Welcome to the third edition of CONNeCTED

CEED’s role is to strengthen the system of care in order to provide excellence in eating disorder treatment. To achieve our vision, CEED supports the establishment of a clear and accessible system of care for clients and carers with eating disorders, that facilitates early identification and a responsive service system. CEED works on assisting the mental health and broader health systems in the provision of and continued development of treatment and care for eating disorders clients and their families.

Latest News from CEED

♦ For those of you who are attending the ANZAED 2017 conference in Sydney, you may be interested in some of the presentations from our team. Rachel King will be presenting “Evaluating an Online Early Intervention Resource for Parents of Young People who may be at Risk of Developing an Eating Disorder”. Claire Diffey, Michelle Roberton, and Belinda Caldwell will be running the workshop “And They Said it Couldn’t be Done - Making an Impact on Early Intervention in Eating Disorders in a One Year Project”. Dr Beth Shelton and Dr Emma Spiel are presenting “Achieving Early Identification and Intervention in an Elite Ballet School: A Whole of Community Approach”. A number of our team will also be attending the conference and are looking forward to catching up with you.

♦ 30 people attended our “Introduction to Schema Therapy and Eating Disorders” seminar on Friday 4th August presented by CEED clinicians Dr Rachel Gold & Dr Emma Spiel. The feedback was overwhelmingly positive for the presentation style and participants found observing the role play of schema work in action beneficial to their practice.

♦ The Eating Disorder Coordinators met on Friday 4th August and discussed the ways in which Schema Therapy may be used in adult mental health services for eating disorders; as well as reviewing the resources we have developed for EDCs.

♦ CEED welcomes two new staff members; Alex Hillman and Dr Sarah Haberle to our team. Alex is an Occupational Therapist, Sarah is a Clinical Psychologist, bringing a range of fantastic skills and experience in both adult and child youth mental health to the team.
CEED is very excited to hear the recent statement from Minister Greg Hunt regarding the implementation of the newly signed 5th National Mental Health Plan to focus on two key areas: Eating Disorders and Suicide Prevention. Signed off by COAG (the forum for all state and federal ministers), this demonstrates a shared agreement on key health initiatives. This forward focus on eating disorders has the potential to have significant effect on eating disorder treatment and outcomes.

Eating disorders as a central part of the plan is largely the result of an immense body of work in advocacy from the Butterfly Foundation and others. The commissioning of the Paying the Price report by the Butterfly Foundation back in 2012 when the economic and social impact of eating disorders in Australia started a real conversation with government about the fact that in 2012 there were more than 913,000 people in Australia with eating disorders with a total socio-economic cost of $69.7 billion.

Following on from the “Paying the Price” report, the Butterfly Foundation then commissioned the “Investing in Need: cost effective interventions for eating disorders report” in 2014. This report provided the economic argument for providing better treatment demonstrating that the total cost, if Treatment As Usual occurs, for those who develop an eating disorder is equivalent to $103.2 billion whereas the total cost, if optimal treatment occurs, for those who develop an eating disorder, is equivalent to $49.9 billion. Best practice treatment is up to 50% more cost effective than standard practice and there is a 5:1 benefit cost ratio for implementing optimal treatment interventions.

For the past two years Butterfly has led an Advisory Group to deliver Australia’s first National Agenda for Eating Disorders. CEED team members, Claire Diffey and Belinda Caldwell have been integral members of the Advisory Group with a particular focus on the needs of families. This Agenda will inform each State and Territory’s health system in how to align and deliver consistent treatment and support for anorexia nervosa, bulimia nervosa, binge eating disorders and OSFED. This baseline will enable each State and Territory’s health system to align and deliver consistent treatment and support.

In May this year a number of brave families, including one from Victoria, told their stories of losing their loved one with an eating disorder to suicide in the Butterfly Foundation MAYDAYS campaign. These stories and many others have achieved real resonance. As Minister Hunt said in his doorstep interview after the COAG meeting, in response to a question on what has led to the focus on eating disorders, “It’s a personal focus. There are those that I have known, and then when we looked at the numbers shortly after coming in, and dealt with organisations such as the Butterfly Foundation, they explained that it’s been a high level issue with the worst rate of loss of life amongst any mental health condition….that’s a combination both of suicide, but also of loss of life due to physical collapse. And so it’s what I would regard as a personal priority from my own experience with others, but then the advocacy of groups like Butterfly Foundation has finally landed. It should’ve happened earlier, but it’s happening on our watch now”.

We look forward at CEED to hearing more about the detail of the proposed focus on eating disorders and what this means for us and our stakeholders in the state of Victoria.

**5th National Mental Health Plan and National Agenda for Eating Disorders**

**Department of Health**

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**CBT-E: Cognitive Behaviour Therapy for Eating Disorders**

**Friday 27th October 2017, 9:00am-4:30pm**

This 1 day workshop provides a comprehensive introduction to Enhanced CBT (CBT-E); the latest version of the leading empirically supported, outpatient psychological treatment for eating disorders. The workshop draws on the work of Prof Christopher Fairburn, Director of the Centre for Research on Eating Disorders at Oxford University (CREDO), internationally recognised researcher and author, and Dr Anthea Fursland, researcher & principal psychologist of the Eating Disorders Program at the Centre for Clinical Investigations WA (CCI), and current president of the Australian & New Zealand Academy of Eating Disorders.

