

ECONOMIC ASPECTS OF EATING DISORDER PREVENTION USING THE EXAMPLE OF THE CZECH REPUBLIC

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Abstract

The article, prepared using an interdisciplinary approach of interested social science disciplines, points out the current issue of economic aspects of preventive programs for eating disorders in the Czech Republic, where the mentioned issue represents a serious burden for the health system (annual treatment costs exceed approximately 1 billion CZK). It proves that preventive programs focused on early identification of risk groups can reduce the incidence of the disease by up to 30% and save 25–40% of expenses in the long term compared to expensive tertiary care. The key recommendation is the integration of preventive measures into school and primary health services, cooperation with non-profit organizations and systemic support from public institutions. Pilot projects in the Czech Republic have shown that these strategies can free up to 2 billion CZK for reinvestment in community care by 2030. The aforementioned prevention is not only an ethical obligation, but also an economically effective solution to maintain the stability of the health system. Its conclusions are a call for action: reallocating resources towards prevention is essential to reduce the human and financial impact of these diseases.

Key words: eating disorders prevention, cost-effectiveness analysis, public health policy

JEL Code: I18, O11, O12

Introduction

Since the last third of the 20th century, the orientation towards the all-round development of man, his interests and goals has been accelerating in developed market economies. An appropriate reflection of this is the quantitative and qualitative level of human capital, whose significant organic component from an economic point of view is the provision of healthy nutrition for the population as an integral part of its health literacy, which thus represents one of the key determinants of ensuring stable economic growth. This is evidenced in particular

by the theory of endogenous growth, the starting point of which is an empirical analysis based on the correlation of investments in human resources and economic growth. Healthy nutrition, as one of the most important prerequisites for a satisfied, peaceful and fulfilled life of every individual and his social environment, concerns all age groups of the population. Therefore, it is the goal of important areas of interest of modern social policy (Donéeová et al., 2024). It also calls for the implementation of the principles of social responsibility of all interested parties while respecting the principles of subsidiarity and participation. As a result of this policy, a comprehensive view of creating a quality infrastructure for human life for all population groups is significantly accelerated (Nezhnikova, 2020).

In essence, it is an overall good feeling of life that a person experiences in a three-dimensional dimension - physical, mental and social. For this reason, healthy nutrition is a necessary and integral part of the educational process. Therefore, its provision within the framework of lifelong health care can be characterized in connection with the health system, within which one of the significant, albeit relatively new concepts is also health literacy. It allows people to obtain, evaluate and use information so that they can positively influence their health destiny. Therefore, ensuring healthy nutrition can be considered an integral part of social literacy, which is also the subject of interest of the human capital theory. The importance of the aforementioned literacy thus demands respect for the interdisciplinary approach of the social sciences, in particular - economics, public economics, economic, social and regional policy theory, pedagogy and andragogy.

1 Processing methods and starting data

The functioning existence of an economic system in national and regional dimensions is associated with institutions that form a prerequisite for ensuring stable economic growth, an important determinant of which is the social and health system (Šetek et al., 2019). It is based on the intentions of social policy, as an integral part of public and regional economic policy. Appropriate programs to support the development of healthy nutrition of the population are also developed from its level. The participating entities in the creation of the aforementioned programs are also social institutions and communities. Therefore, within the framework of public policy, there is a phenomenon that is mutually interconnected and dependent.

For the above reasons, analytical and comparative methods prevail in the processing. These are applied to the development of the phenomenon of healthy nutrition with regard to the importance of applying the principle of subsidiarity (with regard to the policy of

settlements, cities and regions). At the same time, the reality of the development of health literacy is compared with theoretical concepts of human capital.

