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1 Abstract

2 The field of prevention of body image problems and eating disorders has made major  
3 advances in recent years, particularly in the development and evaluation of prevention  
4 programmes. However, few programmes achieve good long-term results because,  
5 among other reasons, the sociocultural influences affecting the development of these  
6 problems do not stop. Moreover, accelerating progress in this field is required,  
7 transferring their impact onto a larger scale. These reasons justify the need to progress  
8 in the development of public policy interventions. This paper describes a recent Catalan  
9 initiative in this sphere: the Roundtable on the Prevention of Eating Disorders, made up  
10 of different public and private sectors of Catalan society. It specifically details the main  
11 actions carried out, such as: media campaigns to reduce weight-related teasing and  
12 encouraging self-esteem, encouraging family meals and promoting help-seeking among  
13 those affected; the creation of a new informative website about these matters in the  
14 Department of Health; the production of a Decalogue of best practices for the promotion  
15 of self-esteem and positive body image in social media and advertising; and actions to  
16 prevent the promotion of eating disorders on the Internet. The Roundtable is the most  
17 comprehensive Catalan (and Spanish) public policy activity undertaken until now for  
18 the prevention of eating disorders.

19 *1. Introduction*

20 The problem of body image and eating disorders is a major concern of public health.  
21 Their high prevalence and tendency towards chronicity, high comorbidity with other  
22 disorders, their association with serious physical and psychological consequences, as  
23 well as their resistance to available treatments, are important reasons to justify an  
24 increase in public, social and health care aimed at their prevention (Stice, Becker, &  
25 Yokum, 2013).

26 Interest in the prevention of these problems has increased in recent years, especially  
27 by educators, professionals and researchers, and major advances have been made in this  
28 field (Ciao, Loth, & Neumark-Sztainer, 2014; Yager, Diedrichs, Ricciardelli, &  
29 Halliwell, 2013; Stice et al., 2013). Some preventive programmes for these problems  
30 have shown their efficacy when they have been developed and administered with the  
31 Catalan population (López-Guimerà, Sánchez-Carracedo, Fauquet, Portell, & Raich,  
32 2011; Sánchez-Carracedo et al., 2016).

33 However, there are still major limitations. Few programmes achieve maintenance  
34 long-term changes because, among other reasons, the sociocultural influences affecting  
35 the development of these problems do not stop (López-Guimerà, Sánchez-Carracedo, &  
36 Fauquet, 2011). The programmes are focussed on providing the resources and  
37 empowering the participants so that they are less vulnerable to sociocultural pressures,  
38 but these pressures are unceasing and may to a large extent cancel out the effects of the  
39 interventions. Furthermore, these actions have a local impact, and it is necessary to  
40 accelerate the progress in this field, transferring their impact onto a larger scale (Austin,  
41 2015).

42 Therefore another complementary preventive pathway is required that consists of  
43 developing public policy actions. Until now a small series of actions have been carried

44 out internationally and in Spain including changes in legislation, the use of codes of  
45 behaviour and self-regulation by industries, social marketing, and governmental support  
46 to undertake prevention in schools (Paxton, 2012; Sánchez-Carracedo, Neumark-  
47 Sztainer, & López-Guimerà, 2012).

48 Catalonia has shown great sensitivity towards this problem. It is one of the  
49 autonomous regions with most specialised treatment units for eating disorders (12)  
50 within the Spanish public health system. It was here in 1992, that the first association  
51 for families affected by eating disorders was founded, the Association Against Anorexia  
52 and Bulimia (ACAB). This association was the promoter of the current *Spanish*  
53 *Federation of Support and Fight against Anorexia Nervosa and Bulimia Nervosa*  
54 (FEACAB for its acronym in Spanish). The Department of Health of the Generalitat de  
55 Catalunya (autonomous government) together with the Spanish *Ministry of Health and*  
56 *Consumer Affairs* promoted the development of the Clinical Practice Guideline for  
57 Eating Disorders (Working Group of the Clinical Practice Guideline for Eating  
58 Disorders, 2009).

59 In relation to public health policy, in May 2012 the *Roundtable on the Prevention of*  
60 *Eating Disorders* (herein the *Roundtable*) was founded, boosted by the ACAB and the  
61 Catalan Consumer Agency (ACC) to watch over and intervene in those social and  
62 consumerism factors that have a bearing on the proliferation of these problems  
63 (Generalitat de Catalunya, 2012). This article details the constitution of the Roundtable,  
64 its members, functioning and the main actions carried out.

65

## 66 2. *Material and Methods*

### 67 2.1. *Origins and Objectives*

68           The Roundtable was founded at the request of the ACAB to the ACC. As the  
69 main aim of the ACC is to defend consumers and the first rights people have are those  
70 of health and safety, the ACC responded positively to this request, promoting and  
71 coordinating the creation of the Roundtable since May 2012. The Roundtable has three  
72 goals: (1) Build in all sectors a positive and healthy body image by promoting a body  
73 ideal based on health and wellbeing, and not on appearance. (2) Coordinated work  
74 between the different sectors (health, education, business, media) to design realistic  
75 strategies for the prevention of these illnesses; and (3) Transfer the debate to society at  
76 large in order to raise awareness about the importance and seriousness of the problem of  
77 eating disorders and weight-related disorders in general.

