc responded, "With openness and humility."

Sources:

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About the Author: Stephanie Joppa is a pre-med student at the University of North Dakota with a double major in French and minors in nutrition and psychology. She recently studied abroad at the Université de Caen Basse-Normandie, France. Stephanie served as the 2010-2011 Student Assistant Newsletter Editor. Stephanie.Joppa@und.nodak.edu

BHN is included as a web link resource on French Dietitian, Nicolas Sahuc's eating disorders website www.nicolassahuc.fr. Nicolas Sahuc is a BHN friend on Facebook, just one of the opportunities members have to interface with food and nutritional professionals globally. Assisted by dedicated member volunteers, BHN also has a voice in the social media through Twitter: @BHNDPG.

BHN Delegate is in the House . . .

Thank you for participating in the electronic voting related to the Spring House of Delegate (HOD) Meeting motion for establishment of an associate member category. A simple majority of the voting delegates determines the results of a motion. 98 of the 101 delegates eligible to vote did so. This represents a 97% voting rate. Two delegates (At-large: CDR and At-large: CADE) declared their non-voting status as HOD members.

HOD Proposal for Associate Category

Motion 1: 55 supported/43 opposed – motion carried. BHN opposed.

Next Steps: The House of Delegates approved the establishment of the Associate Category as outlined in the revised HOD Proposal presented on February 22, 2011. The Member Value Committee (MVC) will be notified of the outcomes of the vote. The MVC will report an implementation plan to the House of Delegates by fall 2011.

This initiative, which has been a long time coming presents a tremendous opportunity for us to grow our membership base and will serve to enhance our attractiveness to external partners. There is also revenue potential from individual memberships as well as product sales and continuing education opportunities, particularly in the future. For example, healthcare organizations may see the investment in ADA memberships for their professional members as value added. Reciprocal arrangements will be explored with natural partners like the American Academy of Family Physicians and the American Academy of Pediatrics. For more HOD information visit <http://www.eatright.org/hod/>

Leslie Schilling, MA, RD, CSSD, LDN is the delegate for BHN and can be contacted at leslie@schillingnutrition.com, 901.628.8102 cell, 901.761.5933 fax, Twitter: <http://twitter.com/NutritionLeslie>, Blog: <http://leslieschilling.wordpress.com>.

BHN Chair-Elect Speaks at FNCE 2011

Medical Complications of Eating Disorders

Tuesday, September 27th from 8:00am - 9:30am

BHN Chair-Elect, Therese Shumaker, MS, RD, LD along with Abby Matthews, PhD will be presenting at the Food & Nutrition Conference & Expo (FNCE) 2011 in San Diego on the Medical Complications of Eating Disorders. Eating Disorders take years to treat with the increasing likelihood of patients finding themselves with other medical conditions. This session will give participants useful information to help the eating disorder patient recover while faced with a co-morbid medical condition. The objectives for this session include:

1. Identify the association of eating disorders with the risk for certain diseases and how to manage them.
2. Interpret laboratory measurements used to assess fluid and electrolytes in patients with eating disorders.
3. Incorporate strategies to manage the nutritional goals of patients that have an eating disorder and other medical conditions.

Case studies will be presented along with discussing common problems that may occur with the eating disorder patient.

In the BHN Pipeline . . .

BHN Member Decoding Nutrition Symbols

D. Milton Stokes, MPH, RD, CDN recently invited BHN DPG members to participate in a survey contributing to research on the use of nutrition symbols in consumer and food product marketing. Registered Dietitians have long known and utilized nutrition labeling and health claims on food packaging to assist consumers in making better choices. Consumers prefer ease of interpretation; therefore, a movement now focuses on the use of symbols on the front of food packaging and on grocery shelves.

Milton is currently working with a research team at the University of Connecticut, utilizing the theory of reasoned action and information processing theory to explain consumer purchasing behaviors with respect to the nutritional scoring systems. Specifically, the research team is assessing the role that attitudes, subjective norms, and individual differences play in purchasing food products. Additionally, the team is examining perceived credibility of symbols.

