

# Group intervention for women with overweight or obesity

<b>Submission date</b> 18/02/2026	<b>Recruitment status</b> Not yet recruiting	<input checked="" type="checkbox"/> Prospectively registered
<b>Registration date</b> 19/02/2026	<b>Overall study status</b> Ongoing	<input type="checkbox"/> Protocol
<b>Last Edited</b> 19/02/2026	<b>Condition category</b> Nutritional, Metabolic, Endocrine	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
		<input type="checkbox"/> Individual participant data
		<input checked="" type="checkbox"/> Record updated in last year

**Plain English summary of protocol**  
Not provided at time of registration

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## **Additional identifiers**

## **Study information**

### **Scientific Title**

Effectiveness of a family-focused group intervention centered on self-regulatory capacity in women with overweight or obesity to promote healthier habits

### **Study objectives**

### **Ethics approval required**

Ethics approval required

### **Ethics approval(s)**

approved 05/12/2025, Comité Ético Científico del Servicio de Salud Metropolitano Sur (Avenida Santa Rosa 3453. San Miguel, Santiago, 8900000, Chile; +56-225763637; comiteeticocientifico@ssms.gob.cl), ref: 142-01122025

### **Primary study design**

Interventional

### **Allocation**

Randomized controlled trial

### **Masking**

Open (masking not used)

### **Control**

Uncontrolled

## **Assignment**

Cluster (OMS definitions)

## **Purpose**

Treatment

## **Study type(s)**

## **Health condition(s) or problem(s) studied**

Treatment of overweight and obesity

## **Interventions**

Experimental Group:

Family Attachment Therapy developed by Claudia Messing, focused on self-regulation.

8 group sessions, 2 hours each, every two weeks, for 4 months with each group (there will be two experimental groups), in groups of 8 women.

The therapy will be led by a clinical psychologist specializing in family attachment therapy and eating disorders.

The therapeutic content will include exploring bonds with family of origin and current family, identifying relational patterns that influence family dynamics and eating habits, addressing psycho-affective transference associated with food, role overload, mimicry of parental figures, repetition of family experiences, and healthy boundaries. The aim is to foster emotional self-regulation through verbalization of distress linked to family history; alternatives to immediate gratification mediated by food; and work on body image/schema, self-care, and self-concept/self-esteem.

Techniques will include mindfulness, cognitive restructuring, and behavioral strategies.

Control Group:

This group will not receive the project intervention. They will continue with the regular activities of the Choose Healthy Living Program, with access to timely referrals if necessary and monitoring within the program.

Group Assignment and Randomization: Assignment to the experimental and control groups will be done via random numbers generated in Excel. Participants are organized into groups of 8 according to clinical-therapeutic objectives; the groups remain fixed throughout the process (without modifications).

Regarding the evaluation schedule, it should be noted that measurements for both groups will be taken at three points: before (baseline), at the end of the interventions, and at a 6-month post-treatment follow-up.

There will be two experimental groups and two control groups of 8 people each, in two phases of 4 months each.

This is a group psychotherapeutic intervention; no medications or routes of administration are reported. Recruitment to compensate for dropout: in order for 64 to complete the 3

measurements, it is planned to recruit 82 women (18 additional), and attendance at sessions will be considered in the analyses.

## **Intervention Type**

Behavioural

## **Primary outcome(s)**

1. Selfregulatory capacity measured using a latent variable constructed from physical, psychological, and relational indicators using all listed instruments at pretest, posttest (4 months), and 6month followup
2. Body mass index (BMI; kg/m<sup>2</sup>) measured using standard anthropometric assessment at pretest, posttest (4 months), and 6month followup
3. Body composition measured using the InBody 270 at pretest, posttest (4 months), and 6month followup
4. Emotional eating measured using Emotional Eater Questionnaire (EEQ) at pretest, posttest (4 months), and 6month followup
5. Eating behavior measured using ThreeFactor Eating Questionnaire (TFEQ) at pretest, posttest (4 months), and 6month followup
6. Physical activity measured using International Physical Activity Questionnaire, long version (IPAQlong) at pretest, posttest (4 months), and 6month followup
7. Selfconcept measured using AF5 at pretest, posttest (4 months), and 6month followup
8. Psychological symptoms, traits, and functioning measured using PAI at pretest, posttest (4 months), and 6month followup
9. Traits associated with eatingrelated psychopathology measured using EDI3 at pretest, posttest (4 months), and 6month followup
10. Interpersonal attachment style measured using Vinculatest at pretest, posttest (4 months), and 6month followup
11. Family functioning (cohesion, flexibility, communication, and total index) measured using FACES IV at pretest, posttest (4 months), and 6month followup

## **Key secondary outcome(s)**

### **Completion date**

11/11/2027

## **Eligibility**

### **Key inclusion criteria**

1. Women
2. Aged 18–60 years
3. With a clinical diagnosis of overweight or obesity (BMI  $\geq$  25 kg/m<sup>2</sup>)

4. Participants in the Elige Vida Sana Program in El Bosque
5. Willing to attend group sessions every 15 days for 4 months
6. Having signed the informed consent form to participate in the study and to allow the use of their data for research purposes

**Healthy volunteers allowed**

No

**Age group**

Adult

**Lower age limit**

18 years

**Upper age limit**

60 years

**Sex**

Female

**Total final enrolment**

82

**Key exclusion criteria**

1. Presence of severe psychiatric disorders (such as schizophrenia, uncontrolled bipolar disorder, active suicidal ideation, or substance use disorders) that limit active participation in a group process as indicated in the clinical record or through prior screening
2. Pregnant women or those exclusively breastfeeding, since weight change would not be comparable and they may require different nutritional interventions
3. Severe mobility problems or decompensated chronic illnesses that prevent sustained, in-person participation in group sessions
4. Significant difficulties understanding spoken or written Spanish, or unaccommodated sensory disabilities that prevent full participation in group activities

**Date of first enrolment**

09/03/2026

**Date of final enrolment**

30/01/2027

**Locations****Countries of recruitment**

Chile

**Sponsor information****Organisation**

University of Bío-Bío

**ROR**

<https://ror.org/04dndfk38>

**Organisation**

Universidad del Desarrollo

**ROR**

<https://ror.org/05y33vv83>

## **Funder(s)**

**Funder type**

**Funder Name**

Agencia Nacional de Investigación y Desarrollo

**Alternative Name(s)**

Agencia Nacional de Investigación y Desarrollo de Chile, National Agency for Research and Development, Government of Chile, Chilean National Agency for Research and Development, Agencia Nacional de Investigación y Desarrollo de Chile (ANID), ANID

**Funding Body Type**

Government organisation

**Funding Body Subtype**

National government

**Location**

Chile

## **Results and Publications**

**Individual participant data (IPD) sharing plan**

**IPD sharing plan summary**

Not expected to be made available