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## 79 2.2. Participants (members)

80           The Roundtable is chaired by the wife of the current President of the Generalitat,  
81 Helena Rakosnik, and coordinated by the current director of the ACC, Alfons Conesa.  
82 At present it has representatives from a total of 21 different institutions, including  
83 different departments of the Generalitat de Catalunya, Barcelona City Council, the  
84 business sector, sport, media, private foundations that promote health and from the  
85 scientific and academic world.

86           These institutions are (Spanish and Catalan original acronyms) : Generalitat de  
87 Catalunya, Association against Anorexia and Bulimia (ACAB), Audiovisual Council of  
88 Catalonia (CAC), Barcelona City Council, Blanquerna-Ramon Llull University, Catalan  
89 Association of Dietitians-Nutritionists (ACDN), Catalan Sports Council  
90 (ESPORTCAT), Catalan Women's Institute, Centre of Prevention and Treatment of  
91 Anorexia and Bulimia (Centro ABB), Confederation of the Textile Industry (TEXFOR),  
92 Information Security Center of Catalonia (CESICAT), FC Barcelona Foundation,

93 Foundation-Institute of Eating Disorders (FITA), Hospital Clinic of Barcelona, Hospital  
94 de la Santa Creu i Sant Pau of Barcelona, Image and Self-esteem Foundation (IMA),  
95 Mango, Sant Joan de Déu-Barcelona Children's Hospital, Specialised Service in Eating  
96 Disorders (SETCA), Televisió de Catalunya (TV3), and Universitat Autònoma de  
97 Barcelona (UAB).

98

### 99 *2.3. Procedure (organisation and functioning)*

100 In order to achieve the goals of the Roundtable, four working commissions were set  
101 up specialising in four different spheres: (1) Body image and fashion; (2) Protection of  
102 childhood and security on the Internet; (3) Healthy eating and habits; and (4)  
103 Sociocultural and media factors. These commissions meet at least once a year.  
104 Approximately every year a plenary session open to the media is held, where the work  
105 undertaken during the year and the next year's goals are presented. Moreover, there is  
106 an executive committee made up of different members of the Roundtable that sets the  
107 goals for each year in accordance with the road map and approves the different lines of  
108 work. Finally, any member of the Roundtable may be invited, for their expertise, to  
109 form part of the thematic working groups to develop specific projects.

110

### 111 *3. Results (main actions undertaken)*

112 The description, press releases and material of the actions undertaken by the  
113 Roundtable can be found on its webpage (Generalitat de Catalunya, 2012). Table 1  
114 shows a chronology of the main actions undertaken. At the end of 2012 the first plenary  
115 meeting of the Roundtable took place. Introductory reports about eating disorders and  
116 its prevention and the road map with the actions to be realised in the coming years were  
117 presented.

118 In June 2013, the Generalitat de Catalunya, through the Attention to Public and  
119 Diffusion Office, along with the Roundtable, undertook a communication campaign to  
120 influence in promoting healthy habits and self-esteem of children and adolescents.  
121 Under the slogan of “Our children’s health depends on us”, the campaign revolved  
122 around two informative capsules with a format for radio and TV, and a graphic  
123 advertisement for dissemination in the printed media. The campaign focused on  
124 avoiding negative comments about the body among adolescents and on promoting  
125 messages of acceptance about body diversity and self-esteem, and on the  
126 recommendation of having at least one family meal per day to reduce the risk of the  
127 development of an eating disorder.  
128 Together with the Department of Health, at the end of 2013 a new web portal of an  
129 informative nature about eating disorders was set up to raise awareness amongst the  
130 public of the importance of encouraging healthy eating habits and promoting the  
131 acceptance of body image in children and adolescents.

132 Then in 2014, it organised the “Anorexia and Advertising” roundtable. This  
133 roundtable addressed the advertising sector to make it aware of the negative impact that  
134 promoting certain types of bodies and ideals of beauty can have. The goal of the  
135 roundtable was to debate the importance of ensuring the presence of more realistic  
136 models and promote health and body diversity in the media and advertising.

137 This roundtable led to an intensive and in-depth dialogue between the health,  
138 advertising and social sectors involved, which culminated at the end on 2014 in the  
139 presentation of the “Decalogue of Best Practices for the promotion of self-esteem and  
140 positive body image in social media and advertising” (Roundtable of Prevention of  
141 Eating Disorders & Generalitat de Catalunya, 2014). The Decalogue was originally  
142 published in 2010 by the Image and Self-esteem Foundation with the support of the

143 *Television Academy*, and with the added support in 2012 of the Association of Catalan  
144 Journalists. From the joint work promoted by the Roundtable, the Decalogue has been  
145 revised, updated and improved, and its major achievement is the subscription of the  
146 advertising sector. Table 2 shows a synthesis of the ten points that promote greater  
147 respect for body diversity and a more positive body image in the media and advertising.  
148 Work is under way in order to present the Decalogue in the Faculty of Information  
149 Sciences to evaluate its introduction into the academic curriculum of future  
150 professionals.

