



# Lecture 1: Obesity Definition, Incidence and Contributing Factors



Course: Weight Management and Nutrition in the Lifecycle

Presentation Created by  
Melissa Halas-Liang, MA, RDN, CDE

Copyright © EFS Inc. All Rights Reserved.

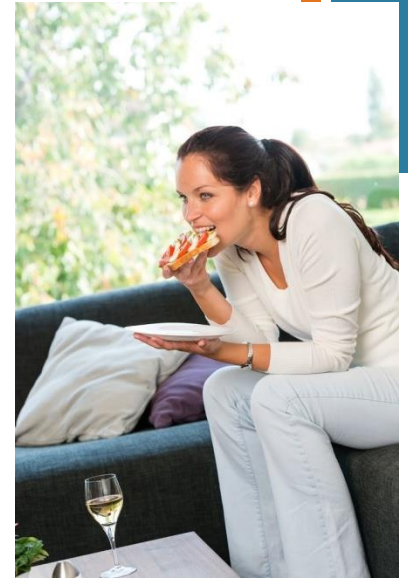
# + Class Objectives

1. Understand what defines obesity.
2. Clearly identify the incidence of obesity and many of its contributing factors.
3. State basic definitions regarding appetite/intake.
4. Understand the effects of different factors on food intake.
5. Be able to state simple techniques which hinder or help with weight management.
6. Identify different eating styles.



# + Outline

- ◆ The How and Why of Obesity
  - ◆ Definition
  - ◆ Incidence
  - ◆ Contributing Factors
- ◆ How Does a Person Become Obese?
  - ◆ Basic Definitions Regarding Appetite/Intake
- ◆ Why Fad Diets Don't Work but lifestyle changes do!



# + Outline

- ◆ Ideas for Successful Weight Management
- ◆ Factors that Influence Food Intake
  - ◆ Volume, Combination of Macronutrients, Timing of Meals, Breakfast, Behaviors, Environment, Lifestyle
- ◆ Styles of Eating: What Kind of Eater Are You?
- ◆ How to Make Your Healthy Eating Habits Work for You
- ◆ The first few weeks will focus on background, simple solutions, and summaries to use with clients or in your own life.
- ◆ **Research will be discussed in Sessions 4 & 5**



# + Introduction

Obesity is a very specialized area in the field of nutrition. It's a complex medical process, and we will get a snapshot of some contributing factors, treatment, and management strategies in this course.

- ◆ Overweight and obesity medical nutrition therapy needs to be provided by a qualified team of health care professionals, including physicians, Registered Dietitian Nutritionists (RD/RDNs used interchangeably), exercise physiologists and Registered Nurses.
- ◆ The information provided here can be used for nutrition counseling within the scope of professional healthcare practices.
- ◆ It can also be utilized as a guide to achieve a healthy weight for you or your family.





# The How and Why of Obesity

# + Obesity

- ◆ Body Mass Index (BMI) is a measure of an adult's weight in relation to his or her height.
  - ◆  $BMI = \text{weight (kg)} / [\text{height (m)}]^2$
- ◆ Obesity is defined as having a very high amount of body fat in relation to lean body mass, or a BMI of 30 or greater.
- ◆ Overweight is defined as having a BMI of 25 or greater.



# + Adult Weight Status



BMI Ranges	
Below 18.5	Underweight
18.5-24.9	Normal
25.0-29.9	Overweight
30.0 and above	Obese