For more information, please visit the CEED training page: [http://ceed.org.au/training-and-events](http://ceed.org.au/training-and-events)
Are you working with a family who are struggling or feeling stuck with the eating disorder treatment? Do you think that they would benefit from speaking with someone who has lived experience of caring for someone with an eating disorder?

Family members supporting a loved one through an eating disorder are shown to have higher levels of carer distress than for carers of persons with other illnesses on measures of anxiety and depression. More importantly, most families come to the caring experience of an eating disorder feeling overwhelmed and ill-prepared, which can lead to an inability to do what is needed to assist the recovery of their loved one. The CEED Carer Consultant is available to work with services as an additional resource for families who clinicians feel would benefit from hearing from someone who has successfully supported their loved one through ED treatment. Families can be struggling to get started on treatment or have fallen apart further along. They can be carers of a child, adolescent or adult, and the families are varied in their structures.

Early evaluation of this role indicates that it is effective in increasing hope in families, shifting family paradigms of what is going on for their child and what is needed for recovery, extending their confidence in being able to tackle the illness and seeing merit in taking a strong approach to managing the eating disorder.

How to access CEED consultation, including Carer Consultation and education services:
1. The easiest way is to complete the online Request for Consultation Form which is automatically emailed to CEED direct on completion. Click Here to access the form.
2. Or you can download a Request for Consultation & Training Word Form and fax or email to CEED. Download the form from the Resources and Links page on our website www.ceed.org.au
3. If using the Word form, completed forms should be faxed to CEED on (03) 8387 2667 or email to ceed@mh.org.au. Alternatively call the CEED Team on: 03 83872673

Family-Based Treatment for Adolescents with Anorexia Nervosa (FBT)
Thursday 9th & Friday 10th November 2017, 9:00am-4:30pm

Family-Based Treatment (FBT) is recognised as the first line, evidence-based, early intervention model of care for adolescents with anorexia nervosa (AN). FBT for AN was originally developed at the Maudsley Hospital UK in the 1990s. Prof Daniel le Grange & Prof James Lock are the international leaders in the development & application of this approach as an evidence-based practice and have published treatment manuals and parent guides. CEED has delivered and developed FBT training over several years to provide training in this model to suit Victorian Service conditions. In the last four years CEED has provided FBT training to over 400 clinicians and provided service development and consultation support to implement the FBT model of care in many Victorian CAMH / CYMH Services.

For more information, please visit the CEED training page: http://ceed.org.au/training-and-events

The Eating Disorders Online Learning program modules 1,2,3 is a compulsory pre-requisite for attending the CBT-E or FBT training.

The Eating Disorders Online Learning program, created by our partners CEDD in NSW, is designed for all professionals working with eating disorders, and includes 5 modules with introductory to advanced levels of theory, practice knowledge and resources to work in eating disorders. Each module contains core curriculum, a quiz, and in-practice session with more in-depth view of the topic, clinical tools and a resources section. Formats include interactive text, role play examples by specialist in the field and feedback from sufferers and their families.

For more information or to register for a place, please visit: http://www.trybooking.com/OKHL
Introducing Belinda Caldwell, Carer Consultant and Project Officer

1. What does your role at CEED entail?
My role at CEED as a carer consultant encompasses a range of activities such as providing a carer perspective at clinical review meetings, conducting carer case consultations out in services, developing resources and more. I also lead the CEED communications activities including the websites and social media.

2. What are you working on at the moment?
At the moment, my main focus is reviewing our carer case consultation model and determining how we can evaluate this. We are also looking at a few new carer support models in different settings, including paediatric inpatient and the adult system.

3. What are you passionate about or aspire to do within the ED field?
My main passion is in ensuring families and carers are empowered, equipped and supported to be a key member of the team for their loved ones. My own lived experience with our daughter showed me the impact, positive and negative, of being placed at the center of the team. My particular passion is a focus on supporting families better in phases after refeeding, as I see this as especially challenging for families at a time when support tends to drop off. In addition, asking families how they are doing and supporting them better is likely to improve their resilience if the illness make a reappearance, which we know is quite common.

4. Where do you see ED treatment in 10 years time?
In 10 years’ time I hope that eating disorder treatment is largely accessible to anyone wherever they are through a combination of effective community outpatient support, with the back up of more specialist services as needed. Eating disorders will be diagnosed and treated early with less regard for having to meet severity criteria. Families from the moment of diagnosis will be included in treatment planning, will have access to peer support and education, will be able to access support services for respite in the same ways as for other intensive caring roles, and will emerge from the journey intact, wiser and with a close relationship with their loved one with the eating disorder.

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As CONNECTED is a new initiative from CEED, we would appreciate any feedback regarding the content of this newsletter. Is there anything you think would be helpful to include? Please contact ceed@mh.org.au