



School-based Eating Disorder Prevention for Adolescents in Allegheny County: Stopping the Cycle of Food and Body Shame Before It Becomes a Disorder

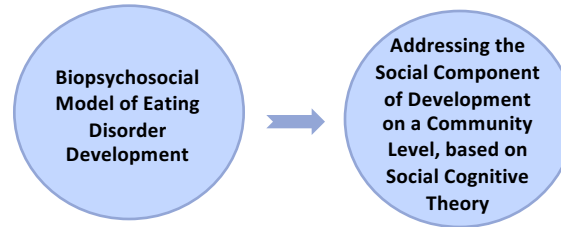


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BACKGROUND

- Eating disorders are the second most life-threatening mental illnesses, only second to opioid addiction. ¹
- According to the *Healthy Allegheny Teens Survey* of 2014, 41% of teens report trying to manipulate their body size through dieting and other methods. ²
 - Dieting has been found to be the number one predictor of developing an eating disorder. ³
- Higher risk of eating disorders are found to occur in specific populations:
 - 14% of children in Allegheny County are food insecure. ⁴
 - 38% of teens report being depressed within the last year. ²
 - At least 21% of adolescents within the United States are living in larger bodies frequently described using stigmatizing terminology such as “ov*rweight” or “ob*se.” ⁵
 - Over 5,000 adolescents openly identify as transgender within Pennsylvania. ⁶
- State-mandated health education on eating disorders is limited to one singular lesson, showing insufficient education around relationship with food, body, self, and well-being. ⁷
- Pre-existing literature on eating disorder prevention programs in the school setting have indicated that such programming is effective, even among varying gender identities and across diverse racial and ethnic identities. ^{8,9}

DESIGN AND THEORY



OBJECTIVES

Objective #1:

By the end of the program, *students* will be able to recognize and define contributing factors that lead to eating disorders including diet culture, weight stigma, society’s idealization of thinness, healthism & wellness culture, and media influences.

Objective #2:

By the end of the program, *school faculty and adolescent caregivers* will have more knowledge on how to create body inclusive, food positive environments for adolescents that prioritize both mental and physical well-being.

OUTCOMES

- **Intrapersonal:** Nurture a healthier relationship with food and body for students on an individual level.
- **Interpersonal:** Foster a more inclusive school environment that prioritizes mental well-being and discourages food hierarchies and weight-based discrimination between peers, in teacher-student relationships, in caregiver-adolescent relationships, and in health-focused curriculum.
- **Larger Community:** Encourage beliefs, thoughts, and behaviors around food and body to change at a community level in various age groups, which may lead to more sustainable change as the environment continues to shift and generations continue to be educated about these concepts.

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