

Eating Disorders

Review 11

Pratt, B. M., & Woolfenden, S. R. (2002). Interventions for preventing eating disorders in children and adolescents. *Cochrane Database of Systematic Reviews 2*, CD002891. PubMed abstract available at <http://www.ncbi.nlm.nih.gov/pubmed/12076457>.

Objectives	Determine whether eating disorder prevention programs are effective for children and adolescents.
Studies Included	Twelve U.S. and international studies from 1991 to 2003
Participants in the Studies	Children and adolescents from general population samples and other specific (e.g., high-risk) population samples where there is no known DSM-IV diagnosis of an eating disorder
Settings	Some of the reported settings included schools, hospitals, and Girl Scouts programs.
Outcomes	Eating attitudes and behaviors, formal diagnosis of eating disorder, general psychological and physical well-being, body mass index or weight, and protective psychological factors
Limitations of the Studies	Lack of random allocation in one study, unclear allocation concealment, some treatment-as-usual participants were reassigned to intervention because of dropouts, participants were not blinded to condition, use of self-report assessments, dropout rates varied

Results

This review is based on 12 randomized controlled trials and 12 pooled comparisons of studies using similar eating disorder prevention interventions and common outcome measures. The audiences varied from elementary school students to high school students, male or female students combined, or females alone. The results do not allow any firm conclusions to be made about the effectiveness of eating disorder prevention programs in children and adolescents in the general population or in those determined to be at risk. Review results also indicate there is insufficient support for any specific type of intervention strategy in the prevention of eating disorders. Only one significant result emerged in this meta-analysis for programs based on media literacy and advocacy, indicating a small improvement in protective psychological factors (i.e., reduced internalization of societal ideals relating to appearance). Other intervention strategies in these trials were based on cognitive-behavioral models, psychoeducation, or an indirect causal model targeting self-esteem as a means to eating disorder prevention. There was insufficient evidence to suggest harm was caused by participation in any of these trials. This meta-analysis is being revised to account for the impact of cluster randomized trials.