Participating RDs were sent an email directing them to an online survey and then randomly provided different scenarios with either potato chips or just nutrition symbols; there are two studies, one with chips and one without chips. Ultimately, the aim is to find out if symbols influence purchasing decisions. According to Stokes, "Nutrition symbols are poised to ease consumer burden when interpreting Nutrition Facts Panels; however, we need to further study how consumers and RD-opinion leaders use symbols and incorporate these findings into future educational campaigns."

The Institute of Medicine is preparing to release a phase II report on nutrition symbols later in 2011 (see <http://www.iom.edu/Activities/Nutrition/NutritionSymbols.aspx>) offering advice and guidance.

Do you have a project, publication, event or recognition item to share with BHN Members? We want to know who is in the BHN Pipeline. Please contact newsletter@bhndpg.org

Public Policy Update

Submitted by, Cinde Rutkowski, MA, RD, FADA
BHN Public Policy Liaison

A Healthy Plate

ADA representatives were in attendance on June 2, 2011 at the official unveiling of the U.S. government's new graphic symbol of nutritional advice for consumers – A Healthy Plate. The new graphic is a visual representation of how to eat well and improve health as suggested in the 2010 *Dietary Guidelines for Americans*. Coupled with the expert individualized advice provided by a Registered Dietitian, A Healthy Plate is a visual and realistic way to make food choices in correct amounts.

The new icon is a plate split into four sections. Each section represents one of the food groups, specifically protein, whole grains, fruits and vegetables. The portion represented on the plate is the recommended serving of each food that should be consumed

at meal time. A circle shape next to the plate represents dairy products, especially milk. More information regarding each section on the plate can be had when the icon is viewed on-line at one of the many websites promoting the visual.

Agriculture Appropriations Bill Passes the House

The House narrowly passed the Agriculture Appropriations Bill for FY 2012 by a 217-203 vote. A number of amendments that would have cut funding for nutrition related programs were turned down with bipartisan support. The Women, Infants and Children nutrition program was cut by \$600 million, but was saved from any further cuts. The House also rejected amendments that would cut the Food for Peace program and the

Dole-McGovern International Food for Education and Child Nutrition program. Language to prohibit the implementation of the new school meal nutrition guidelines was also removed from the final bill.

The bill saved subsidy payments to farmers, which would have decreased the maximum adjusted income level to \$250,000. Under the 2008 Farm Bill, farmers with more than \$500,000 in adjusted gross income from off-farm sources are not eligible for subsidy payments.

If you have questions regarding these or other Legislative or Public Policy issues, contact ADA's Policy Initiatives & Advocacy Office in Washington, D.C. at 800/877-0877 or 202/775-8277.

Medicare Proposes New Standards for Community Mental Health Centers

Proposed Standards Will Improve Quality and Safety of Mental Health Care

NEWS RELEASE, Centers for Medicare and Medicaid Services (CMS) Thursday, April 14, 2011

CMS Office of Public Affairs 202-690-6145, Accessed June 29, 2011

<http://www.cms.gov/apps/media/press/release.asp?Counter=3982&intNumPerPage=10&checkDate=&checkKey=&srchType=1&numDays=3500&srchOpt=0&srchData=&keywordType=All&chkNewsType=1%2C+2%2C+3%2C+4%2C+5&intPage=&showAll=&pYear=&year=&desc=false&cboOrder=date>

The Centers for Medicare & Medicaid Services (CMS) today issued a proposed rule that is designed to improve the quality and safety of treatment provided to more than 25,000 Medicare beneficiaries who receive care at Community Mental Health Centers (CMHCs) each year.

The notice of proposed rulemaking would establish conditions of participation (CoPs) for CMHCs for the first time. The proposed rule includes health and safety standards for CMHCs that participate in the Medicare program, and are an important step in CMS' commitment to assuring the delivery of safe, quality care to clients of CMHCs. In particu-

lar, the proposed new conditions focus on a client-centered, outcome-oriented approach.

