Solutions: Support for Emotional and Binge Eating

Session 8: Why Diets Don't Work



Check-In

 Name at least one success and one challenge from the past week.

 How did you support yourself through those experiences?

 How can the group support you this week?

Quote of the Week

I've been on a diet for two weeks and all I've lost is two weeks.

-Totie Fields

Session 8: Why Diets Don't Work

Cultural and Societal Influencers on Relationships with Food, Body, and Self

- When we study disordered eating patterns, including Eating Disorders, we find that they develop in a milieu of various kinds of oppression and bias, particularly weight stigma.
- As cultures Westernize, we see eating disorders happen where they didn't before. Rates of eating disorders increase the more cultures Westernize.

BMI Debunked

- Phillips, 2013- defined "metabolically healthy obesity" and "metabolically unhealthy normal weight"
 - This suggests we cannot connect weight to disease/pathology/reduced quality of life indices in any given person
- Katherine Flegal and colleagues (2013) analyzed the results of numerous other studies and confirmed:
 - People who fall into the "overweight" BMI category have the lowest mortality rate risk.
 - People in the "normal" weight category and lower end of the "obese" category have the same risk.
 - People at the higher end of the "obese" category have a slightly higher mortality rate.
 - People in the "underweight" category have the highest mortality rate.
- If you use the BMI to decide who is healthy and who is unhealthy, you incorrectly label 54 million adults as unhealthy (Tomiyama et al., 2016).



Weight Stigma

Biases and discrimination about a person's weight/body size.

Underlying Assumptions:

- Losing weight is intrinsically possible and desirable.
- Expected and accurate to feel shame for an "imperfect" body.
- Thinner people are better, more disciplined, and necessarily healthier.
- Losing weight necessarily results in being more attractive, powerful, valuable, seen.

Impact of Weight Stigma

- Gaesser & Angadi, 2021- found people who focus on the pursuit of weight loss often get caught in the weight loss-and-regain cycle and do not achieve any health benefits from physical fitness. Conversely, when people take a weight-neutral approach (where weight loss is not an indicator of success) physical activity and fitness offer health benefits regardless of whether their weight goes up, goes down, or stays the same.
- Gaesser, 2002- followed men over decades and found that those who stayed at a higher, steady weight lived longer than those whose weight fluctuated up and down.
- Byun et al., 2019- researchers in conjunction with the American Heart Association found that more episodes of yo-yo dieting were associated with worse cardiovascular health among women.



Impact of Weight Stigma

- Study of 1013 women belonging to a national weight loss support organization:
 - Women who internalized experiences of weight stigma (blamed themselves) engaged in more frequent binge eating, even after accounting for self-esteem, depression, and the amount of stigma experienced (Puhl, 2007).
- After accounting for BMI, experienced stigma, and demographics, participants with higher internalized weight bias reported greater healthcare avoidance, increased perceived judgment from doctors due to body weight, lower frequency of obtaining routine checkups, less frequent listening and respect from providers, and lower quality of healthcare (Puhl et. al, 2021).



Impact of Weight Stigma

Body dissatisfaction is inversely related to healthy behaviors and stable weights.
 Emphasis on weight control has been shown to promote disordered eating behaviors, body dissatisfaction associated with binge eating and eating disorder behaviors, lower levels of physical activity, and weight gain over time.

Takeaways from this research:

- Shame about the body doesn't work. We don't take good care of things we have shame about.
- Anti-fat messages do not promote health, but rather prevent health.

How has weight stigma impacted your relationship with food, body, and health?



Repeated Dietary Restraint

Dieting requires the mind to follow strict rules, which overrides listening to the body's natural controls over food intake and impairs body cues of hunger and fullness.

• This eventually leads to physical and psychological deprivation that often results in a greater sense of a lack of control with food and eating behaviors and therefore an increase in overeating episodes (Craighead and Allen 1995; Herman & Polivy, 1984; Lowe, 1993).



Repeated Dietary Restraint

Diets, especially highly-restrictive diets, often lead to overconsumption once food is allowed back into one's life.

