

Friday, April 17, 2020

**Webinar: Enhancing Diversity in the Dietetics Profession: Stories from RD/RDNS
with Disabilities (PART 2)**

Research Dietetic Practice Group

CART CAPTIONING PROVIDED BY:

ALTERNATIVE COMMUNICATION SERVICES, LLC**

www.captionfamily.com

* * * * *

Communication Access Realtime Translation (CART) is provided in order to facilitate communication accessibility. CART captioning and this realtime file may not be a totally verbatim record of the proceedings.

* * * * *

SLIDE 1

>>MARIA: Welcome everyone, hello and thank you for joining us today. I am Dr. Maria Azrad webinar coordinator for the Research Dietetic Practice Group and the host for today's webinar. This webinar is approved by the Academy and CDR for one CPEU. All registered attendees will be emailed a link to download the CPE certificate and PDF of the slides. We are attempting to do this as timely as possible. Please bear with us. We will get you your CPEU certificate. It will be posted to the RDPG website as well as the Academy. Everyone is working from home currently so things are moving a little bit slow. Please be patient.

The URL to access the closed caption is going to be in the chat box. When you click on it, a new window will open and the captions of the presentation for those with a hearing loss or with difficulty hearing or understanding any of the speakers will be able to access the closed captions. Unfortunately, WebEx does not allow for captions to appear in the same window with the slides. You cannot see the captions in the slides at the same time. Captions can be accessed on smart phones, tablets or computers. You can read the captions on one of those while you view the slide on another device.

Also, a transcript of the entire webinar will be available along with all of the PDF slides. We will have the slides, the actual webinar, the transcript and the CPEU certificates all posted to the website. Again, just be patient please and give us time to get that done. We are all trying to get that done without a lot of technical assistance at this time. To ask a question at any time during the webinar, please use your chat box. These questions will be answered at the end of the webinar. Now, I'm going to turn over the presentation to her moderator Neva Cochran.

>> NEVA: Thanks Maria, hello everyone I'm Neva Cochran the moderator for today's webinar, "Enhancing Diversity in the Dietetics Profession: Stories from RD/RDNs with Disabilities (Part 2)." This is the second part of our three-part series. We apparently did not have the captioner sign on. There were several changes in captioner over this week and we don't seem to see this person on here, nor has the link been posted. We will try to do the captions and if that's something anyone needs that will be on the recorded version that you will receive with the links with all the emails of the other CEU forms and PDF of slides and transcript if we get the captions.

A little bit about myself, I served as a leader in the Academy for many years at the district affiliate and national level and as a member of the Academy Diversity Committee from 1994-96. I helped create the first diversity philosophy statement for our organization. I also served as mentor for Dr. Baxter for her Capstone Project for the Diversity Leaders Program which is a program of the Academy to identify leaders in different underrepresented groups and they promote learning more about the Academy and also having a capstone project that relates to their particular area of diversity. She was a speaker on our first webinar and she is also the project director for the webinar series and grant that we received to put these on.

Before we begin I want to briefly share with you as a dietitian without a disability how I became an advocate for dietitians with disabilities. It all began about four years ago in February 2016 when a young Academy member named Tracy Williams emailed me after hearing me speak on a webinar about starting my own business. She had completed her Bachelors in dietetics but had been unable to be matched with a internship and wanted to know if I had advice for her. She really believed part of the reason was due to her disability. We had a call the following week and in my efforts to help her forge a career in nutrition without an RD credential, I connected her with several colleagues to help her with the various speaking and writing that she was doing. One of these included Suzi Baxter, mentioned previously, in December of that year. I have known her since we were both young dietitians in Dallas. I remembered that she had developed a disability late in her career about 10 years ago. With Suzi on board in her background in research and grant writing, we were really able to accelerate our efforts and we have been off running ever since.

SLIDE 2

We've had several successes with the latest being this series of webinars with the grant that was awarded to the Research DPG with Dr. Baxter as the project director. Today is the second in a series of three webinars.

SLIDE 3

The purpose of today's webinar is to learn from Academy members as they share their stories and answer questions.

SLIDE 4

We have three learning objectives.

1. State an ethical take away point concerning beneficence and RD/RDNs with disabilities.
2. Describe two benefits that RD/RDNs with disabilities can provide uniquely to the profession.
3. And explain two ways that RD/RDNs without disabilities can interact and work more effectively with RD/RDNs with disabilities.

