

Theoretical Issues and Lessons Learned from Other Fields of Prevention

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**May 21, 2008, Hospital for Sick Children Conference:
Improving the Prevention of Eating-Related Disorders**

**ILLUSTRATED VERSION and OTHER
RECENT Levine POWERPOINTS
AVAILABLE FREE at**

<http://psychology.kenyon.edu/levine/>

Goals

- **Rationale for considering other fields**
- **Lessons from those fields**
- **Working principles of prevention**
- **Call to arms for universal and selective prevention - What are we waiting for?**

Rationale

- Co-morbidities
- **Parallels (alcohol & other substance abuse)**
- History and hard-won lessons



- **SAMHSA** (Substance Abuse & Mental Health Services Administration of the United States' Government) is pleased to announce the launch of the new **National Registry of Evidence-based Programs and Practices (NREPP)**

Web site at <http://nrepp.samhsa.gov>.

- **Model Programs**

- Effective Programs

- **Promising Programs**

Co-Morbidities: ED and Substance Abuse (for example)

- **Cigarette smoking**
 - **Price Foundation** (Multisite study in Europe, USA)
Azengruber et al. (2006) -
controls = ~30% RAN = 25.5%,
AN-BP = 40%, BN = 61%
 - **Project EAT** (MN/USA)
Neumark-Sztainer et al. (2006) -
% smoking cigarettes for
weight control = 12% in high
school and 15% for college age

Co-Morbidities: ED and Psychoactive Substance Abuse (for example)

- New Zealand
 - Jordan et al. (2008): NZ clinical sample, PSUD for
AN = 34%; BN = 49%
- USA National Comorbidity study (Hudson et al., 2007)

Lifetime Prevalence (~%)

| ED | PSUD | Mood Disorder |
|--------------|-------------|----------------------|
| AN | 27 | 42 |
| BN | 37 | 71 |
| BED | 23 | 46 |
| EDNOS | 36 | 28 |

Co-Morbidities: ED and Substance Abuse (for example)

- Personality **& disorder**
- Trauma
- **Pills, technology,**
and engineering are
“awesome, dude”

Parallels: Substance Use/Abuse and Disordered Eating

- **Demographics**
 - Pre-adolescent priming **and Adolescent onset**
 - **Gender**
 - **How are SES & ethnicity relevant?**
- **Sociocultural**
 - Mixed and supportive messages
 - Experimentation and adolescence
 - Peers and media
- **Familial**
 - **Family** history of substance abuse
 - **Family history of** mood & anxiety problems
 - **Trauma and** dysfunctional family systems
 - **Temperament** (e.g., impulsivity, negative affect)

Parallels: Substance Use/Abuse and Disordered Eating

- **Motivational**
 - **Transition-marking**
 - Social acceptance
 - **Anxiety and/or SS-seeking**
 - Social identity possibilities
- **Intrapersonal**
 - negative body image?
 - **social anxieties**
 - lack of social skills
 - **lack of interoceptive awareness and skill**
 - low self-esteem

“Risks Often Travel in Packs” (Biglan et al., 2000, p. 62)

Hard-won Gains and Lessons from the Prevention of Substance Abuse and Other Problems

- **Beware the “justs”** - Be careful about oversimplification
- **“Lot of things are risky if done poorly”** - Value of education & dangers of relying solely on it (Hansen, 1992)
- **“Prevention is not a luxury”** - It is a necessity and it can work, i.e., it is possible (Tobler et al., 2000)
- **“It takes more than a village, but that’s a start”** - An ecological perspective is at the heart of our work
- **Key components** and reciprocal determinism
- **Methodology is critical** as an aspect of research, advocacy, and, ultimately, theory (Biglan et al., 2000)

The Ecological Perspective Reminds Us: Prevention is Primary

Cowen (1973, 1983) -- broad but distinct concept:

1. targets a **group**, not individuals
2. targets **those who are well**, although they may be **at risk** by virtue of life circumstances
3. has a more **impersonal** focus on changing groups, institutions, and communities
4. “intentional” intervention that **applies knowledge** to strengthening psychological health and forestalling maladjustment.

