

About the Executive Summary

This executive summary provides the highlights of the most recent issue of the *Children's Mental Health Research Quarterly*, available for free at childhealthpolicy.ca. The *Quarterly* presents the best available research evidence on a variety of children's mental health topics. The BC Ministry of Children and Family Development funds the *Quarterly*.

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About the Children's Health Policy Centre

We are an interdisciplinary research group in the Faculty of Health Sciences at Simon Fraser University. Our research focuses on reducing health inequities and improving social and emotional well-being for all children, and on the public policies needed to reach these goals. To learn more about our work, please see childhealthpolicy.ca.



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SPRING 2015 VOL. 9, NO. 2

Promoting healthy eating and preventing disorders in children

Many young people feel satisfied with the size and shape of their bodies. As a result, they do not engage in unhealthy weight control behaviours such as excessive dieting or over-exercising. This is particularly true for boys and younger children. Even among teenage girls, about a quarter have high levels of body satisfaction. This suggests that many children feel good about their bodies, eat well and exercise for health, not appearance.

Some children still develop eating disorders

Nevertheless, an estimated 0.2% of children aged 11 to 17 develop eating disorders. At any given time, about 700 young people in BC are struggling with disorders such as anorexia nervosa, bulimia nervosa and binge eating. It is important to know whether these disorders can be prevented, before they interfere with child well-being and healthy development.

Preventing eating disorders

We conducted a systematic review of randomized controlled trials (RCTs) on eating disorder prevention programs for anorexia nervosa, bulimia nervosa and binge eating. We found six RCTs assessing the following four programs in young people that met our criteria:

- *Education Program* aimed to discourage unhealthy weight control behaviours such as strict dieting in teenage girls in the general population, with teachers delivering six sessions on healthy body image. This universal program reduced bulimia diagnoses and symptoms (in one RCT).
- *Healthy Weight* aimed to reduce bulimic symptoms in teenage girls with body image concerns, with mental health practitioners delivering three sessions on healthy body image, eating and exercise. This program reduced eating disorder symptoms and prevented obesity in teenage girls with body image concerns (in two RCTs).
- *Dissonance* aimed to reduce eating disorder risk factors and bulimic symptoms in teenage girls with body image concerns, with mental health practitioners delivering three or four sessions on healthy body image, including critiques of unhealthy media messages. This program reduced eating disorder symptoms in teenage girls with body image concerns (in two RCTs), but findings were weaker than for *Healthy Weight*.
- *Student Bodies* aimed to reduce unhealthy eating attitudes and behaviours and to encourage healthy weight loss in overweight teenage boys and girls, using a self-directed online cognitive-behavioural therapy. The enhanced version of this program reduced binge-eating symptoms and lowered body mass index in overweight teenage boys and girls (in one of two RCTs).

Applying these findings in BC

Offering effective interventions could help prevent eating disorders in BC. *Healthy Weight* produced particularly compelling results that have been replicated. So this program merits consideration. While *Dissonance* also produced some positive findings, results were weaker than for *Healthy Weight*. *Student Bodies* and *Education Program* both showed benefits, but findings need to be replicated before widespread implementation is considered. 🙌