SLIDE 5

Here is an outline of what will be included in our webinar today.

We will review the Academy's Diversity and Inclusion Statement.

I will provide some statistics for the United States and Academy related to diversity.

We will look at the Code of Ethics and how it relates to disability issues.

And then we will hear from the three speakers and their stories.

And we will have a public service announcement called "I Can."

Then we will have the opportunity for you all to ask questions and as Dr. Maria Azrad said,

please put those in the chat box anytime during the webinar that you think of one.

SLIDE 6

For those of you who were on Webinar One, this will be a repeat. We are including this basic general information at the beginning of each webinar in case someone is only listening to one of them. This is the Academy's Diversity and Inclusion Statement. "The Academy encourages diversity and inclusion by striving to recognize, respect and include differences in ability, age, creed, culture, ethnicity, gender, gender identity, political affiliation, race, religion, sexual orientation, size, and socioeconomic characteristics in the nutrition and dietetics profession." And in 94-96 when I was on the Diversity Committee, we came up with that. I was the person that crafted the original statement with all those different words in it. Several have been added over the years, but I did put ability in at the very beginning. Some of the others have been added along the way.

SLIDE 7

These are some statistics on gender and race and ethnicity for the U.S. population from the 2018 American Community Survey. We also have for RD/RDNs using the February 2020 CDR data, and for nutrition and dietetics students using the Accreditation Council for Education in Nutrition and Dietetics reports for 1988 and 2018, the earliest and latest years they are available. The only area where current RDs are similar to U.S. statistics are for white individuals, with men and all the races and ethnicities underrepresented. From 1998 to 2018, the percentage of white students and interns decreased by 10% and for black individuals by 2%, but increased by 2% for both men and Asians, and by 8 points for Hispanics and Latinos. So, diversity for gender and race ethnicity is improving somewhat for students. In the CDR column, notice that 11% and 14%, respectively, did not report gender and race/ethnicity. On your online CDR profile page, please make sure to indicate your gender and race/ethnicity so our current diversity information can be more accurate.

SLIDE 8

Now, we are going to look at the legal definition of disability. It is a physical or mental impairment that substantially limits one or more major life activities, a record of such an impairment or is regarded as having such an impairment.

SLIDE 9

According to the University of New Hampshire's Institute on Disability, among the civilian non-institutionalized population in the United States in 2017, the disability rate was 13.2% or almost 43 million people. Disability rates were similar by gender at just under 13%. Disability rates by race and ethnicity were highest for African-Americans around 14%, Caucasians at 14%, non-Hispanic others at 12.5%, and lowest for Hispanics at 8.9% and Asians at 7%.

SLIDE 10

By type, disability rates in the United States were greater for ambulatory at 4.9% and cognitive at 4.5% followed by independent living at 3.7% and hearing at 2%, vision at 2%, and self-care at 1.8%.

SLIDE 11

For the first time ever, I would like to say this is through the Herculean efforts of Dr. Suzi Baxter, the Academy's 2019 Compensation & Benefits Survey of the Dietetics Profession included disability questions. Of the 37,440 dietetics practitioners sent the survey, a total of 8,765 usable responses were received, a response rate of 23%. The survey sample was stratified by registration type (RDN or NDTR), membership status (either member or nonmember), and availability of an email address. Results are weighted to accurately reflect true population proportions. Of the 16% that responded they were currently not working in the field of dietetics, 3% cited disability or health problems as the reason. In response to the disability and health questions, 1% are blind, deaf, or have a severe vision or hearing impairment, 1% have a condition that substantially limits one or more basic physical activities, and due to a physical, mental or emotional condition lasting 6 months or more, 2% have had difficulty learning, remembering or concentrating and 1% have had difficulty working at a job or business.

SLIDE 12

The latest revision of the Code of Ethics for the Academy and CDR went into effect on June 1, 2018. The Code of Ethics has four principles: non-maleficence, autonomy, beneficence, and justice. Under these four principles are numerous standards. By accepting

membership in the Academy and/or accepting and maintaining CDR credentials, all nutrition and dietetics professionals agree to abide by this Code.

