Convention Presentation Summaries

Each year, CCAPS sponsors several programs for continuing education credits for psychologists. At this year's convention in Las Vegas, we sponsored 28 programs. If you couldn't make all the programs you wanted to attend or weren't able to attend the convention this year, you can still find out more about some of the quality presentations that were sponsored. Below are descriptions of several presentations from this year's convention



College women's eating and body-image problems: Developmental, educational, counseling approaches

Alan M. Schwitzer

The need for campus professionals to address gender-related concerns is well-established. Among these, eating and body-image problems are prevalent among college girls and women. By far, the most common college eating problems are those not meeting anorexia or bulimia criteria, but still causing distress. In turn, this ACPA 2013 Convention CCAPS Sponsored program presented extensive research and detailed best practices for identifying, understanding, educating, and counseling women with these problems, known as EDNOS.

The program was connected to the 2013 ACPA Conference critical issue of advancing student learning and wellness, through the competency of advising and helping, especially as applied to the roles of counseling and psychological services, health center, and other student development personnel. The program's audience was counseling, health, and other student development personnel interested in female student needs.

Counseling and student services professionals respond increasingly to gender-related counseling needs and development concerns (Arnstein, 1995; Carter & Parks, 1996; Choate, 2008). Among these concerns, Park (2007) referred to eating disorders as "one of the most troubling," especially for girls and women (p. 158). Internationally, eating problems are among the 10 most common causes of psychological distress in young adult women (Mathers, Vos, Stevenson, & Begg, 2000). On college and university campuses, with large concentrations of female students, the high incidence of eating disorders is especially well-documented (Gallagher, Golin, & Kelleher, 1992; Koszewski, Newell, & Higgins, 1990; Miller & Rice, 1993). In addition, although eating

concerns historically were associated with primarily with European American girls and women on campus, these problems now appear among various ethnic populations (Becker et al., 2003); Cachelin & Streigel-Moore, 2006; Tsai et al., 1998). In fact, Rich and Thomas (2008) recently found few differences in disordered eating symptoms among African American, Latina, and European American women in college.

Further, although the major eating disorders, anorexia and bulimia, do occur among college women, by far the most commonly experienced difficulties are the heterogeneous group of less severe problems known as Eating Disorders Not Otherwise Specified (EDNOS) Ash & Piazza, 1995; Klemchuck, et al, 1990; Schwitzer, et al, 2008; Schwitzer et al., 2001). In various studies with college populations, only 6% percent of female students reported concerns about anorexia or bulimia, whereas 25% - 40% reported moderate problems with EDNOS, including body image worries, problems stemming from weight management, and out-of-control eating (Bishop et al., 1998; Schwitzer et al., 2001; Tsai et al., 1998).

Counseling and psychological services professionals, health staff and educators, and student development personnel working with young adult women on campus should have the knowledge and skills to work effectively with these students.

A Conceptual Framework for Practice

The convention program presented a framework for practice with college women experiencing EDNOS. The framework was based on a series of campus research studies published by the presenter and his colleagues (Choate & Schwitzer, 2009; Schwitzer 2012; Schwitzer & Rodriguez, 2002; Schwitzer et al., 2001; Schwitzer et al., 2008; Schwitzer et al., 1998).

Based on confirmed research with campus women, the framework discussed in the presentation was intended to help college professionals understand these students' most commonly experienced: (1) diagnostic features, including primary symptoms, duration and severity, and associated cognitive and behavioral features; (2) co-occurring features, including anxiety and depressive mood; (3) common psychological and developmental themes, including low self-esteem, interpersonal dependency, and perfectionism; common psychosocial, environmental, and family stressors, including family history and dynamics, school and academic pressures, and psychosocial history; and help-seeking characteristics.

Next, the framework was intended to help participants understand a three-part response plan comprising best practices for: (1) preventive programs and responses across campus to forestall the emergence of eating-related problems; (2) intermediate intervention and developmentally-oriented counseling, which is implemented once the problem exists, causes some difficulties for the student, has the potential to grow, but currently falls short of causing clinically significant distress or impairment in everyday life; and (3) psychological counseling intervention for fully developed EDNOS eating disorders, combining enhanced cognitive-behavioral therapy for eating disorders (CBT-E; Fairburn, 2008) and motivational interviewing (MI; Miller & Rollnick, 1991),

augmented with interpersonal therapy (IPT; APA, 2000, Neveonen & Broberg, 2005) and dialectical behavior therapy (DBT; Linehan, 199; Wilson et al., 2007).

Feel free to contact Dr. Alan M. "Woody" Schwitzer at aschwitz@odu.edu for more information.

