

Prevention is any systematic attempt to change the circumstances that promote, initiate, sustain, or intensify problems like eating disorders. This may involve reducing negative risk factors (such as body dissatisfaction, depression or basing self-esteem on appearance) or increasing protective factors (such as a non-appearance oriented self-definition, and replacing dieting and body snarking with intuitive eating and appreciation for the body's functionality). Prevention is important to reduce the suffering associated with eating disorders. Treatment is often expensive and difficult to obtain, which makes prevention even more important.

At least two types of audiences may be the target of eating disorders prevention:

- **Universal prevention** is aimed at the general public, i.e., people without any symptoms of eating disorders. In fact, the audience typically does not even show any particular risk of developing eating disorders. This type of prevention aims to promote healthy development, understanding of the many complex issues that cause eating disorders and to stop eating disorders before they begin.
- **Targeted prevention** targets people who are beginning to show indications of eating disorders. So, for example, they may have unusually high levels of body dissatisfaction. The audience does not yet have eating disorders. The goal is to stop the development of a serious problem.

Does Eating Disorder Prevention Work?

There are now dozens of studies evaluating a variety of eating disorders and disordered eating prevention programs. Some of the major findings are:

- Prevention programs can alter knowledge, attitudes, and behaviors associated with eating disorders and disordered eating.
- Both targeted and universal prevention programs have enjoyed some success, though there may be more success with the targeted programs.

- There is particularly good evidence that targeted programs using a cognitive dissonance approach is effective with adolescents and young adult women from various ethnic groups. This approach encourages girls and women to question the media and cultural messages by asking them to present information on eating disorders prevention to others. The conflict between what they say to others and what they do themselves creates dissonance that leads to change so that their behaviors are more consistent.
- Programs that adopt an ecological approach – involving not only individual change but also changing the environment of teacher and peer behavior – have also shown some success. So have media literacy programs. Programs that emphasize a healthy weight have also led to change.
- Various programs have successfully discouraged the development of eating problems in children, adolescents, and young adults.
- Obesity and eating disorders programs can be combined.
- Much more research is needed concerning prevention. We are particularly lacking information about prevention programs that work with children, with males, and with people from a variety of ethnic groups.

Suggested Readings

- Cash, T., & Smolak, L. (2011). *Body image: A handbook of science, practice, and prevention* (2nd ed.). NY: Guilford.
- Levine, M.P., & Smolak, L. (2006). *The prevention of eating problems and eating disorders: Theory, research, and practice*. Mahwah, NJ: Lawrence Erlbaum.
- Neumark-Sztainer D. (2005). Can we simultaneously work toward the prevention of obesity and eating disorders in children and adolescents? *International Journal of Eating Disorders*, 38, 220-227.
- Smolak, L., & Thompson, J.K. (2009). *Body image, eating disorders, and obesity in youth: Assessment, prevention, and treatment* (2nd edition). Washington, DC: American Psychological Association.
- Stice, E., Shaw, H., & Marti, C. N. (2007). A meta-analytic review of eating disorder prevention programs: progress at last. *Annual Review of Clinical Psychology*, 3, 233-57