

## Latina Girls

This information sheet is designed to raise awareness of disordered eating and eating disorders among Latina girls. It highlights findings from recent studies and provides suggestions for promoting positive body image and healthy eating behaviors among middle-school Hispanic students.

### Latina girls are at risk

Many people believe that only White girls are affected by eating disorders. In reality, no ethnic or socioeconomic group is immune to the dangers of this disease. Studies typically do not include ethnically diverse populations; therefore, cases of eating disorders among Hispanics are often underreported.

Research on eating disorders among Latina girls is limited. However, recent studies indicate that Latina girls are expressing the same concerns about body weight as White girls and that many are engaging in disordered eating behaviors, including dieting and purging, to lose weight.

The terms "Hispanic" or "Latino" encompass diverse groups who immigrated to the U.S. Among the largest Hispanic populations in this country are Mexican Americans, Puerto Ricans, and Cuban Americans. The Hispanic population is growing faster than any other ethnic group in this country; it has more than doubled in the past 20 years. By the year 2020, it is estimated that Hispanics will be the single largest minority group in the U.S. Hispanics are predominantly young, with more than one in three being under the age of 18.



The myth that Latinas do not experience eating disorders contributes to the lack of identification of the disease among this population. Since the early detection of an eating disorder is very important for its successful treatment, this misperception can result in serious health problems for Latina girls.

Although this information sheet addresses eating disorders among Latinas in general, these disorders will affect each subgroup of Latinas in a different way. There is no single Latino standard regarding body size and eating patterns. In addition, within each cultural group, socioeconomic status may also affect the risks for developing eating disorders. For example, Latinas from families with low incomes may face a greater risk







for obesity, while those from higher income families may be at a higher risk for dieting to try to fit in with their middle or upper middle class peers.

## Hispanic girls express high levels of body dissatisfaction

Studies show that Latinas express the same or greater concerns about their body shape and weight as White females. In a study of more than 900 middle school girls in northern California, Hispanic girls reported higher levels of body dissatisfaction than any other group. Among the leanest 25% of girls, both Hispanic and Asian girls reported significantly more dissatisfaction than White girls. 2

Media targeting Latinas, including Hispanic television and magazines, are increasingly reinforcing the ideal of thinness as beauty. For example, although Mexicans have traditionally preferred a larger body size for women, many Mexican American women are idealizing and desiring a thinner figure than the one they currently have.<sup>3</sup> For all racial and ethnic groups, body dissatisfaction is strongly linked with eating disorders.<sup>4</sup>

"The only people who see being fat as a positive thing in Argentina are the very poor or the very rural people who still consider it a sign of wealth or health. But as soon as people move to the bigger cities and are exposed to the magazines and the media, dieting and figures become incredibly important."

**—Elsa, immigrant from Argentina** 

# Low self-esteem and depression can contribute to eating disorders

Research suggests that Latina girls are at a high risk for mental health problems such as depression.<sup>6</sup> Latina girls also report lower self-esteem and less body satisfaction than girls from other racial and ethnic backgrounds. Studies indicate that as Latinas move from elementary to middle school and on to high school, they may suffer a greater loss of self-esteem than White or Black girls.<sup>7</sup>



Hispanic girls may lack not only the high sense of self worth demonstrated by many African American girls, but also the academic opportunities available to some White girls. In addition, some Latinas may experience prejudice and discrimination based on ethnicity, language, and social status, which can contribute to low self-esteem and depression.

## Obesity is also a risk factor for eating disorders

Hispanics, like African Americans, experience high rates of obesity. Among girls ages 5-17, Black and Hispanic girls have been found to have the highest measures of body mass index (BMI), exceeding those of White and Asian girls. They are also less likely to exercise than their White counterparts. 10

Hispanic children consume the most fast food of all ethnic groups. Research has shown that high fat diets greatly contribute to the high rates of obesity among low-income Hispanic families.<sup>11</sup>

For Latinas, as well as women from other ethnic and cultural groups, obesity is linked with weight dissatisfaction and with a desire to be thinner. Overweight women are more likely than women of normal weight to experience teasing, criticism, or discrimination.<sup>12</sup>

Obesity is also a risk factor for binge eating. In a recent study of 31 middle schools and high schools in Minnesota, binge eating was more prevalent among Hispanic girls than among those of other cultural backgrounds.<sup>13</sup>

# Dieting and purging are widely prevalent among Hispanic girls

Studies indicate that Latinas and White girls have similar rates of disordered eating behaviors. <sup>14</sup> In fact, Latina girls seem to be particularly at risk for two types of disordered eating behaviors: dieting and purging.

Hispanic high schoolers have been found to have rates of bulimia comparable to those of Whites. Along with Black girls, Latinas have been found to use laxatives more frequently than girls from other racial groups.<sup>15</sup>

### Acculturation may increase vulnerability

For Latinas and other groups, acculturation can have an impact on body size preference and body image. Heaviness is seen as a sign of affluence and success in some traditional Hispanic cultures; but as Hispanics acculturate to the standards of beauty in this country, they may seek to achieve thinner bodies. Hispanic women born in the U.S. are more likely to prefer a smaller body size. Those who immigrate after age 17 are less likely to desire a thin body. 17

High levels of acculturation are associated not only with a drive for thinness but also with less healthy eating behaviors. As a result, second and third generation Hispanic adolescents are more likely to be obese than their first generation peers.<sup>18</sup>

Girls who are influenced by more than one race or culture may experience anxiety and confusion about their identity that may also contribute to disturbed eating behaviors.

