

Promotion of Healthy Weight

HELPING WITHOUT HARMING

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As headlines warn of a “war on obesity” and a barrage of advice to “lose weight” bombards us, the directive to “first, do no harm” has never been more urgent. A full array of interrelated body image, eating, nutrition, fitness, and weight concerns affects the lives of most children and adults today. By targeting these problems separately, we fail to see the common seedbed out of which they grow. Defining *fatness* as the problem and *weight loss* or control as the solution is a paradigm that is ill-conceived, short-sighted, contradictory, discriminatory, and sometimes dangerous. It diverts our attention from genuine risk factors and interferes with what should be our real goal, health and well being. In the meantime, body image, eating, nutrition, fitness, and weight problems compromise the welfare of more and ever-younger children.

Any effective health promotion initiative must judiciously reject methods that have proven futile, and vigorously avoid recommendations that appear to solve one problem at the expense of another. In this case, our common objective—healthy students—must be sought through holistic attitudes and recommendations that adhere to this goal and are thereby equitable and non-contradictory. It is alarming that most current responses to the rising rate of fatness do not succeed in this regard.

The flood of advice for weight reduction begs this question: has a pervasive and persistent focus on weight proven successful? For forty years Americans have assumed more personal responsibility for their weight, claimed more weight-loss intentions, and engaged in more weight-loss efforts than ever previously imaginable. On any given day, 46% of the population is actively on a weight-loss diet, and many more are planning to begin (or resume) soon. Roughly 70% of females over the age of thirteen routinely cycle on and off of various weight-loss plans and they are being joined by a growing number of men. Yet with all these efforts, the number of Americans considered overweight has risen from somewhere around 14% in the 1960s to over 50% today. Clearly, weight loss or even weight control as a goal has not worked and is not working still. Yet our persistent responses deny this fact: *The thinner we try to be, the fatter we become.*

What does this mean for our students?

Teachers report that even kindergarteners today mimic the fat-distaining talk of their elders. Whether or not five-year-old children fully understand their own words, clearly they are learning the language of our fat-phobic culture and the weight loss “solutions” it offers. Such children are not learning to feel integrity in their bodies, to trust inner cues about what they need, or that we want them to eat well for health and well being. Instead, from a very early age, they are learning to feel insecure and self-conscious, to mistrust their hunger, to think of themselves as “good” or “bad” based on the size of their stomachs, and to set themselves on a course in which weight loss and gain are a central focus of their lives.

If we are to effectively prevent or reverse culturally induced body image, eating, fitness, and weight concerns and the health problems they spawn it is essential that new models correct the flaws of prior efforts. First and foremost, *fatness* must be replaced as the perceived problem. In its place, solutions must target the root causes for: 1) a *rise* in unhealthy fatness, 2) the unrealistic drive to be thin and the restrictive eating that accompanies it, 3) poor nutrition and fitness habits in people of all sizes, and 4) weightist attitudes that deny the integrity of size diversity—*simultaneously and without contradiction*. Fortunately, enough is now understood about the underlying causes to do so.

The *Model for Healthy Body Image* (MHBI) provides a holistic approach to help children and adults to value health and resist pressures that promote negative body images and counterproductive lifestyle habits. This model has been tested clinically and in a popular and successful curriculum called *Healthy Body Image: Teaching Kids to Eat and Love Their Bodies Too!* The *Healthy Body Image* program has produced very positive results in outcome studies with students in grades four through six, and is endorsed by the U.S. Department of Health Office of Women's Health in their *Bodywise* information packet for educators. *Real Kids Come in All Sizes: Ten Essential Lessons to Build Your Child's Body Esteem* is a companion book written for parents,

A comprehensive model:

Concepts contained in the MHBI are a response to a set of four pervasive, distorted, culturally transmitted beliefs or *toxic myths* that underlie most body image, eating, fitness, and weight problems today. Rather than warning children about what to avoid, this approach teaches students what to embrace in the face of unhealthy pressures. Ten prevention principles or *antidotes* directly challenge the premises of the documented toxic myths and empower resistance to their influence. In turn, more wholesome attitudes and behaviors are maintained or reinstated. The antidotes teach:

- a. The biological limits to manipulation of body size and shape through healthy means
- b. Choices that enhance healthy weight, body image, and self esteem
- c. Actions for resiliency in the face of conflicting messages.

Figure 1 illustrates this organization.

Interdependent toxic myths underlie problems

As with any holistic model, it is essential to keep all four toxic myths or contributors to body image, eating, fitness, and weight problems in mind in order to maintain a balanced perspective and to reject solutions that conflict. The myths are summarized here and their dynamic flow is illustrated in Figure 2.