The research is based on data that presents the information below (Institute of Health Information and Statistics of the Czech Republic; 2023):

- Eating disorders represent a serious burden on the health system in the Czech Republic, with annual treatment costs (since the beginning of the 21st century) exceeding CZK 1 billion.
- Professional research shows that preventive programs focused on early identification of risk groups can reduce the incidence of the disease by up to 30% and save 25–40% of expenses in the long term compared to expensive tertiary care.
- The project “Prevention of eating disorders in schools” reduced risky behavior in adolescents by 18% over five years, while the Australian program “Butterfly Foundation” shortened the average time to diagnosis from 7 years to 3 years.
- Data show that every crown invested in primary prevention brings a social return of up to CZK 4.5 thanks to reduced hospitalizations and increased productivity of those affected.
- Key recommendations include integrating preventive measures into school and primary health services, collaborating with non-profit organizations, and providing systemic support from public institutions. Pilot projects in the Czech Republic have shown that these strategies can free up to CZK 2 billion for reinvestment in community care by 2030.

2 Results

2.1 Initial philosophy of the issue

According to the current concept of the World Health Organization definition, human health is understood as a balanced state of physical, mental and social well-being. It is created and influenced by many factors and is a prerequisite for an active and satisfied life, for appropriate work performance. This is a prerequisite for ensuring appropriate stable economic growth. Therefore, health education, an integral part of which is the provision of healthy nutrition, is one of the priorities of educational programs, the level of which depends on the public sphere policy at the national and regional levels.

The health status of the population thus represents a value without the nature of a material good and is tied to a specific individual and usually does not have the nature of a

commodity, therefore it cannot be fully exchanged on the market. There are two definitions of health: negative and positive. The negative definition perceives health as a statically assessed state of the organism without disease, while the positive definition looks for favorable signs of health. In the positive definition, a further distinction is made between a static (older concept) and a dynamic concept of health (newer concept). The older concept defines the concept of health as a state of complete physical, mental and social satisfaction without the presence of disease or the occurrence of suffocation or physical defect, disorder. The newer concept views health as a dynamic "life process" that is constantly changing and is influenced by a number of factors, such as elements of the natural and social environment.

For the above reasons, health cannot be viewed as a purely economic good, but as a value with an individual and social side. As an individual, it means that each person decides about their health for themselves, many people become aware of its value only when they are sick. Therefore, education that strengthens the dignity and independence of people is important for understanding the value of health. The activity of individuals is important, but their efforts are not enough for some more serious problems. The social side of the value of health characterizes it as a source for the economic and social development of society, it is the result of many relationships that make a person part of a wider human community. Therefore, health care also belongs to society. The main motive for social structures should be for people to be more interested in health and to act as an example to as many people as possible on how to find their way to health. "Health care is therefore not a social obligation, but a personal interest" (Hensher et al., 2020). The value of health, both from an individual and societal perspective, is constantly changing over time, is difficult to measure and contains a number of cultural, political, social, economic and ethical elements. Health is generally considered a positive externality and a necessary condition for the existence of humanity.

A threat to the health and life of an individual poses a risk not only to the individual and their immediate social environment (such as family), but also to the entire society. Therefore, illness and possible subsequent disability as a result of an unhealthy lifestyle without respecting the principles of healthy nutrition represent pathological social events according to social policy theories. From an economic perspective, they mean the loss of a higher family status as a result of lower financial income. For the economy, they mean a temporary or permanent reduction in human potential for the creation of national wealth and, subsequently, as a result of the payment of transfers in the form of social benefits (sickness, disability pensions), they represent a burden on public resources (Volek & Novotná, 2019).

All risks that threaten a favorable state of health can never be fully eliminated. Their appropriate reduction can be implemented with appropriate rules.

2.2 The conflict of economic and ethical interests

Observation of the effect of certain foods on human health has been known since prehistoric times. People in the position of consumers examined which of the natural products around them were edible, or which ones to avoid. They made their choices not only according to sensory properties, but also according to a certain innate predisposition to food selection, when a person prefers two characteristics associated with high energy density, sweet taste and a feeling of fatness. They gradually associated foods with a positive feeling of satiety or, conversely, with a negative feeling of nausea. On the contrary, in the 1970s, the incidence of obesity and diabetes began to increase significantly in Europe and North America, and attention shifted to the consequences of excessive energy and nutrient intake. Knowledge of the connections between nutrition and chronic diseases, such as cardiovascular and cancer, was developing (Graff Zivin & Neidell, 2013)