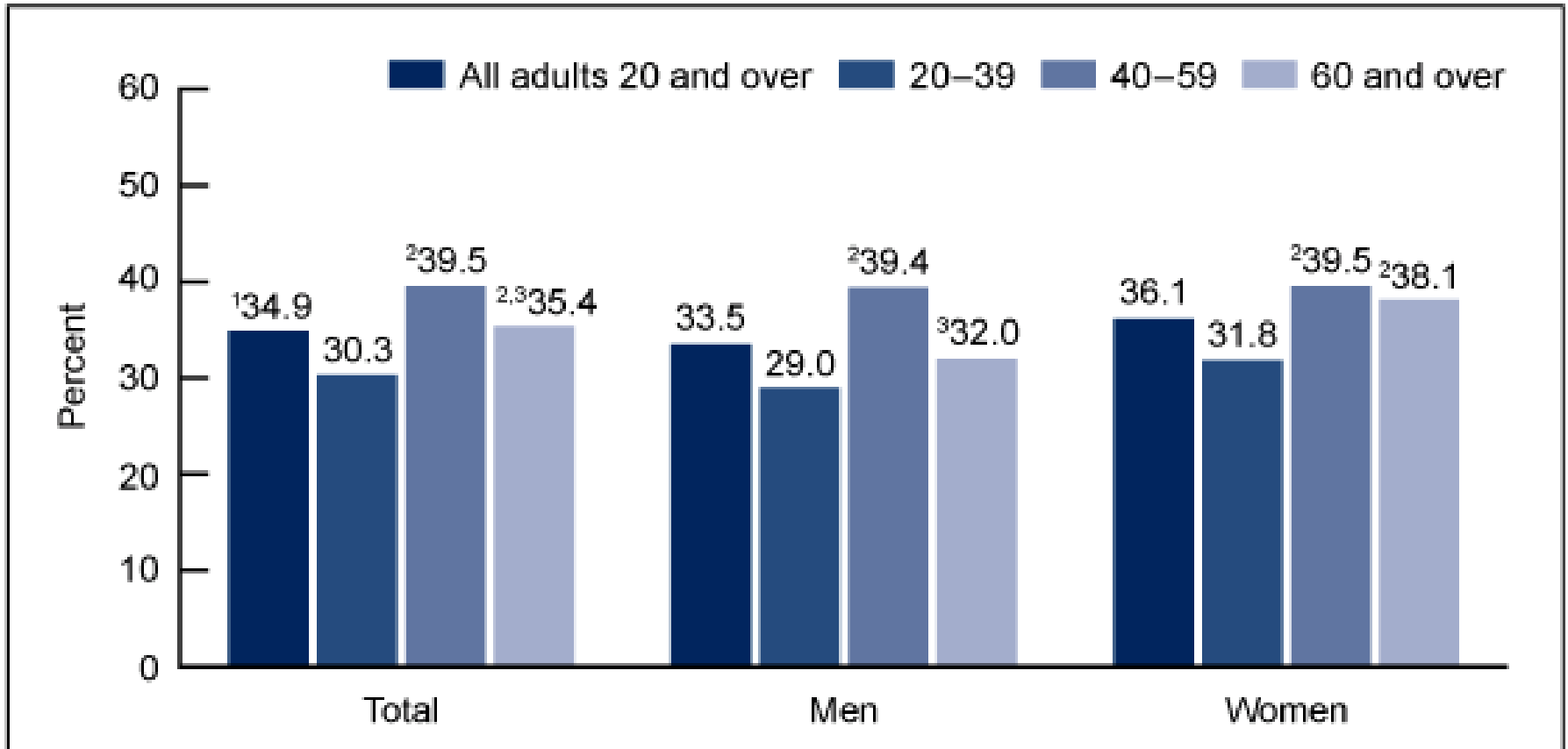
# + To Calculate BMI for Adults

- ◆ Here are some helpful links to calculate BMI
- ◆ <http://www.cdc.gov/nccdphp/dnpa/bmi/index.htm>
- ◆ [http://www.cdc.gov/nccdphp/dnpa/bmi/adult\\_BMI/english\\_bmi\\_calculator/bmi\\_calculator.htm](http://www.cdc.gov/nccdphp/dnpa/bmi/adult_BMI/english_bmi_calculator/bmi_calculator.htm)
- ◆ BMI is not accurate for certain types of people: Body Builders, the frail, pregnant women or the elderly.
- ◆ Why do you think this is?