Myth 1: Image is valued over substance: Marketing of ultra thin models *as if they were normal* has been very effective in creating tremendous appearance anxiety and fear of fatness in individuals who naturally want to be normal and fit in.

Myth 2: Denial of biological diversity: For the drive to be thin to be widely embraced, biological diversity of size and shape had to be denied. Instead of accepting that wholesome eating and fitness result in diverse BMIs, the current norm is to mistrust the body's ability to regulate weight if/when the end result is or might be visible fat.

Myth 3: Denial of the counterproductive effects of externally prescribed hunger regulation: Since restrictive eating commonly results in short term weight loss, this is routinely presented as evidence

that anyone can be slim(mer) if they “work at it.” “Dieting” continues to be viewed as the primary means to achieve this, even though the basis for its dismal success rate has been well documented since 1950. At least 90% of weight lost through any type of weight loss plan is regained, often with added pounds.

Myth 4: Discounting the value of health: When appearance, the drive to be thin, denial of biological size diversity, and the diet mentality dominate, the primary purpose of eating and fitness is lost: “*Why eat healthy (or be active) if it won’t make me thin?*” Given a market flooded with entertainment foods and sedentary pastime options, the number of people who routinely override their internal weight regulatory system, are poorly nourished, and lack basic fitness has increased exponentially.

Prevention principles provide antidotes

The MHBI provides ten prevention principles to challenge the authenticity of toxic beliefs regarding appearance, size, weight and the purpose of eating and fitness. Concepts assert that:

- 1) integrity should be valued over appearance;
- 2) innate size diversity should be accepted and affirmed;
- 3) internal hunger regulation should be trusted; dieting should be strictly avoided;
- 4) hunger should be consistently satisfied with food that balances wholesome nutrition, energy, and good taste;
- 5) physical activity should be part of the daily routine, maintained throughout life for fitness, self-confidence, and emotional well being;
- 6) role models should reflect a realistic, standard based on deeper qualities, rather than appearance.

In practice, the MHBI concepts are best conveyed through simple language using stories, and experiential activities such as those provided in the *Healthy Body Image* curriculum. Figure 3 summarizes the health promotion messages and demonstrates how these may be presented in a concise format. (Download this and other educational handouts at www.bodyimagehealth.org)

To avoid a skewed perspective, students should be taught *all* of the MHBI concepts. For example, it is not enough to critique the presentation of “ideal” beauty, or to teach acceptance of diverse body sizes without giving equal attention to the need for wholesome eating and fitness for health regardless of size. Likewise, recommendations for balanced nutrition and fitness may backfire if individuals are left with the belief that they can expect to be rewarded for these choices with a slim physique. Finally, clear education about the predictable, counterproductive effects of dieting for weight loss must not be neglected, particularly as the “war on obesity” adds fuel to fear of fatness and the diet mentality it spawns. Figure 4 offers a sample *Healthy Body Image* curriculum activity that teaches why dieting is not an effective strategy.

Defining a more realistic goal

When *fatness* is defined as the problem and “weight control” is touted as the reason for wholesome choices, the result is a set-up. Those who perceive themselves as “too fat” (regardless of actual weight) suffer negative body esteem and are at risk for repeated diet failures, eating disorders, and eventual complacency or defiance about health habits after futile weight loss attempts: “*Why should I eat healthy if it won’t make me thin?*” Those who think they’re slim enough don’t know (or don’t care) that recommendations to eat well and stay fit apply to them too: “*I’m not fat. What difference does it make what I eat?*” In contrast, when the purpose of healthy habits is health (versus size), we sacrifice nothing while gaining a nondiscriminatory approach that offers health and well being for all.