### Things You Can Do

As an adult working with adolescent girls, you can help identify those at risk, promote an environment that discourages negative body image and disordered eating behaviors, and prevent eating disorders among this population. Here are some ideas:

- Provide adolescents with information on the benefits of healthy eating and regular physical activity.
- Do not tolerate sexual harassment or teasing about another person's body shape, weight, or race.
- Conduct media literacy activities that explore the images of thinness as beauty in television, magazines, and advertisements targeting girls.
- Incorporate culturally appropriate materials, curricula, and interventions.
- Refer girls who want to achieve a healthy weight to appropriate health professionals for information on healthy weight management strategies.
- Help girls understand cross-cultural differences regarding body image and weight control.
- Provide family members with copies of the "Jóvenes Latinas" information sheet included in this packet.
- 8. Be aware that Hispanic families may be reluctant to seek the help of outside experts.
- **9.** Help Hispanic families understand and access health care systems.

#### **Definitions**

**Disordered eating** refers to troublesome eating behaviors, such as restrictive dieting, bingeing, or purging, which occur less frequently or are less severe than those required to meet the full criteria for the diagnosis of an eating disorder.

Binge eating disorder means eating large amounts of food in a short period of time, usually alone, without being able to stop when full. The overeating or bingeing is often accompanied by feeling out of control and followed by feelings of depression, guilt, or disgust.

**Overexercising** is exercising compulsively for long periods of time as a way to burn calories from food that has just been eaten. People with anorexia or bulimia may overexercise.

**Bulimia nervosa** is characterized by cycles of binge eating and purging, either by vomiting or taking laxatives or diuretics (water pills). People with bulimia have a fear of body fat even though their size and weight may be normal.

Anorexia nervosa is self-starvation. People with this disorder eat very little even though they are thin. They have an intense and overpowering fear of body fat and weight gain



#### **End Notes**

- <sup>1</sup> Striegel-Moore, R.H., & Smolak, L. The influence of ethnicity on eating disorders in women. In Eisler, R.M., & Hersen, M. (eds.). *Handbook of gender, culture, and health*. Mahway, NJ: Lawrence Erlbaum Associates, 2000, pp. 227-253.
- <sup>2</sup> Robinson, T.N., Killen, J.D., Litt, I.F., Hammer, L.D., Wilson, D.M., Haydel, K.F., Hayward, C., & Taylor, C.B. Ethnicity and body dissatisfaction: Are Hispanics and Asian girls at increased risk for eating disorders? *Journal of Adolescent Health*, Dec. 1996, vol. 19, no. 6, pp. 384-93.
- <sup>3</sup> Dounchis, J.Z., Hayden, H.A., & Wilfley, D.E. Obesity, eating disorders, and body image in ethnically diverse children and adolescents. In Thompson, J.K., & Smolak, L. (eds.). *Body image, eating disorders, and obesity in children and adolescents: Theory, assessment, treatment, and prevention.* Washington, DC: American Psychological Association, 2001, pp. 67-98.
- <sup>4</sup> Striegel-Moore & Smolak, 2000.
- <sup>5</sup> In Thompson, B.W. A hunger so wide and so deep: A multiracial view of women's eating problems. Minneapolis, MN: University of Minnesota Press, 1994.
- <sup>6</sup> Nichter, M., Vuckovic, N., & Parker, S. The looking good, feeling good program: A multi-ethnic intervention for healthy body image, nutrition, and physical activity. In Piran, N., Levine, M.P., & Steiner-Adair, C. (eds.). *Preventing eating disorders: A handbook of interventions and special challenges*, 1999, pp. 175-193.
- <sup>7</sup> Striegel-Moore & Smolak, 2000.
- <sup>8</sup> Orenstein, P. Schoolgirls: Young women, self-esteem, and the confidence gap. New York: Doubleday, 1994.
- <sup>9</sup> Dounchis et al., 2001.
- <sup>10</sup> Ibid.
- <sup>11</sup> Ibid.
- <sup>12</sup> Striegel-Moore, R., & Smolak, L. The role of race in the development of eating disorders. In Smolak, L., Levine, M.P., & Striegel-Moore. The developmental psychopathology of eating disorders: Implications for research, treatment, and prevention. Mahhaw, NJ: Lawrence Erlbaum, 1996.
- <sup>13</sup> Neumark-Sztainer, D., Croll, J., Story, M., Hannan, P. J., French, S. A., & Perry, C. Ethnic/racial differences in weight-related concerns and behaviors among adolescent girls and boys. Findings from Project EAT. Journal of *Psychosomatic Research*, 2002, 53, pp. 963-974.
- <sup>14</sup> Smith, J.E., & Krejci, J. Minorities join the majority: Eating disturbances among Hispanic and Native American youth. *International Journal of Eating Disorders*, 1991, vol. 9, pp. 179-186.
- 15 Dounchis et al., 2001.
- <sup>16</sup> Kempa, M.L., & Thomas, A.J. Culturally sensitive assessment and treatment of eating disorders. *Eating Disorders*, 2000, vol. 8, pp.17-30.
- <sup>17</sup> Lopez, E., Blix, G. G., & Blix, A. G. (1995). Body image of Latinas compared to body image of non-Latina White women. Health Values: *The Journal of Health Behavior, Education & Promotion*, 1995, vol. 19, no. 6, pp. 3-10.
- <sup>18</sup> Dounchis et al., 2001.