SLIDE 13

Our learning objective for ethics for this webinar is to "state an ethical take away point concerning the beneficence and RD/RDNs with disabilities." The Code's third principle is "Professionalism or Beneficence." The definition of beneficence is taking positive steps to benefit others, which includes balancing benefit and risk.

SLIDE 14

This slide shows the Code's nine standards for nutrition and dietetics practitioners for the beneficence principle on a variety of topics.

SLIDE 15

Of these standards, **B** is probably the best ethical take away point concerning beneficence and RD/RDNs with disabilities, "Respect the rights, values, knowledge, and skills of colleagues and other professionals." As you listen to our speakers today, please keep this in mind and how the standard applies to this practice of dietetics.

SLIDE 16

We asked our speakers to cover several points in their stories including how they acquired their disability, why they chose nutrition and dietetics as a profession, their current professional position and any accommodations they use for it, their greatest success as an RD, what dietitians with disabilities can uniquely provide to the profession, ways RDs with and without disabilities can work effectively together and how the Academy has helped them in their career.

SLIDE 17

Now I would like to introduce our first speaker, Ryan Branson. He most recently

served as Director of Nutrition Services for Shoreline Center for Eating Disorders Treatment in Long Beach, California. Ryan received his Bachelor's degree in Nutritional Science and Nutrition and Fitness from the University of Missouri. He then earned a Masters in Eating Disorders and Clinical Nutrition from the University College, London in the United Kingdom and an MS in Nutrition from the University of Chicago. I originally met Ryan a couple of years ago when he started following me on Twitter. In his Twitter bio he wrote, "Eating Disorders Registered Dietitian, Eating Disorder Activist, Actor, Writer. I have cerebral palsy but I don't let it limit my dreams." I messaged him through Twitter immediately and told him about the work we were doing and asked if he would like to join us and he enthusiastically agreed! Thanks for being here today and sharing your story, Ryan. I'm turning it over to you.

>> RYAN: Thank you Neva. As Neva said, we met through Twitter and I was very happy that she had reached out to me. I was super excited to be asked to participate in this great webinar. A little bit about myself, I was born 3 months premature and due to this I was diagnosed with cerebral palsy at the age of 3. As you may or may not know, cerebral palsy is a neurological condition. It affects everyone differently. For me specifically, it affects my walking, my balance and because of this I typically use a walker. Depending on the distance sometimes I will use a mobility scooter as well. That is much less frequent. Most of the time I use the walker which you can see in the picture. In regards to working, the field of nutrition and dietetics came about because I have always had a deep interest in nutrition. At the same time I also had a deep interest in helping other people and making a difference in people's lives. In addition to this, I have also been specializing in getting education and treatment of eating disorders. As you may or may not know, working in the field of eating disorders can be very challenging at times just because of some of the unique barriers and challenges that can come up. However, for me being able to assist these clients and improve the relationship with food and of course helping them move forward in full recovery in this very challenging element. That for me makes all the challenging moments totally worth it. It's definitely very rewarding work despite it being challenging. For me, I have used challenging times as an RD and in life as a central opportunity to be used for continuing to learn and continue to grow both as a person but also in regards to my professional development. I also want to mention in my most recent position as Director of Nutrition Services and RD at Shoreline, I did not use any accommodations in my workplace other than having an office location that was in a good proximity to some other areas that I use quite frequently. I do have to say at Shoreline and other past work experiences I have had including my dietetic internships, everyone has always been super accommodating and super nice about everything. I can say I really appreciate it. I have met a lot of super nice and compassionate people in the dietetics field and I think that is really great.

A little bit more about me. I am a relatively new dietitian. I've been a dietitian now

for a little over a year or so. One of my proudest moments that I have had so far, one that I managed to do in 2014 I moved to London, England to get my Masters degree in Eating Disorders and Clinical Nutrition. I got it from University College London. I had been wanting to do this theory program for many years prior. This was when I went it was relatively new. To this day it's the only degree program of its kind anywhere in the world. I really wanted to pursue this because I knew for a really long time that I wanted to work in the field of eating disorders to help people and make a difference. I wanted to do this experience to help me reach that goal and also make myself marketable as well. I will say one thing I am proud of is I took the steps to move all the way from the U.S. to the UK and it was scary because I had the disability which does make things harder at times. I was also away from my friends and family which I had never been that far apart from my friends and family before. It definitely was a daunting experience but I wanted to do it for myself and I knew I could so I did and it ended up being a great experience.

