

## COMMUNITY RESPONSE

On Friday, February 3, 2023, NEDA published our initial response to the guidelines recently released by the Clinical Practice Guideline Subcommittee on Obesity of the American Academy of Pediatrics (AAP). In determining that response, we consulted with members of our Clinical Advisory Council, our Research Advisory Council, and other community stakeholders. NEDA concluded that the best way to advance our mission of serving and supporting individuals and families in their eating disorder journeys was to engage with the AAP in critical and constructive dialogue. Our objective is to address significant concerns about harms caused by the guidelines, and to ensure that the implementation plan for these guidelines is informed by input from eating disorders professionals about the required pediatrician training, which must also include clear, accessible, and unbiased information for individuals and families relative to their treatment options.

Since publishing our response, we continue to work steadily on the actions we pledged to take:

- 1) NEDA, one of our Clinical Advisors, and one of our Founders will be participating in an AAP work group focused on developing effective training for pediatric health care providers specific to screening for and treating disordered eating and eating disorders. This includes education about the harm of weight stigma, particularly for children in larger bodies who are at higher risk of eating disorders.
- 2) We are working with our Clinical Advisory Council on a guide parents can use to facilitate conversations with their pediatricians to help them understand the controversial aspects of the guidelines, ensuring that they have the knowledge to make informed choices about treatment options and that they understand what optimal health means for their child(ren). We plan to publish that document next week.

It is our goal that this engagement with the AAP and other stakeholders around these guidelines will lead to a long-overdue, broader conversation about significant and persistent deficiencies in the understanding, diagnosis, and treatment of eating disorders. This allows us to further work with the broader community to focus on the insufficiencies in pediatrician training, the dramatic underinvestment in research, the lack of equitable access to effective and affordable care, and the biases that exist in many aspects of clinical practice.

We are hopeful that the attention brought to these issues by the new guidelines will catalyze serious, sustained, and constructive engagement by stakeholders across the medical profession and the eating disorders community. This action will finally clear the way to recognize and comprehensively address the public health crisis represented by eating disorders. We stand ready to invest our time and resources in partnership with other stakeholders to achieve this outcome.