Figure 1

THE MODEL FOR HEALTHY BODY IMAGE			
Conceptual Building Blocks	Foundation	Desired Outcome	Goal
<p>Developmental change is inevitable. Normal changes may include weight gain and temporary out-of-proportion growth. Fat does not, by itself, define "overweight."</p> <p>Genetics and other internal weight regulators strictly limit the degree to which shape, weight & Body Mass Index can be manipulated through healthy means.</p> <p>Restricted or restrained hunger (dieting) results in predictable consequences that are <i>counterproductive</i> to sustained weight loss and interfere with normal hunger regulation.</p>	<p>Recognize and respect basic biology; understand what <i>cannot</i> be controlled about size, shape and hunger.</p>	<p>Accept the innate body: "This is the body I was born to have."</p>	<p>Healthy Body Image</p> <p>Prevention of Unhealthy and Disordered Eating</p>
<p>Balance attention to many aspects of identity. Looks are only one part.</p> <p>Satisfy hunger completely with enough varied, wholesome food in a stable, predictable manner on a regular basis.</p> <p>Limit sedentary choices to promote a physically active lifestyle through all stages of life.</p> <p>Choose role models that reflect a realistic standard and enhance self esteem.</p>	<p>Emphasize what <i>can</i> be influenced or chosen.</p>	<p>Enjoy eating well for health, energy, enjoyment, and hunger satisfaction.</p> <p>Create a physically active lifestyle for fitness, endurance, fun, relaxation and stress relief.</p>	
<p>Promote historical perspective on today's cultural attitudes related to body image.</p> <p>Develop media literacy. Learn to think critically about media messages that influence body image.</p> <p>Support others in resisting unhealthy norms about weight, dieting, low nutrient food choices, excessive eating for entertainment, and sedentary entertainment.</p>	<p>Develop social and cultural resiliency.</p>	<p>Develop autonomy, self esteem, confidence, and the ability for critical thinking.</p>	

Figure 2

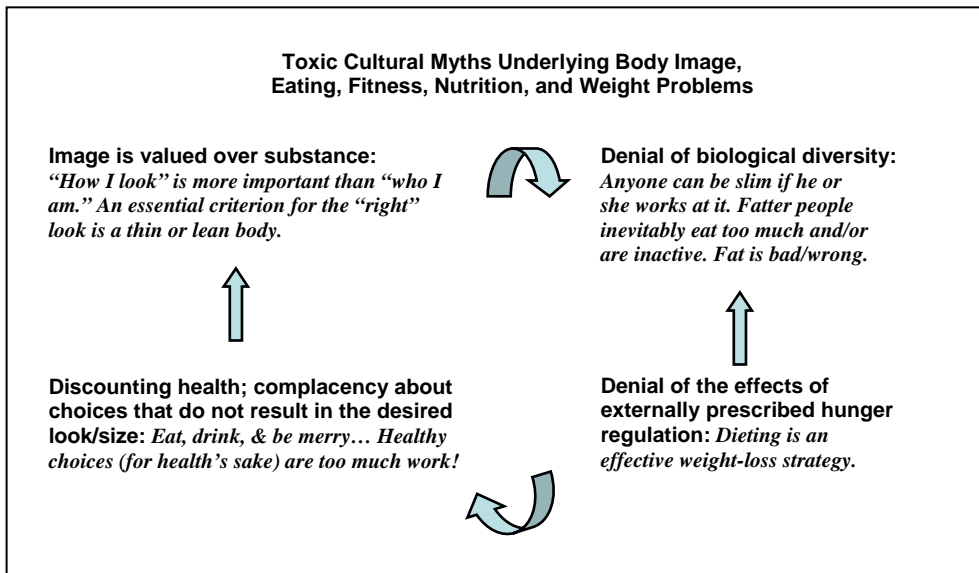


Figure 3

Ten Essential Lessons to Build Body Esteem

To begin, accept what is *not in your control*:

- 1) Accept your body's genetic predisposition. All bodies are wired to be fatter, thinner, or in between. This includes fatter in some places and thinner in others. Regardless of efforts to change it, over time your body will fight to maintain or resume the shape it was born to be. You may force your body into sizes and shapes that you prefer, but you can't beat Mother Nature without a tremendous cost.
- 2) Understand that all bodies change developmentally in ways that are simply not in your control through healthy means. You may positively influence changes of puberty, pregnancy and lactation, menopause, and aging by making healthy lifestyle choices, but you will not "control" these changes, no matter how much you try.
- 3) Never "diet." Hunger is an internally regulated drive and demands to be satisfied. If you limit the food needed to satiate hunger completely, it will backfire, triggering preoccupation with food and ultimately an overeating or compulsive eating response. You may lose weight in the short run, but 95% of weight that is lost through dieting is regained, plus added pounds. Dieters who go off their diets only to binge are not "weak willed." They are mammals whose built-in starvation response has kicked in - both physically and psychologically, going after what has been restricted. Scientific evidence has been available on this since the early 1950's, but most people are not aware of the biologically predictable, counterproductive results of "dieting."