Another thing I am proud of is my most recent job at Shoreline. I was living in Chicago and I got this job opportunity and I decided to move across country to pursue this opportunity that I've been working really hard for. It was kind of scary but I knew I could do it and I wanted to do it and like Neva said I really don't let my disability impact what I do for my dreams because I really believe in what I can do. I want to let everyone else out there know, too, that just because you have a disability, it does not have to impact your dreams or what you can do.

Being an Academy member has definitely benefited my career and I've been able to use the excellent resources that are provided by being an Academy member. This has allowed me to provide some of the highest quality care and support that I can to my clients which of course is something I work towards every single day, giving the best care.

I also think RDs with disabilities can bring some great things to the dietetics profession including proof that a disability does not have to define you and it does not have to define your goals in life whether that is professional or not. They can still come through. If you put the work in, your disability does not have to be the thing hinders what can come of it.

I really think at the end of the day whether we have a disability or not, all RD/RDNs have a common goal — to help our clients with the happiest and healthiest life that they can. I really think since we all have that common goal that is something we can continue to build on together in forming relationships with one another. Because we can learn so much from each other we all have our own experiences in life. We all have our own specialties within our profession. We can learn so much from each other.

Going off to end here, when you think about it, the field of nutrition is relatively a young science in itself. Because of that we are always learning new things. Think of all the

research studies that come out all the time that we use in the revising and crafting our interventions with our clients. We are always learning new things and because of this, we as dietitians always cooperate with each other and share knowledge and strategies that work for us or maybe not work so well for us. Because really, collaborating and working together for the best of our clients is really important. Whether you are a RD/RDN with a disability or not, we can all play a very important and active role in continuing to help our clients and continuing to grow the profession of nutrition and dietetics. I want us all to remember when things get tough we remember the passion and drive that drove us to pursue the profession of nutrition and dietetics in the first place because helping people is why I got into the field, to play an active and helpful role in people's lives having a rough time. I get a lot of benefit out of that and just being able to be there for people. Even just being a listening ear to people and offering the hope that they can work together with me, with everyone else and live their best life that they can. At the end of the day, that is what we are all working for. That is my story. As Neva said, at the end if you have any questions for me, I am more than happy to answer them. Thank you very much.

>> NEVA: Thank you so much Ryan for sharing your amazing story. We really appreciate it. Also, thank you for persevering through some people being unmuted. I got several messages and I was sending a message to Maria to mute everybody. There was someone eating very loudly. Please be sure that you are muted. Thank you Ryan, we really appreciate it.

>> RYAN: Thank you Neva.

SLIDE 18

>> NEVA: Next, we have Jackie Henderson. I'm sorry, I lost my screen. It will just be a second, I'm sorry. I am using an iPad for my script and I touched the wrong thing and it disappeared. Got it. There are always glitches and I have to get to where I was to introduce Jackie. Jackie is our second speaker. Jackie received a Bachelor's degree in Dietetics from Fontbonne University in St. Louis Missouri. She went on to complete her dietetic internship at the VA Medical Center in St. Louis where she works as a Spinal Cord Injury Dietitian. Jackie was referred to me this past year by one of last week's webinar speakers, Liz Dunn. She was also excited to join our efforts when I contacted her. I'm very happy that we have you here with us today and the floor is all yours.

>> JACKIE: Thank you so much Neva. I'm happy to share my story today and hopefully it will be helpful with everyone else's story. That was great listening to the story that was last told, too. For me at the age of 15, near the peak of my teenage rebellion, I was involved in a car accident that completely severed my spine. The official diagnosis was a T11

ASI spinal cord injury. Most people are surprised to learn the accident was not from any poor decision-making that comes at this stage of life. It was an ordinary and unfortunate car accident. It truly was a troubling time, while I was already grappling with self-image issues and trying to gain independence away from my parents. I was all of a sudden trapped in a body that did not move from the waist down. I was 100% dependent on my parents again, which was a tragedy for that age.