At the same time, since the end of the 18th century, liberal economists have fully supported the belief that the market is a prerequisite for all efficiency in the allocation of resources. However, reality confirms the claim that this efficiency is not always the only goal pursued by society. This can be fully proven by the example of education and health. In real practice, the market has offered consumers goods that can be harmful to them since time immemorial, these are goods and services labeled as vices. Already at the beginning of the 18th century, the Dutch writer, philosopher and economist Bernard de Mandeville, in his essay *The Fable of the Bees* (with the subtitle "Private Vices - Public Welfare"), considered the basis of economic liberalism, held the opinion that the desire for personal benefit is the source and prerequisite for economic growth and the well-being of the entire society (Myšička, 2008). His work also contains controversial passages, such as the rejection of education for the poor social group, because education could arouse in them a desire for property. In the same period, the prominent Irish philosopher and Anglican theologian George Berkeley described Mandeville's theoretical concept as immoral. At the same time, it is also necessary to keep in mind that Mandeville, rather than defending the existence of vices, could have pointed out that every law or "moral value" was originally a defense of the utilitarian interest of some group, thereby anticipating the conclusions of modern legal philosophy.

In some cases, the market ensures efficient allocation of resources, but efficient allocation of resources is usually not the only goal pursued by society. The market may offer consumers goods that are harmful to them, or, conversely, some goods are displaced from the market by other goods with less utility for consumers (Grossman, 2000). The reason may be the fact that consumers are not sovereign over the market and are manipulable by advertising. The state then seeks to strengthen the position of consumers in the market through some interventions, for example, by restricting certain types of advertising (Black et al., 2022). Another reason for state intervention may be the preferences of some consumers that society considers to be wrong and attempts to correct them (a typical example is the demand for drugs by drug addicts). However, the justifications for state measures that promote a society's value system are mostly ethical rather than purely economic. "

2.3 Human capital theory as a social policy objective to ensure healthy nutrition

According to Gary Becker, human capital is divided into a stock of personal and social capital. Personal capital is further divided into "habitual" and "imaginative". Becker's theoretical analysis of human capital is based on the reality that every individual is an almost universal consumer. The amount of consumption is determined by income, while its orientation is based on his preferences (Osibanjo et al., 2020). These are determined by the respective constitutional and psychological typology of the personality, social environment and habits. It is clear that every individual is not born as a "blank slate", but rather comes into the world with limited experiences that he develops in childhood and in his later development. These experiences influence the desires and choices of adolescents and adults partly by creating habits, habits and traditions. The habits developed in an individual in childhood and early adulthood do not cease to influence behavior, even if external circumstances change fundamentally or radically. Childhood experiences can have a significant impact on an individual's entire life, as attempting to radically change habits when the environment changes may not pay off. Childhood habits then persist even though they would not have been formed if the environment in adolescence had been the same as the environment that surrounds a person in adulthood. The fundamental influence of early childhood on later behavior emphasized by Freud would be consistent with prudent utility-maximizing behavior if behavior were highly habitual. Childhood experiences could then have a major impact on preferences and choices in adulthood. Children spend their early years in the care of parents and close relatives, who decide what they will eat, what they will read, what they will hear,

what they will pay attention to, and what they will be indifferent to. The enormous influence that this fact has on a child's choices explains the close connection between children and parents in many attitudes and choices, including religious and political affiliation, propensity to smoke, alcohol and other addictive products or to divorce, inclination to healthy eating, vegetarianism or preference for exotic cuisines. The basis of the natural modeling of parental influence on children within the framework of utility maximization is the assumption that the preferences of children and adults develop from early childhood and later experiences under the influence of habitual, including addictive and traditional behavior. Altruistic parents partially maximize their own utility by maximizing the utility of their children. They try to direct the development of their children's preferences to increase their utility. As a current one, it is determined by the influences of past consumption, which affects future behavior.

