

## Measured Outcomes for The *Healthy Body Image* (first and second editions) Curriculum

Three published studies have reported the results of the first and second editions of the *Healthy Body Image* curriculum in fourth- through sixth-grade classrooms. Abstracts are included here. Copies of the full articles are available. Please use the contact form at [www.bodyimagehealth.org](http://www.bodyimagehealth.org) to request these.

1. Kater, K., Rohwer, J., & Levine, M. P. (1998). An elementary school project for developing healthy body image and reducing risk factors for unhealthy and disordered eating. *Eating Disorders: Journal of Treatment and Prevention*; Vol 8, No. 1.

ABSTRACT: Negative body image and disordered eating patterns are prevalent among American adolescents, especially girls. Because attitudes are extremely difficult to change once they are established, researchers have proposed that prevention programs that aim to challenge prevalent cultural norms contributing to these problems be developed for older elementary-age children whose body image attitudes are not yet intractable. This article describes the short-term outcomes of a new school-based curriculum model for developing healthy body images and preventing disordered eating with 222 fourth and sixth grade boys and girls. Preliminary results indicate the curriculum positively influenced knowledge, attitudes, and intentions related to body image, the limits to control of body size and shape, the hazards of weight-loss dieting, and unrealistic media images. While existing prevention curricula aimed at adolescents has had little positive impact, the promising effect of this model appears related to 1) the targeted age-range, 2) the experiential pedagogy, 3) the emphasis on identity development from diverse sources that reflect competency and interests rather than image, and 4) critical thinking regarding the clash between cultural values and human biology. "Booster" lessons to reinforce these primary prevention concepts should follow as children progress through the transitional middle school years.

2. Kater, K., Rohwer, J. & Londre, K. (2002). Evaluation of an upper elementary school program to prevent body image, eating and weight concerns. *Journal of School Health*, Vol. 72 (5), pp. 199-204.

ABSTRACT: Preparing young students to resist the socio-cultural pressures that contribute to body image and eating problems in American culture poses a monumental challenge. This project determined whether the 11-lesson *Healthy Body Image: Teaching Kids to Eat and Love Their Bodies Too!* curriculum would have a positive effect when presented to upper elementary-age children. A controlled study with 415 test students measured changes from pre-test to post-test related to: 1) body image, 2) knowledge about the biology of size, shape, and restricted hunger, or dieting, 3) body-size prejudice, 4) media images, 5) self-image; and 6) lifestyle behaviors. Boys and girls who completed the curriculum showed significant or notable improvement compared to a control group not exposed to the curriculum. Results suggest it is possible to provide children with a knowledge base to use as they face increasing pressures about appearance, weight, and eating in the critical middle school years.

3. Niide, T., Davis, J., Tse, A., Harrigan, C. (2013) Evaluating the Impact of a School-based Prevention Program on Self-esteem, Body Image, and Risky Dieting Attitudes and Behaviors Among Kauai Youth. *Hawaii Journal of Medicine & Public Health*, Vol 72, No 8.

ABSTRACT: Eating disorders and obesity (EDO) are increasing among youth, having serious long-term physical and psychological consequences. The purpose of this study was to determine if significant differences exist in EDO risk factors following participation of 4-6<sup>th</sup> grade students in a school-based EDO prevention curriculum. This community-based research project assessed students at baseline and one week following EDO intervention. Primary outcome variables measured self-esteem, body dissatisfaction, and high risk eating attitudes and behaviors. Pre and post-test differences

were calculated using mixed models, correcting for clustering within schools and teachers. This study found mean changes in all scores in healthy directions, as well as movement of students into lower risk groups post-intervention. This program demonstrated that a classroom curriculum is associated with decreased risks of EDO in boys and girls, supporting prevention programs at an early age for both sexes. Studies to determine long term benefit and guide booster interventions are warranted.