151         The Decalogue was presented jointly with the “Anorexia is no-one’s fault”  
152 campaign. Eating disorders are multi-causal disorders, and this campaign aims to  
153 remove self-blame from the person who suffers from an eating disorder and their  
154 family, contributing to a greater social understanding of these illnesses and making it  
155 possible for the affected person to ask for help.

156         This campaign has been produced by the advertisers’ guild through FUNDECO  
157 (Foundation of Communication) and the aim is to dismantle two of the main myths  
158 regarding these disorders: that they never be overcome and that the person who suffers  
159 from it must have done something wrong to end up becoming ill. The campaign  
160 comprises an advertising spot and graphic material. It is interesting to point out that the  
161 number of consultations to the ACAB by families of sufferers increased by 25% in the 2  
162 months that the campaign was been up and running.

163         In 2015 the Roundtable focussed its activities, apart from those that each of the  
164 commissions undertook, on avoiding the promotion of eating disorders via the Internet.  
165 A specific working group has been set up for this project made up of members of the  
166 Roundtable and experts invited for their know-how in the question who belong to  
167 institutions such as the Information Security Center of Catalonia, the Department of

168 Justice, the Barcelona Bar Association or the Catalan Autonomous Police. With the  
169 slogan of “Pro-anorexia and Pro-bulimia websites: 0 tolerance”, the working priorities  
170 are: (1) To produce a study about Internet habits of patients with eating disorders related  
171 to their disorder and the association between the browsing habits and clinical variables  
172 of the disorder; (2) To organise a conference on the issue with the Internet business  
173 sector, legal experts and experts in eating disorders; (3) To publicise the current legal  
174 implications in the framework of offences for injury and promote a clearer legislative  
175 framework that persecutes and penalises the support for eating disorders on the Internet;  
176 and (4) To produce a document with guidelines and tools (specific lines of support and  
177 consultancy, APPS for complaints, blacklists, for example) for safe browsing in relation  
178 to eating disorders, aimed at families and educators.

179

#### 180 *4. Conclusions*

181 The Roundtable has become established as the most relevant Catalan (and in the  
182 Spanish state) public policy carried out until now for the prevention of eating disorders.  
183 Diverse actions have been undertaken until now, and there are still many to develop in  
184 the coming years. Notwithstanding, we still need to design indicators that enable us to  
185 evaluate the impact of these measures. We hope to achieve increasingly more  
186 involvement from different sectors in the development of public health policies in the  
187 prevention of these problems. These types of policies, even though very rare and with  
188 little research into their effects, should be a political and health priority if we want the  
189 prevention of these problems to be really efficient.

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238 Table 1. Chronology of the main actions undertaken by the Roundtable

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May 2012	Formation of the Roundtable
December 2012	1 <sup>st</sup> plenary session
June 2013	Double campaign: (1) Self-esteem; (2) Family meals
December 2013	New ED web portal of the Department of Health
June 2014	“Anorexia and Advertising” Roundtable
December 2014	Presentation of the “Decalogue of Best Practices for the promotion of self-esteem and positive body image in social media and advertising”
December 2014	“Anorexia is no-one’s fault” campaign
January 2015	2 <sup>nd</sup> plenary session
In progress 2015	Prevention of the promotion of eating disorders on the Internet

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241 Table 2. Decalogue of Best Practices for the Promotion of Self-Esteem and Positive  
242 Body Image in Social Media and Advertising

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1. **Promote** a variety of realistic and healthy body images.
  2. **Encourage** and respect the reality and richness of body diversity.
  3. **Avoid** the promotion of high-risk behaviours and unhealthy diets.
  4. **Disseminate** information on healthy lifestyles and eating habits and prevent the spread of false beliefs.
  5. **Strengthen** the self-esteem of people irrespective of their physical appearance.
  6. **Reject** unrealistic aesthetic ideals that jeopardise the health of individuals.
  7. **Protect** children, during children’s programming hours, from messages that run contrary to healthy lifestyles.
  8. **Carefully monitor** the health of the teenage population, as they are the demographic group most predisposed to feel dissatisfied with their bodies.
  9. **Combat** the high volume of messages targeted at women that cause body dissatisfaction.
  10. **Ensure** that media portrayals of eating disorders reflect sensitivity and are well-founded.
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244

245 **Highlights**

- 246 1. The Roundtable has become the most relevant Spanish public policy for the  
247 prevention of ED.
- 248 2. The Roundtable involves a broad range of public and private sectors from Catalan  
249 society.
- 250 3. The Decalogue of Best Practices has been assumed by the advertising sector and the  
251 media.

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