Life goes on as they say, and thankfully so. I really stumbled on this dietetics career. I was an average high school student, my only interest was art. Without having any other aspirations, I went with a fine arts major at a local community college right after high school. It did not take me long to start questioning that decision and how I was going to make a living creating mediocre art! In any case, I was in the process of completing my general education requirement and ended up taking a biology class that introduced the topic of genetic engineering of food. That is what started my interest in both food and sciences. After that I was hooked once I found the field and I sincerely tell you that it was by God's grace I did so well in college taking classes and courses that were far beyond my repertoire and the only class I ended up being average at or maybe barely passing was organic chemistry. Hopefully some of you can relate that was just because it was organic chemistry.

We fast-forward to my current life as a single, 41-year-old mother. I might be the elder of the group today. I'm not telling you all of those years of stories in between. My current disability affects me in very different ways now than it did in the beginning. Over the years I've seen myself experience different stages of relating to my disability. The view I have of myself has very much impacted my relationships and how others view me throughout the years and that has changed throughout the years. Then there are the physical impacts of my disability that have changed through the years as well. Things that I considered a challenge then are not now and vice versa.

In general, I still use a manual chair for all of my mobility. I have full use of my upper body and it is used a lot! Certainly, this has presented challenges and I am starting to progress into a stage of overuse issues with my upper body. That of course is because the arms were never meant to do the work that your legs are meant to do. Especially for so many years. I am sure from the other presenters in similar situations we will hear last week, today, and next session, there are some common struggles such as fatigue, needing to stretch, needing a physical space at home and work to move around in. Then there are other challenges that may be less obvious to a common bystander, that of time and money.

The one of time is when I find myself cringing a little bit when I hear people say things like "we all have 24 hours in a day." That is true, we do, but it can be different for people. No one's 24 hours are truly equal. There is a lot of mundane tasks that take up time when you

have a disability. Things like elevator rides, restroom breaks, getting dressed, showering, cooking, loading and unloading into transportation if you have different devices you need to use to get around with. The cost of living with a disability has been well documented, so I don't feel I need to elaborate on that one. Just to say that most chairs cost as much as your car or SUV with a varying portion of coverage from insurance.

It's important to address and highlight these challenges, not for pity or understanding, but to showcase the resulting benefits. Challenges or barriers really do offer a breeding ground to master those areas and has the ability to be transferable to other areas of our life. These examples that I gave, and I'm sure there are others, you learn how to assign value to all the potential tasks in the day that you recognize what is essential for yourself and better prioritize your time and finances all while really learning how to accept the uncontrollable factors at play. I think this is one area that I can highlight where RD/RDNs with disabilities can uniquely provide to the field of dietetics. As our world and people's lives grow more complex, it takes a discerning eye to sort through it all and guide that focus for an individual trying to achieve certain health goals.

It is also an overcoming spirit that is bound to come through as a witness with your clients. When you have a disability that is obvious like mine that you can physically see as soon as you meet me, it's more often unspoken. But even if it is spoken to your clients when you place yourself in a more vulnerable or revealing light, it has the potential to create great rapport and deeper relationships. I found this to be true throughout my career.

I did my internship at the VA medical center and I truly never left. I left for a month and was happy I got hired back on. There is no place that I would rather be. I actually started in the mental health unit at the VA medical Center in St. Louis and followed by a long stint in outpatient nutrition counseling. It was during this time that I started to consider transferring to my now position as a Spinal Cord Injury Dietitian. I have got to tell you I was so hesitant to join the Spinal Cord Injury Team because obviously that is what I had and you think it would be a natural fit. However, my concern with that is I wanted to be recognized as a dietitian and not just the token spinal cord injured employee. It's almost too obvious for me. The funny thing is this concern I had proved to be not valid at all. Once I got there, I spent very little time explaining myself to my clients and there was this unspoken mutual understanding about what I had been through and how I have to live my life. A lot of times when I introduce myself to a veteran, most veterans are not shy about asking questions and they immediately want to know everything about me. If anyone in outpatient nutrition knows, you have time limits. There's only so much I'm able to share even though I'm happy to share it. This became not a concern when I entered into a spinal cord injury. I believe regardless of what the disability is, having her coworkers or clients exposed to certain physical

limitations does strengthen the relationship and it lowers one's defenses. I found that in my relationships with the veterans that I get to take care of now.

I have not had to have any major accommodation to be able to focus in my current or past roles. Luckily that clinical hospital work is conducive to being able to get around in a wheelchair. There have been issues that needed addressing to make a more universal accessible environment. Yes, even an entire ward serving spinal cord injury patients, these details can sometimes get neglected. Things such as having personal protective equipment that is within reach and access to waste containers that do not require a foot to open them!