We can learn a lot from the prevention of cigarette smoking and other substance use/abuse

(Biglan et al., 2000; Cuijpers, 2002; Levine & Smolak, 2006)

- **Interactive engagement with “students”**
- **Normative expectations**
- **Social influence: Critical thinking & resistance training**
- **Life Skills (“multifaceted competence enhancement”)**
- **Peer involvement**
- **School policies + curricula**
- **Community programming**
- **Supporting families**

We can learn a lot from the prevention of cigarette smoking and other substance use/abuse

(Biglan et al., 2000; Stith et al., 2006; Winters et al., 2007)

- **Expending meaningful amounts of resources in engaging the target populations**
- **Broad-based involvement in “bottom-up and consensus-oriented” decision-making**

- **Community readiness**
- **Collaboration and coalition-building**
- **Planning for FES: fidelity, evaluation, and sustainability (staffing, fund-raising, relationship-building)**

Challenge and Hope of Prevention

**Piran, 1999:
Elite Ballet
Company**

**Austin et al., 2005:
Mixed Audience of Middle
School Boys and Girls**

**Neumark-Sztainer et al. (2000):
Girl Scouts ages 10-11 and
Troop Leaders**

**Note that in all three instances the
populations with which we were
successful would be considered
“almost impossible to work with”**

Goldberg et al. (2000) – The Adolescents Training & Learning to Avoid Steroids (ATLAS) Program

Education, media literacy, media advocacy, refusal skills, nutrition & strength training

HS football players (vs. controls) – 1 year FU

- greater knowledge (exercise, AS)**
- less investment in images of use**
- less intent to use**
- less new use**
- saw coaches as less tolerant**

ATHENA for girls

<http://www.ohsu.edu/hpsm/atlas.html>

Implications of a Sociocultural Perspective: Critical Reflection & Life-Long **Literacy**

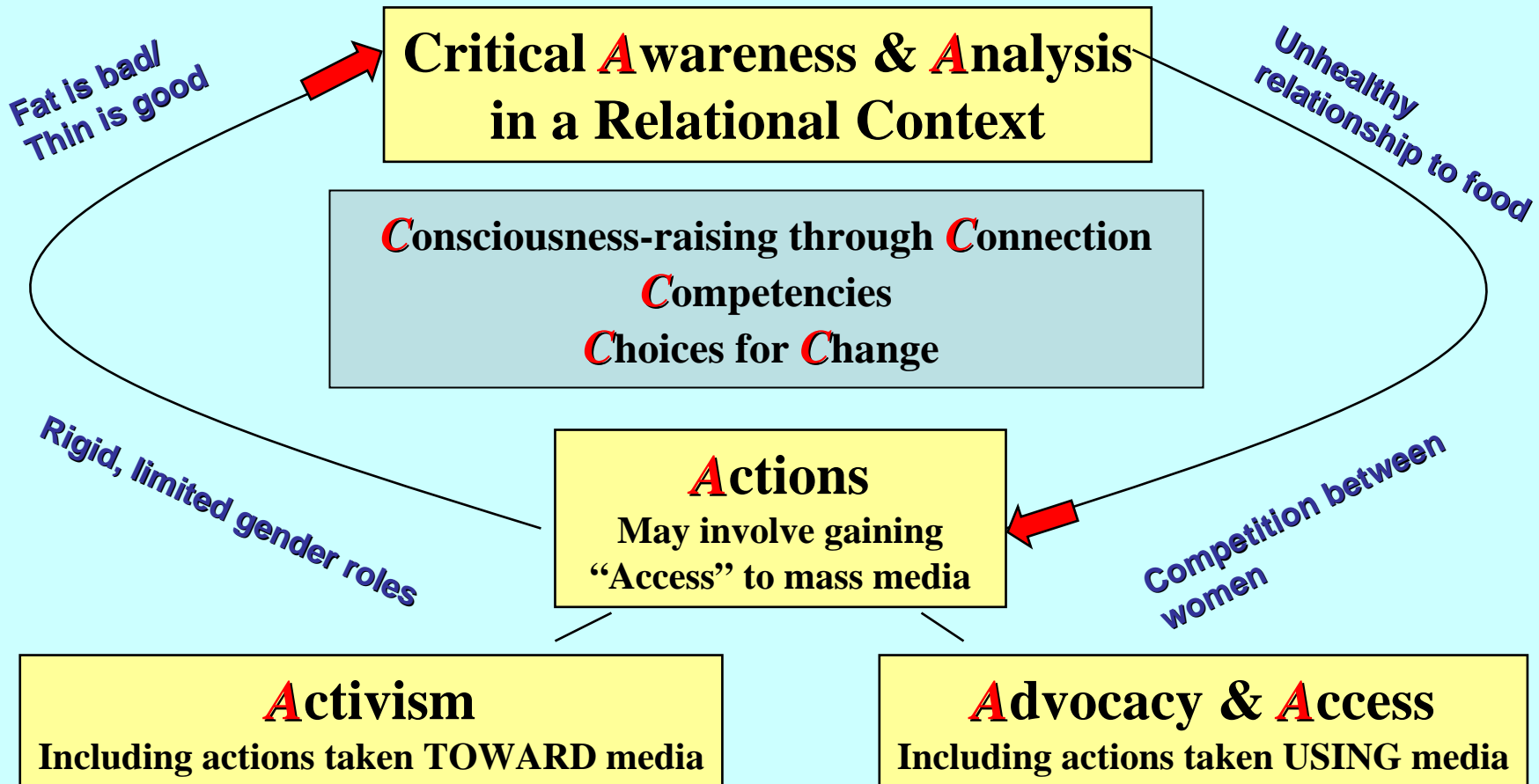
“A democratic civilization will save itself only if it makes the language of the image into a stimulus for critical reflection--not an invitation for hypnosis”

