



Need for a Culturally-Relevant Adaptation for Latinas with Binge Eating Disorder



Image provided by the first author

Latinas are not only at greater risk for obesity and binge eating disorder (BED) than White women, they are also less likely to seek treatment for eating issues. Intensive lifestyle interventions are effective in promoting weight loss and improving dietary intake, but do not address important issues associated with obesity, such as BED. Cognitive-behavioral therapy (CBT) is effective for treating BED, but must be delivered by a trained specialist which can limit the accessibility of this treatment at a community level. Community partnership helps us understand the significance of the challenges associated with accessibility and dissemination of CBT in an effort to improve community-based health.

“With the help of community partners, it is important that we build on their strengths and resources as we actively and collaboratively improve evidence-based interventions for underserved communities.”

Following the cultural adaptation framework, we partnered with Latina women in the community and conducted focus groups to adapt a guided self-help version of CBT (CBTgsh) for binge eating. The focus groups allowed us to better understand their experiences with obesity and BED, and to foster a sense of connection and normalization with other Latinas who might experience similar issues.

Highlights

Meaningful relationships with key stakeholders reduced the burden of the research process on the community.

Developing strong relationships with other researchers and practitioners aided sharing resources and strengths and led to increased research capacity.

Participants can continue to benefit from strong, culturally adapted, evidence-based programs that could improve their overall health.

Methods

From the focus groups, participants discussed, for example, challenges with navigating social situations around food and balancing their family's needs over their own. CBTgsh was then adapted to incorporate culturally congruent vignettes and an ethnic-specific food guide. Ongoing clinical sensitivity training and supervision of supporters who delivered the intervention were also provided. Participants who reported problems with overeating or binge eating received the culturally-adapted intervention and found the adaptations relevant and effective in reducing binge eating.

Results

- When conducting such guided self-help (GSH) interventions, practitioners should consider potential obstacles including challenges with self-monitoring, limited pre-intervention knowledge about healthy living, and previous unsuccessful experiences with other self-help programs.
- A GSH intervention to promote healthy eating patterns was effective and highly acceptable to women participants who reported disordered eating behaviors. The unique experience and support to focus on their eating helped the women promote health behavior change.
- In order for interventions to be effective, it should aim to reduce binge eating behaviors by addressing nuanced topics of balancing family responsibilities and navigating social situations with food specific to Latinas.

HOW DID A COMMUNITY PSYCHOLOGY PERSPECTIVE INFORM YOUR UNDERSTANDING OF THE ISSUES, RESULTS, AND IMPLICATIONS?

Our research is guided by community-based participatory principles of: commitment to sustainability and long-term process; fostering co-learning and capacity building; recognizing the community as a unit of identity; focusing on local relevance of public health problems; and building on strengths and resources within the community. Using this framework ensured that the GSH intervention resonated with the community's resources and needs. We built upon the strengths and programs already in place for easier implementation and facilitation for social change and action.

What Does This Mean For?

Research and Evaluation— In order to advance the translation of research into different healthcare settings and communities, it is important to develop long-term relationships with key stakeholders, including participants, community members, researchers, and practitioners. Much can be learned from input and feedback from the community. Even modest cultural adaptations to existing evidence-based brief interventions can significantly increase their effectiveness and acceptability. Determining the community impact and benefit of such programs is an important outcome for future research and evaluation.

Practice— The use of GSH evidence-based programs addresses a number of limitations of traditional evidence-based programs. Specifically, GSH interventions are delivered by paraprofessionals or “supporters” making the intervention more cost-effective, accessible, and adaptable to patients’ unique needs in treatment for obesity and/or BED. This intervention could be replicated in community settings and led by allied mental health professionals of all disciplines.

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