- Deprivation of highly palatable foods (high sugar/high fat foods) leads to obsessions, cravings, and binge-like behaviors, rather than the exposure of them.
- Periods of fasting and of restricted consumption of high calorie/high sugar foods leads to an increased release of dopamine upon consumption.
- Bingeing on foods high in sugar, coupled with restriction or purging, has been shown to have similar, although not the same, neurobiological influences as addictive drugs (dopamine release and brain structures involving motivation and reward).

Repeated Dietary Restraint

• Individuals become more vulnerable to overeating in response to negative emotions (such as disappointment) or low arousal (such as boredom), making it more difficult to ignore the urge to eat (Craighead & Allen, 1995).

 Long-term negative impact on body image, body attitudes, mood, self-esteem, and physical health. (Varma & Pawar, 2015).



Question

What are your personal experiences with dieting? Have you noticed any negative impacts on your body image, attitudes about food/eating, mood, self-esteem, or physical health?



Reasons Diets Backfire

 Diets are punishment by depriving you of a primary coping mechanism.

Diets focus attention on food, promoting obsession.

 Diets do not address compulsive eating or bingeing issues. Emotional reasons for overeating are rarely addressed.

• Diets don't identify trigger foods, cravings, or habitual eating behaviors.



Reasons Diets Backfire

- Diets are temporary; compulsive eating is a long-term problem.
- Diets starve the body of nutrients triggering the binge/restrict cycle.
- Unbalanced nutrition and starvation upsets the body's metabolism (body stays ready for the next "famine")
- Diets encourage unrealistic weight or appearance goals.



Reasons Diets Backfire

- Diets encourage seeing pounds and food as the problem.
- Diets fail to address the need for dedication to a complete lifestyle change.
- Failed dieting teaches learned helplessness and lowers self-esteem, exacerbating eating issues.
- Diets don't consider or address social determinant factors that impact body shape/weight.



Group Question

How have diets and dieting interfered with your wellness or promoted your compulsive behaviors with food and eating?



Contributors to Overeating in Our Society

- Abundance of calorie-dense foods
- Highly-processed foods
- Malnutrition
- Medication
- Sedentary lifestyles
- Diet culture norms/expectations
- Weight Stigma

- Food/eating centered socializing
- Eating out more often
- Restaurant portion size increase
- Immediate gratification of needs
- Soothing and sedating with food
- Learned helplessness
- Low self-esteem



Contributors to Overeating in Our Society

- Body image issues
- Media bombardment
- Overanalyzing issues
- Consumer society; more is better
- Boredom
- Habit
- Longer working hours

- Fast-paced lifestyles
- Fatigue
- Isolation
- Feeling disconnected
- Chronic stress
- Poverty



Group Questions

- What factors above have contributed most to your challenges with food, eating, and your body?
- How can you use this knowledge of contributing factors to promote a healthier relationship with food and body?

Group Question

What are your thoughts and feelings about the following statement:

Breaking free from the confinement of dieting and learning to eat when I'm hungry- for physical nourishment, satisfaction, and a healthy body- implies trusting the wisdom of my body and believing that my body knows its appropriate weight better than I do.



The Importance of Hydration

- 75% of Americans are chronically dehydrated.
- 37% of Americans have such a poorly recognized thirst mechanism it is mistaken for hunger.
- Mild dehydration (about 8 ounces less than properly hydrated) can slow metabolic rate by 3%.
- One cup (8 ounces) of water shuts down midnight hunger pangs in 98% of dieters in a University of Washington study.



The Importance of Hydration

- Dehydration is the primary cause of daytime fatigue.
- Research shows that consuming 64 to 80 ounces of water daily significantly reduced back and joint pain in 80% of study participants.
- A 2% drop in body water levels (1 quart for a 150 lb. person) can trigger fuzzy short-term memory, trouble with basic math, and difficulty focusing on printed material or computer screens equivalent to a 0.08 percent blood-alcohol level (legally intoxicated).
- Drinking 64 ounces of water daily decreases colon cancer risk by 45%, breast cancer risk by 79%, and bladder cancer risk by 50%.



Any last thoughts or questions?



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