References

American Psychological Association. (2007). Guidelines for psychological practice with girls and women. *American Psychologist*, 62(9), 949-979.

Arnstein, R. I. (1995). Mental health on the campus revisited. *Journal of American College Health*, 43, 243-251.

Ash, J. B., & Piazza, E. (1995). Changing symptomatology in eating disorders. *International Journal of Eating Disorders*, 18, 27-28.

Becker, A., Franko, D. L., Speck, A., & Herzog, D. B. (2003). Ethnicity and differential access to care for eating disorder symptoms. *International Journal of Eating Disorders*, 33, 205-212.

Bishop, J. B., Bauer, K. W., & Baker, E. T. (1998). A survey of counseling needs of male and female college students. *Journal of College Student Development*, *39*, 205-210.

Cachelin, F. M., & Striegel-Moore, R. H. (2006). Help seeking and barriers to treatment in a community sample of Mexican American and European American women with eating disorders. *International Journal of Eating Disorders*, 39, 154-161.

Choate, L. H. (2008). Girls' and women's wellness: Contemporary counseling issues and interventions. Alexandria, VA: American Counseling Association.

Choate, L. H., & Schwitzer, A. M. (2009). Mental health counseling responses to eating-related concerns in young adult women: A prevention and treatment continuum. *Journal of Mental Health Counseling*, 31, 161-183.

Fairburn, C. G. (1995). Overcoming binge eating. New York: Guilford Press.

Gallagher, R. P., Golin, A., & Kelleher, K. (1992). The personal, career, and learning skill needs of college students. *Journal of College Student Development*, *33*, 301-309.

Klemchuk, H. P., Hutchinson, C. B., & Frank, R. I. (1990). Body dissatisfaction and eating-related problems on campus: Usefulness of the Eating Disorder Inventory with a nonclinical population. *Journal of Counseling Psychology*, 37, 292-305.

Koszewski, W. M., Newell, G. K., & Higgins, J. J. (1990). Effect of a nutrition education program on the eating attitudes and behaviors of college women. *Journal of College Student Development*, 31, 203-210.

Nevonen, L., & Broberg, A. G. (2005). A comparison of sequenced individual and group psychotherapy for eating disorder not otherwise specified. *European Eating Disorders Review*, 13, 29-27.

Mathers, C. D., Vos, E. T, Stevenson, C. E., & Begg, S. J. (2000). The Australian Burden of Disease Study: Measuring the loss of

health from diseases, injuries, and risk factors. *Medical Journal of Australia*, 172, 592-596.

Miller, G. A., & Rice, K. G. (1993). A factor analysis of a university counseling center problem checklist. *Journal of College Student Development*, 34, 98-102.

Miller, W. R., & Rollnick, S. (1991).

Motivational interviewing: Preparing
people to change addictive behavior. NY:
Guilford Press.

Nevonen, L., & Broberg, A. G. (2005). A comparison of sequenced individual and group psychotherapy for eating disorder not otherwise specified. *European Eating Disorders Review*, 13, 29-27.

Park, D. C. (2007). Eating disorders: A call to arms. *American Psychologist*, *62*, 158.

Tsai, C-Y, Hoerr, S. L., & Song, W. O. (1998). Dieting behavior of Asian college women attending a U. S. university. *Journal of American College Health*, 46, 163-168.

Rich, S. S., & Thomas, C. R. (2008). Body Mass Index, disordered eating behavior, and acquisition of health information: Examining ethnicity and weight-related issues in a college population. *Journal of American College Health*, 56, 623-628. Schwitzer, A. M., Bergholtz, K., Dore, T., & Salimi, L. (1998). Eating disorders among college women: Prevention, education, and treatment responses. *Journal of American College Health*, 46, 199-207.

Schwitzer, A. M., Hatfield, T., Jones, A. R., Duggan, M. H., Jurgens, J., & Winninger, A. (2008). Confirmation among college women: The Eating Disorders Not Otherwise Specified diagnostic profile. *Journal of American College Health*, 56, 607-615.

Schwitzer, A. M., & Rodriguez, L. E. (2002). Understanding and responding to eating disorders among college women during the first-college year. *Journal of the First-Year Experience & Students in Transition*, 14, 41-64.

Schwitzer, A. M., Rodirguez, L. E., Thomas, C., & Salimi, L. (2001). The Eating Disorders NOS diagnostic profile among college women. *Journal of American College Health*, 49,157-166.

Wilson, G. T., Grilo, C. M., & Vitousek, K. M. (2007). Psychological treatment of eating disorders. American Psychologist, 62, 199-216.