"This rule proposes new provisions that will protect the tens of thousands of Medicare beneficiaries who receive care from a CMHC every year," said CMS Administrator Donald M. Berwick. "Memorializing the best practices of behavioral healthcare in new Medicare standards gives us the unique opportunity to be sure that safe and effective client-focused care is available to all clients in all communities."

CMHCs provide partial hospitalization services to Medicare beneficiaries -- a comprehensive program of intensive mental health care services,

which includes physician services, psychiatric nursing, counseling and social services. This unique Medicare benefit offers an alternative to inpatient treatment by focusing on the medical, emotional, social, and therapeutic needs of clients with acute mental illness, using a client-centered interdisciplinary approach.

As part of the proposed rule, CMS highlights steps CMHCs would be required to take in order to protect clients while under their care, aimed at meeting the specific needs of individual clients.

In particular, CMS proposes new standards for CMHCs in the following

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Medicare Proposes New Standards...

continued from page 12

- Establishing qualifications for CMHC employees and contractors.
- Requiring CMHCs to notify clients of their rights and to investigate and report violations of client rights. These proposed requirements also promote continuity of care by emphasizing the need for communication regarding client needs at the time of discharge or transfer.
- Convening of a treatment team, developing an active treatment plan, and coordinating services to ensure an interdisciplinary approach to individualized client care.
- Creating a Quality Assessment and Performance Improvement (QAPI) program. The QAPI program will require CMHCs to identify program

needs by evaluating outcome and client satisfaction data and making changes, as necessary, to improve their quality of care.

- Setting organization, governance, administration of services, and partial hospitalization services requirements, with an emphasis on governance structure.

Today's proposed rule would add CMHCs to the list of provider and supplier types that are already subject to conditions of participation and conditions for coverage under Medicare. These conditions apply both to health care entities seeking to become Medicare providers and to those continuing to participate in the Medicare program. The health and safety standards included in the conditions are the foundation for improving quality and protecting the health and safety of beneficiaries. CMS implements these standards through State

Departments of Health and private accrediting organizations recognized by CMS (through a process called "deeming"), which review provider practices to assure they meet or exceed the Medicare standards.

"This proposed rule demonstrates our commitment to quality and safety across settings and highlights the importance of effective, safe mental health care," said Patrick Conway, MD, MSc, CMS Chief Medical Officer and Director of the Agency's Office of Clinical Standards and Quality.

CMS will accept public comments on the proposed rule until August 16, 2011, and will respond to comments in a final rule to be published in the coming months. To submit comments, please visit <http://www.regulations.gov> and search for rule "CMS-3202-P"

The proposed rule is available online from the *Federal Register* at <http://www.ofr.gov/inspection.aspx#regular>



*Sylvia A. Escott-Stump, MA, RD, LDN
ADA President, 2011-2012*

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University of Arizona *Love Your Body Day* Features BHN Member, Jessica Setnick

By Gale Welter, MS, RD, CSSD

“Love Your Body Day” is the University of Arizona’s (UA) annual celebration of National Eating Disorders Awareness Week. It is organized by BHN member, Gale Welter, MS, RD, CSSD, Coordinator of Nutrition Services at the UA Campus Health Service (CHS) in Tucson, Arizona. This year’s events highlighted BHN member, Jessica Setnick, MS, RD/LD, CSSD. Her appearance was supported by a BHN speaker stipend, along with other generous sponsorships.

Jessica led the morning session with a packed room of dietitians, mental health and medical providers from across Tucson, as well as interested students, in *Eating Disorders 411: Info Every Health Provider Needs to Know*. Having treated hundreds of patients, Jessica has fine-tuned her ability to break down walls of highly resistant patients. She shared insights, tips and techniques with participants for increasing their confidence and effectiveness in treating these patients. The workshop was insightful and engaging, leaving the

audience with a better understanding of the tough battle that not only those with eating disorders face, but also the challenges confronted by the professionals themselves, including the self-care needed, in the rigorous work of treating eating disorders. This session allowed participants to leverage Jessica’s presence in Tucson beyond the UA student body to enhance the treatment of eating disorders throughout the community.