Then focus your attention and energy on what is *within your power to achieve*:

- 4) Satisfy hunger completely with plenty of wholesome, nutrient rich foods chosen from the core of the food pyramid - *eat well!* In today's world, surrounded by taste stimulating, cheap, cleverly advertised, readily available, low-nutrient entertainment foods, learning to *feed* your body versus merely "eat" is an essential difference.
- 5) Limit sedentary entertainment. Move aerobically, if possible, on a regular basis. Everyone who is not medically inhibited, regardless of size, can and should develop a reasonable level of fitness and maintain it throughout the life cycle.
- 6) Understand that if you eat well and maintain an active lifestyle over time, your best, natural weight will be revealed. Set a goal to eat well and be active. Don't be swayed by whether or not this makes you thin. Healthy, well fed, active bodies are diverse in size and shape, from fat to thin and everything in between. Don't let anyone tell you otherwise, not even your doctor, who may be caught in unhealthy cultural myths about weight.
- 7) Choose role models that reflect a realistic standard against which you can feel good about yourself. If the "Ugly Duckling" had continued to compare herself to the ducks she'd *still* be miserable, no matter how beautifully she developed.
- 8) Maintain your integrity as a human being. In spite of advertisements seducing you to believe that "image is everything," *Never* forget that how you look is only one part of who you are. Develop a sense of identity based on all the many things you can do, the values you believe in, and the person that you are deep inside.
- 9) Become media savvy. Educate yourself about the hidden power of advertisements. Advertisers spend tons of money on strategies specifically designed to make you feel there is something wrong with you. Why? If they *first* advertise an unrealistic standard of beauty that leaves you feeling deficient by comparison, a product that promises to improve your condition is an easy sale. Don't be "sold" this bill of goods.
- 10) Encourage your friends and co-workers to join you in developing a healthy, realistic body image. Use the collective energy your group would have spent on hating your bodies to make the world a better place. Help the next generation to develop healthy body image attitudes and learn positive lifestyle habits too.

Figure 4

Sample Activity from the *Healthy Body Image Curriculum*

Teaching students about the counterproductive effects of "dieting" for weight loss:

In this lesson students are introduced to the five basic needs for life: food, water, sleep, air and warmth. When considering the need for sleep and fluids, a lively discussion of personal experiences reveals that predictable consequences occur for everyone when these vital needs are not fully satisfied, especially over several days or longer:

1. A gradually increasing preoccupation with and craving for what is rationed
2. An increasing difficulty concentrating on anything else
3. A growing irritability, self centeredness and/or depressed mood.
4. When restraints are lifted, there is a powerful urge to make up for what was missing— to “sleep in” or guzzle liquid. It might take several days of wanting a more than usual amount before balance is restored.

The teacher then poses *"Do you think the same thing would happen if you didn't get enough air to breathe? Let's try it! I think you could all benefit from going on a little 'air diet.' I think you have been breathing entirely too much, and your cheeks are too richly colored or rosy. You know, the latest style is to have a kind of gray or blue tone to your skin, and oxygen is what gives our cheeks that rosy glow. Yes, I think you all would be better looking if you cut back on your oxygen so your face coloring would be more drab. Of course, you will need some air to live. But surely you could cut back. Won't it be worth it to have the "right look?"*

Each student is given a straw to breathe through while plugging their nose until the predictable consequences 1-3 (above) are apparent.* When "cheating" occurs, the teacher may chide students for "not having enough willpower." When students are allowed to "go off" their "diet," they inevitably (and dramatically - as kids are prone to do) "gulp" big mouthfuls of air. This primes them for a meaningful discussion of why weight loss diets are not effective. When satisfaction of any of our basic needs is limited *by external forces or rules*, the results are reliable. Dieting for weight loss promotes obsession and preoccupation with food and compulsive or binge eating when the diet is stopped. Symptoms often continue over time, and increase with increased dieting. Over time, dieters lose touch with their internal hunger regulatory system, and normal eating becomes increasingly difficult. Regained weight, often with added pounds, is a natural and predictable outcome.

*(Precautions should be taken for students with asthma or other lung disorders.)

Kathy Kater is a psychotherapist who has treated body image, eating, fitness, and weight disorders for 27 years. She developed the Healthy Body Image curriculum and a companion book for parents, Real Kids Come in All Sizes: Ten Essential Lessons to Build Your Child's Body Esteem. Her website is: www.bodyimagehealth.org.

Resources

Healthy Body Image: Teaching Kids to Eat and Love Their Bodies Too! Second Edition (2005)
National Eating Disorders Association, Seattle, WA. Originally published 1998. May be ordered from www.bodyimagehealth.org or www.nationaleatingdisorders.org (click on NEDA Store).

Real Kids Come in All Sizes; Ten Essential Lessons to Build Your Child's Body Esteem (2004)
Broadway Books, New York, NY. Available in bookstores or from www.bodyimagehealth.org