So far in my dietetics career, and there might be things that are escaping me, I am probably most proud and feel most fulfilled from our cooking groups that we get to do with veterans. These groups, taught alongside an occupational therapist, teach healthy eating and adaptive ways of cooking. That has really been fulfilling and fun for me to do, to ensure that personal experience with them combined with my dietetics knowledge.

I've been Academy member for the majority of my career. The resources always proved to be worthwhile. It's provided me with a network and a backbone for the evidence-based dialogue that we need throughout our careers. I'm truly grateful for this opportunity today to share my experience with the Academy and Academy members and potentially Academy members. I hope it is enriching alongside some of the other stories we will get to hear.

One final take away beside any questions anyone might have later that I would like to end with is no two disabilities are alike. I found that when I became a spinal cord injury dietitian how very different they are even though there is this one similarity of having physical limitations. Exposure to the diverse world of disabilities in a presentation like this is truly essential to having true understandings of this topic and I really appreciate you coordinating this and bringing light to it. That is all I have for now.

SLIDE 19

>> NEVA: Thank you Jackie. Thank you for sharing your inspiring story. Our final speaker is Anna Sweeney, a Certified Registered Dietitian who is the owner of Whole Life Nutrition in Concord, Massachusetts, a private practice specializing in eating disorders. Anna earned her BS in Food Science and Nutrition and completed her MS in Dietetic Internship, all at Simmons College in Boston. I met Anna through my friend, Jessica Setnick, who is a well-known eating disorders dietitian in Dallas. When I told Jessica about the work I was doing, she immediately connected me with Anna who she met through eating disorder dietitian

organizations. Thank you for being here Anna, and I will turn it over to you.

>>ANNA: Thank you Neva I'm delighted to be here with you today. Thank you for the introduction. My name is Anna. I'm a Certified Eating Disorder Registered Dietitian and an eating disorder and body image expert and a full-time disabled dietitian. I have lived with multiple sclerosis for the last 20 something years. I was diagnosed when I was 15.

My initial plan coming out of high school was to be a sports broadcaster. I like sports and wanted to be one of those people on the football field interacting with players. I stopped being able to wear high heels and I changed colleges and ended up coming back home because I was sick. I came home to see my sister who was living in a very different body and this is what got me interested in the field that I am practicing now.

I entered college and graduated college in two and half years all the while saying I wanted to "do this work before I could do this work" not ever really believing as a 18 to 20-year-old, I was in a totally, physically capable able-bodied. I never anticipated disability would be a part of my life. I am superbly grateful that I expedited my education as much as I did because it has given me the privilege of working in the field that I am deeply passionate about for the last 13+ years.

I chose to work in the profession of nutrition and dietetics with the sole intention of working as a eating disorder dietitian. This decision was made as a result of my sister developing an eating disorder. I came to the field to tell her that people get better and I have been in the field for nearly 13 years and am proud to say after treating thousands of people that recovery happens and I am really happy to say it is also happened for my sister. I have worked at all levels of eating disorder care and currently own and operate a private practice dedicated to the treatment of humans with disorders of eating, eating disorders, body image distress and those who are working towards food and body freedom. My experience in this field has given me the opportunity to start my career in an interdisciplinary setting. I've worked in multiple eating disorder programs and have served as the director of nutrition services at several eating disorder programs as well. My ultimate decision to step down in the last job that I had before being in an exclusive private practice dietitian was working for a national eating disorder organization where we had facilities all over the country. I made the decision to step down from that position because most of the sites were in fact inaccessible. I fortunately had a private practice the entire time that I was working in eating disorder programs. I made the decision to move entirely into private practice where I am now happy to say that I have a full practice. Based on the nature of eating disorders, I'm sad to say I will always have a full practice.

Thinking about how my disease affects my body, most commonly the thing that most

directly affects me - this is mostly about my ability to walk and my ability to balance. I use a walker every day for everything. I use a wheelchair if I'm going long distances and I have the privilege of access to electrostimulation devices that I use on my legs. As was just said, disabilities is quite costly and have a great appreciation for the privilege that I have been given to allow me to live in the way that I do. I have ramp access to my office, use my walker to navigate the space. I'm really fortunate to have a landlord who is willing to accommodate my needs as they change. I'm particularly fortunate to have started my career as an able-bodied person. I was able to be provided a number of opportunities to work with clients and colleagues at all levels of eating disorder care.