-- Umberto Eco

Quotation appropriated from
Media Education Foundation

Media Literacy and the 5 A's: The Cycle -- from GO GIRLS!™ [www.nationaleatingdisorders.org]

...Embedded in a Sociocultural Context...



Levine's Working Principles of Prevention

1. The issue for prevention is us and our cultures, not “them” and “their eating disorders” or “their obesity.” Thus we must think contextually and in terms of how each member of the community can contribute
2. Prevention will fail – and may well be harmful – if it concentrates solely on the definition of clinical syndromes, the portrayal of fascinating “cases,” and the dangers of disordered eating.

Levine's Working Principles of Prevention

3. **Education is a foundation, not a looming danger**
4. **Prevention in the context of education, public health, and community engagement requires an ecological approach**
5. **Prevention in the context of education requires a truly collaborative approach**

Levine's Working Principles of Prevention

6. An Ecological Perspective means that we can **learn a great deal from the prevention of cigarette smoking**, other substance use/abuse, depression, and so forth.
7. Prevention via education **means** confronting and challenging pervasive ecological messages: **Gender, Class, "Race", & Power**
8. Culture change requires a critical/analytic perspective, attention to social justice, and activism--and thus it requires dialogue, collaboration, and courage.

Levine's Working Principles of Prevention

9. **Prevention will flourish where the teachers, students, and staff are engaged at different levels in the 5 C's:**
 - **Consciousness-raising**
 - **Connections**
 - **Competencies**
 - **Change**
 - **choice**

10. **Prevention of negative body image & disordered eating needs to be integrated with prevention of obesity & substance abuse – and with an emphasis on health.**

11. **Prevention requires a Bolder Model of educator engagement and participation: The Personal, Professional, and Political**

Principle 11: A Bolder Model of Prevention

(Irving, 1999; Levine, Piran, & Stoddard, 1999; Levine & Smolak, 2006; Maine, 2000; Piran, 2001; Sigall & Pabst, 2005)

Cultural Literacy

Awareness

Analysis

Activism and
Advocacy

Access (e.g., to
media)

Professional

Professional

Political

“You must be the change

You wish to see

in the world”

