Upcoming Eating Disorders Prevention Symposium

Reimagining the Frontier of Public Health Approaches to Eating Disorders Prevention: Transdisciplinary, Translational, Transformative

April 30, 2018, 7:30am-5:30pm
Joseph B. Martin Conference Center
Harvard Medical School
77 Avenue Louis Pasteur, Boston
Register

This symposium, convened by the Strategic Training Initiative for the Prevention of Eating Disorders (STRIPED), in collaboration with Harvard Catalyst Health Disparities Research Program and the Harvard Catalyst Child Health Program, will bring together researchers from a range of disciplines along with clinicians, educators, community advocates, policymakers, and thought leaders from both government and corporate sectors to discuss macro-environmental approaches to effectively address eating disorders prevention. The goal of this symposium is to enhance the dissemination of new information, foster new collaborations, and spark the development of innovative, evidence-based preventive interventions and policies to reduce the devastating individual, social and economic costs caused by these disorders.

Approximately 30 million Americans will be diagnosed with an eating disorder in their lifetime and millions more will experience related subclinical conditions associated with increased morbidity and mortality. Furthermore, eating disorders have among the highest mortality rate of any psychiatric disorder in the United States. Given the prevalence, disparities, and severity of eating disorders and their subclinical variants, there is a compelling need for public health approaches to primary and secondary prevention of these conditions.

Eating disorders and the broader constellation of disordered eating and weight and shape control behaviors and symptoms represent major threats to health and quality of life and present substantial burdens on individuals, families, healthcare systems, and society. They affect people of all genders, race/ethnicities, weight statuses, socioeconomic positions, ages, sexual orientations, and geosocial locations. Persistent disparities have been observed in which members of marginalized communities may be more often affected by these conditions, and yet profound disparities have also been observed in diagnosis and access to treatment in which these same communities may be least likely to benefit from early detection and appropriate treatment.

While decades of eating disorders preventive intervention research have been conducted, there are major gaps in the field in a range of domains that could benefit from rigorous attention by scientists working in transdisciplinary and multisectoral teams. One, the vast majority of research on eating disorders preventive interventions to date has been concentrated in the efficacy stage, with few studies moving to the effectiveness stage, and fewer still focused on the dissemination/sustainability stages of intervention research. Two, few studies have examined macro-environmental factors – including policy, built environment, industry and commercial markets, or other aspects of the macro-environment (mass/social media is one exception, having received modest research attention) -- that may influence eating disorders risk or be leverage points for eating disorders prevention. Three, few studies have focused on T3 (i.e., from clinical guidelines to routine practice in clinical and community settings) and T4 (i.e., large-scale public health impact through preventive health services, multisectoral systems research, policy initiatives and evaluation) domains of the research translation schema. Four, there is a dearth of economic and decision sciences research into the costs of eating disorders and their subclinical variants and the potential savings that primary and secondary prevention of eating disorders might offer. As we chart a course to address these gaps in the research literature, we will be called to critically examine the impact of intersectionality and consider how experiences of communities with multiple stigmatized identities or marginalized geosocial locations can inform eating disorders prevention research aims, study design, and data interpretation.