I'm proud of the work I have done and surprisingly I feel in some ways most proud of the Instagram community I created in all things eating disorder recovery. I have spoken freely about my experience of living as a disabled person which has allowed me to connect to a much larger audience. I am learning as I go most certainly and feel really proud of the work that is happening. There on Instagram, it's allowing me to speak and I've spoken to national audiences about eating disorders and I'm grateful because of the work I have done in this field, my disability is secondary to the work that I have done.

In my case, the gift of disability has really been about my ability to speak to and hold body image stories with a completely new awareness thinking about the nature of the work that I do. I think it's really valuable with dietitians with disabilities to demonstrate we are more than our bodies. I also think it's important for us to challenge the paradigm of what it dietitian "looks like."

Being an Academy member has allowed me to be part of DPGs that mean a lot to me. I have been connected to research that supports the work that I do. I have felt empowered by community and challenged to continue with the work in ways that best support the growth for me as a professional in the care of my clients. Thanks.

SLIDE 20

>>NEVA: Thank you so much Anna. We really enjoy learning more about your journey and your career. Now we have a short, captioned, public service announcement titled "Working Works" that was created by the Campaign for Disability Employment which is a collaborative effort among several disability and business organizations working to change attitudes about disability and employment. [Watching PSA]

SLIDE 21

>>NEVA: I cannot move the slide, Maria can you click to the next slide? For more information about becoming a member of the Academy of Nutrition and Dietetics if you are not already, you can email membership@eatright.org.

SLIDE 22

The recording of today's webinar will be available on the Academy's website along with the CEU certificate and PDF of the slides and a transcript of the entire presentation. You will receive an email with the links as soon as we can possibly get it out as we explained earlier. There are two certificates. A certificate without code 175 is for the live webinar, but if it has code 175 that is if you listen to the recorded webinar.

SLIDE 23

Now, we have just a couple of minutes for questions. I did see one question here from Anne. She said I'm wondering if disabilities other than mobility issues limit success in the profession such as blind, deaf and most especially mental disabilities? As internship director, it is challenging to support interns with those kinds of issues. Are there any suggestions or resources? Would anyone like to tackle that question? If so, unmute yourself and talk.

>>JACKIE: This is Jackie. I don't know that I have a solution or an answer, but I think one resource that you should have in your back pocket would be to reach out to your local Center for Independent living. There is a network of these centers that I think could really be utilized in helping the individual for the unique needs and figuring out how they can be better supported during the internship or their career. I worked with our local Center for Independent Living which is in St. Louis here. There are others, too, across the nation.

>>NEVA: Thanks Jackie, that's a great suggestion. That's the only question I saw. I have some questions myself but because they were coming towards the end of the hour if I don't see any - someone asked of part one, if the certificate had been sent and - -

>>SUZI: I can answer that question.

>>NEVA: Suzi Baxter will answer that question as well.

>>SUZI: We have an article coming out.

>>NEVA: I was going to mention that Suzi, in the next slide.

>>SUZI: Okay.

>>NEVA: There is some feedback from you now. I will try to provide the contact information if it's okay with the speakers so that you may contact them individually if you have additional questions. I will put together a document that can be downloaded at the site where you can get the slides and CEU certificates. To be respectful of everyone's time, I wanted to just thank you all for attending.

I wanted to say that if you are a dietitian with a disability who would like to join our group, please contact me through my website Nevacochrandr.com.

An article by Dr. Suzi Baxter, Barbara Gordon, the Research DPG Chair, and me titled, "Enhancing Diversity and the Role of Individuals with Disabilities in the Dietetics Profession" will be published in the May Journal of the Academy of Nutrition and Dietetics. There will be additional information that I think will answer some of your questions in there. Please be on the lookout for that in the May issue.

Finally, I'd like to invite you to join our third and final webinar in the series Thursday April 23 at 1:00 p.m. central time, which will feature two speakers from the Job Accommodations Network with tips for hiring RD/RDNs with disabilities.

I'd like to thank our speakers Ryan, Jackie and Anna and for all of you who were participating today. Thanks again and have a great rest of your day.