- Ghandi

5 Components of Effective Prevention

Collaboration

Consciousness-Raising

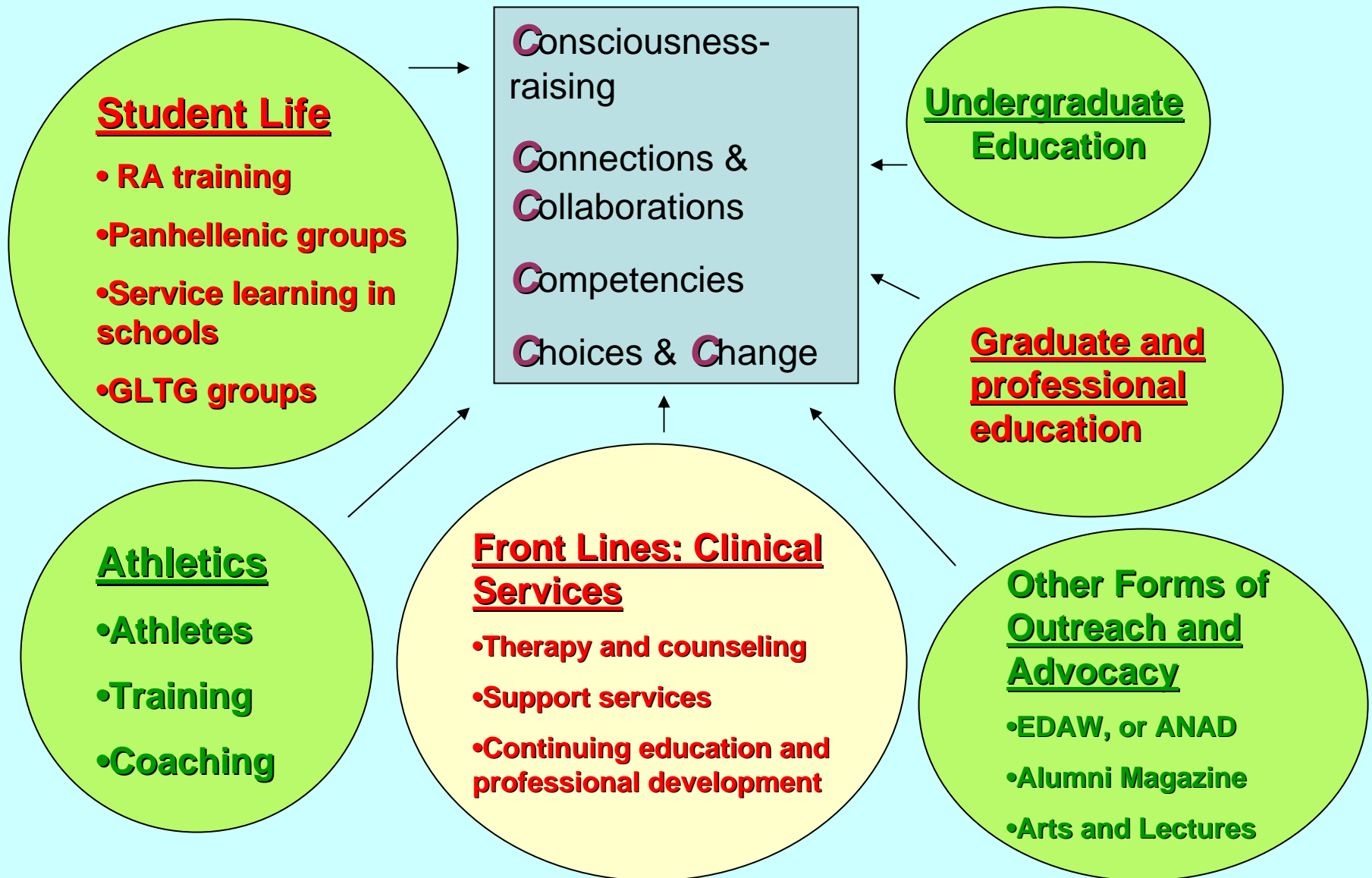
Competencies

Choices and **C**hanges

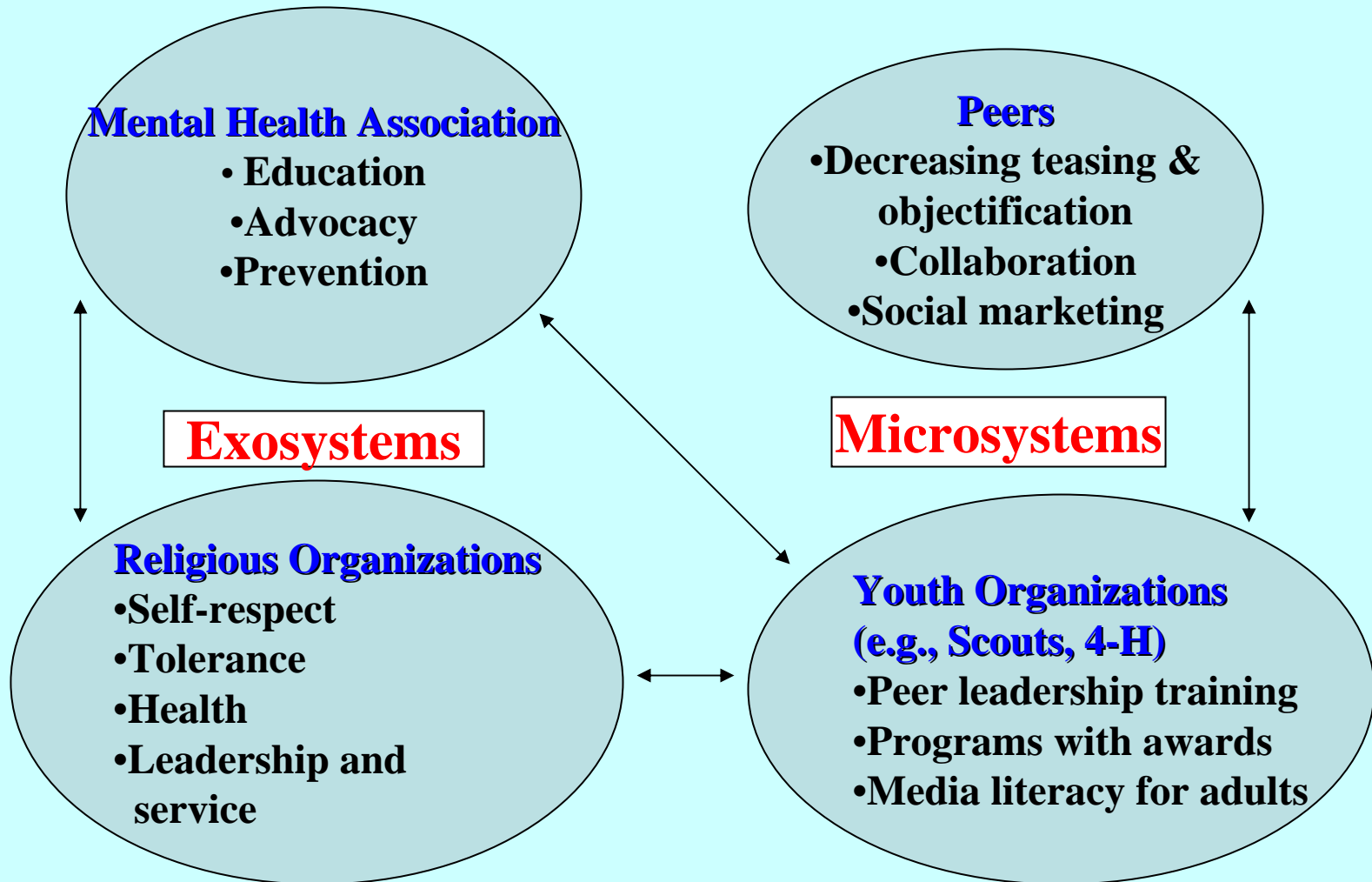
[adapted from gender literacy
work of Sigall & Pabst]

**Some Things are Like Prevention:
Hard to Understand How it Could Happen,
But It Needs to be Done**

Implications of a Focus on Nervosa for College Campuses



It's Time to Dream: Envisioning An Example of Ecological Change



It's Time, No? Time to Get it Together

“At the age of six I wanted to be a cook. At seven I wanted to be Napoleon. And my ambition has been growing steadily ever since.”

— Salvador Dali