Habits are harmful if current consumption reduces future utility. Examples include severe health-threatening addictions to smoking, alcoholism or drugs. Similarly, habits are beneficial if greater current consumption increases future benefits. Take the consumption of healthy foods as an example. It is natural that bad habits attract more attention than good ones, but nevertheless the reality is that rational behavior also implies that the strong habits under study are more likely to be harmful than beneficial. This is evidenced by analyses of contemporary types of societies with the attribute of modern and consumerism. Based on these analyses, it can be concluded that there is a significant active promotion of unhealthy lifestyles and a failure of educational systems to equip individuals with adequate skills to obtain, understand, evaluate and use information to improve their health. The above paradox has resulted in a health literacy crisis in Europe and elsewhere in the world. Almost half of adults in European countries have inadequate or problematic habits that negatively affect health literacy. This is significantly reflected in the quantitative and qualitative dimensions of human capital, the main determinants of which, according to modern economic theories, are investments in health and education as a prerequisite for ensuring stable macroeconomic growth (Widarni & Wilantari., 2021).

The second, "imaginative" component of personal capital, Becker refers to the trained ability of an individual not to underestimate the future - "imagination capital" (Barro & Lee, 2000), which helps him to better appreciate future benefits. Given that the theory of the redistribution system seeks ways to "decipher" human behavior, it could help develop this component of capital. It is precisely the imagination of broader contexts, a kind of overview of the behavior of both one's own and other people, that can be a good entry-level capital into

life. Social capital then determines the influence of the preferences of other people in the individual's social environment. The rise of social capital can increase or decrease an individual's benefit. This can be interpreted by the example of when the pressure of a reference group on an adolescent to start a healthy lifestyle increases his benefit, and his dependence on the behavior of others can create various externalities of a positive nature. Also known in sociology is the theory of human capital, as a reaction to the economism of the concept of human capital, the author of which is Pierre Félix Bourdieu. He divides human capital into four areas: economic (material wealth), cultural (education, information), social (recognition, contacts) and symbolic (prestige resulting from various types of capital). This is undoubtedly a broader concept of the category of human capital, seeking a certain permeability and transferability of capital from one to the second, third or fourth form of capital. Education essentially forms the cultural form of capital, but is also an important factor in the creation of capital in other areas. In essence, from the perspective of this theory, Bourdieu criticizes the educational systems in Western Europe at the beginning of the second half of the 20th century, especially their role in the "conservation" of existing social differences (Barro & Lee, 2000).

It follows from the above text that the concept of human capital is not theoretically anchored or precisely specified. There is no single definition. Economics actually uses this term to refer to the knowledge and abilities of an individual and their value created by investments. In sociology, human capital is a means to social success and status. However, the role of education is always mentioned in connection with the creation, content or structure of various definitions of human capital. The theory of human capital does not only include the economic and sociological aspect. This is clearly demonstrated by pedagogy, which has the space for research and assessment of the "input component" of human capital, which is school education. This includes in particular the issue of target structures, content, forms and methods of educational processes in the school system. A fundamental problem is the verification of the results of the pedagogical process. The creation of human capital is also influenced by some current topics in pedagogical science, such as functional literacy, intercultural education, alternative education, marketing of educational facilities and others.

Conclusion

The importance of education and training in healthy nutrition is shown not only in childhood, but also in productive age, when a person should prepare for the period of older age and old

age in terms of health, physical and psychological, which is important in connection with prolonging life and maintaining its quality. This education should take place both at the individual level, when responsibility for one's own health should be emphasized, but also at the level of the health system, which should show the way to a healthier and happier life. The government and state administration bodies should also focus on the quality and prices of food or their availability, social policy or orientation towards values other than material ones. All of this should be reflected in people's health and satisfaction and lower healthcare costs. It can therefore be stated that a social program for the prevention of food intake disorders (as part of the interests of a healthy eating style) is not only an ethical obligation, but also an economically effective solution for maintaining the stability of the health system. Its conclusions call for action: reallocating resources towards prevention is essential to reduce the human and financial impact of these diseases.

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