Midday, an army of CHS staff and student volunteers administered the National Eating Disorder Screening Survey from three different locations on campus to over 200 UA students. Professional counselors were on hand to score and discuss outcomes and resources, when needed.

In the evening, over 250 UA students and Tucson community members attended Jessica’s student-focused presentation, *Making Food Your Friend Again*. Jessica’s easy manner and sense of humor engaged and entertained the audience as she explored the reasons why America’s

relationship with food has become so out of control. Her lighthearted lessons and practical solutions were well received as she touched on serious subject matter. This event was covered by local print and broadcast media, extending the message well beyond those attending.

Love Your Body Day 2011 was a great success, thanks to Jessica’s talent and expertise. It rekindled community-wide dialogue on a difficult topic, helping to empower many of us to overcome the obstacles we face in loving our bodies.

BHN stipend supported speaker and BHN member, Jessica Setnick, MS, RD/LD, CSSD is author of “The ADA Pocket Guide to Eating Disorders” available at www.eatright.org/shop. For more information about the presentation *Making Food Your Friend Again* and to access this webinar worth 2.5 CPEs using the code “BHN” for discount pricing, go to http://www.understandingnutrition.com/store/item_view.asp?estore_itemid=1000112

BHN Schedule of Events at Food & Nutrition Conference & Expo (FNCE) 2011

San Diego Convention Center

Saturday, September 24, 2011

7:30pm - 9:30pm

Member Awards & Reception

San Diego Marriott Marquis and Marina - Location TBD

A special event at the BHN Member Reception is planned; look for an email announcement related to this event in the coming weeks

Monday, September 26, 2011

10:30am – 1:00pm

DPG/MIG Showcase

San Diego Convention Center

Stop by the BHN Showcase, meet Executive Committee members and find out what’s new with your DPG.

ADA News

Show the World Who the Food and Nutrition Experts Are Through Sharecare

As part of ADA's continued efforts to position registered dietitians as the food and nutrition experts, ADA has accepted an invitation to collaborate with Sharecare, an interactive social question and answer platform created by WebMD founder Jeff Arnold and Dr. Oz. Consumers post questions on Sharecare, which are answered by experts. And now, ADA members can answer questions as the food and nutrition experts on Sharecare.

Mark Your Calendars for Upcoming ADA Teleseminars:

- How to Eat Mindfully in a Mindless Eating World - Helping Clients Manage Weight Effectively
November 2, 2011
- FDA's Gluten-Free Rulemaking: Implications for Your Clients with Celiac Disease
December 8, 2011

2011 Future Connections Summit Report

Please use the following link to access the final report from the 2011 Future Connections -Summit on Future Practice, Credentialing and Education:
<http://www.eatright.org/futurepractice/>. This report provides an overview of the process used and the outcomes obtained from the Summit. The outcomes of this report encompass the largest portion of the document. The outcomes are the 76 pilot initiatives developed by the Summit participants in each of the seven regions. These pilot initiatives are "living and breathing" plans that provide potential solutions to issues identified during the Summit.

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- Eating Disorders
- Mental Illness
- Addictions

Goals: 1. The public recognizes, trusts, and chooses our members as the experts in behavioral health nutrition.
2. Members and prospective members view BHN as essential to their professional success.

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BHN website: <http://bhndpg.org>

BHN practice standards: <http://bhndpg.org/moa/practice/index.asp>

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BHN PUBLICATIONS

The Adult with Intellectual and Developmental Disabilities

This resource tool is designed to provide an overview of nutrition in individuals with intellectual and developmental disabilities. The resource guide is contained on one CD-ROM as a 209 page PDF file.

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Psychiatric Nutrition Therapy

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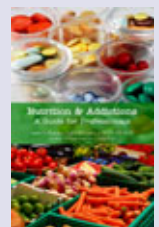
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Nutrition & Addictions

This is a 244-page manual of information about addiction and drugs of abuse, including legal, illegal and pharmaceutical drugs, alcohol, nicotine, caffeine, and more. Patient educational handouts on nutrition and recovery topics are also included.

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