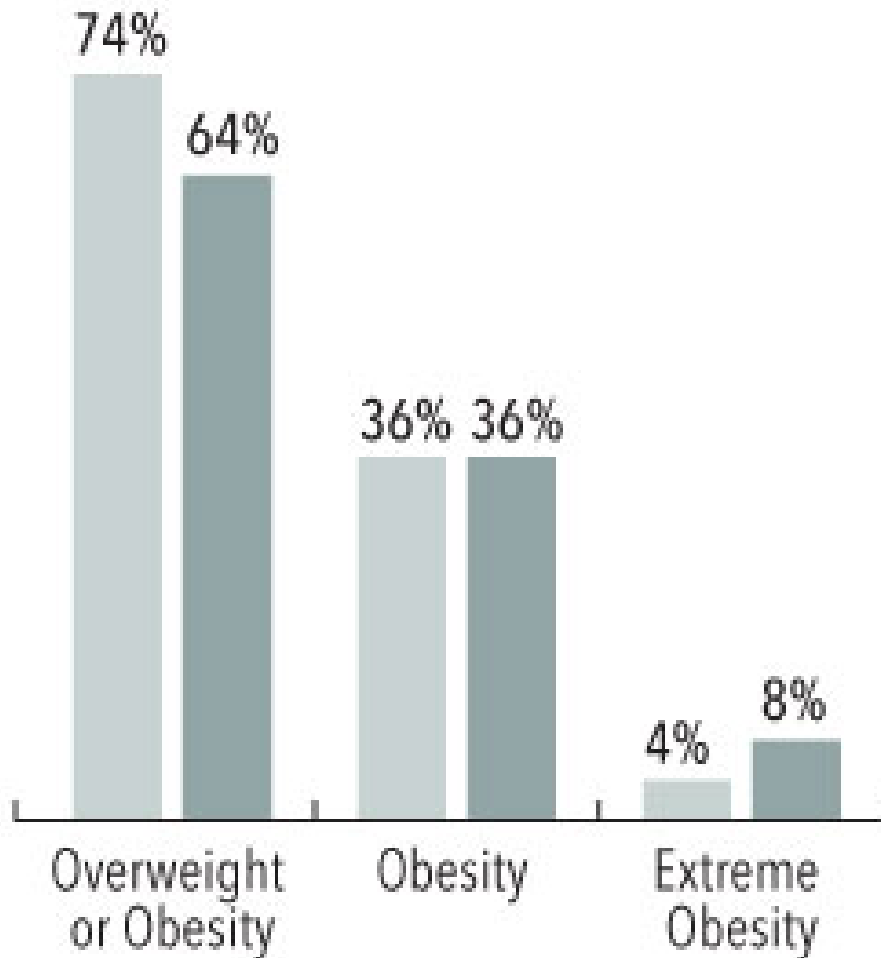
# Prevalence of Obesity 2011-2012



# + Obesity epidemic: 2011-2012

- ◆ 34.9% of US men and women were obese.
  - ◆ Over 78 million U.S adults were obese.
- ◆ 16.9% of U.S. children and adolescents were obese.
  - ◆ Over 12.5 million children and adolescents were obese.

# + Overweight and Obesity among Adults Age 20 and Older, United States, 2009–2010



Estimated Percentage  
by Sex

■ Men

■ Women

Source: NHANES,  
2009–2010

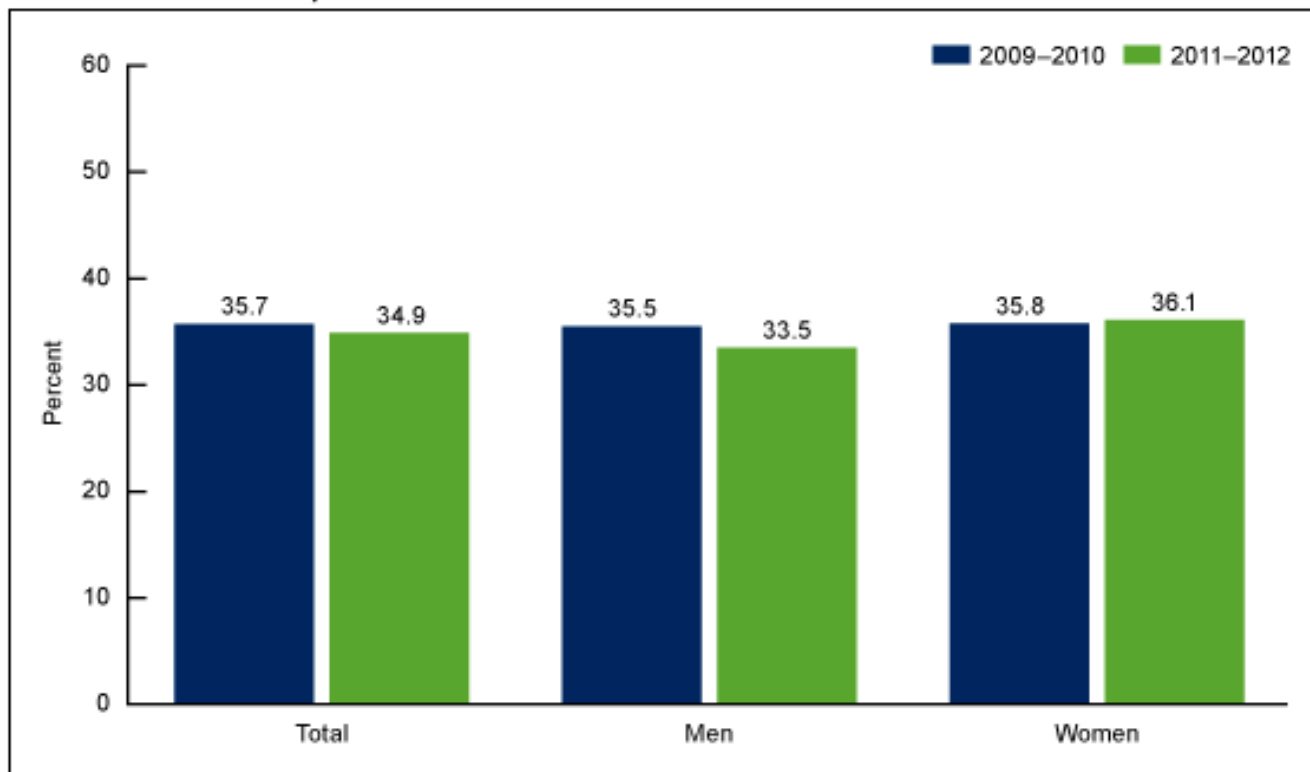
CDC.gov

<http://win.niddk.nih.gov/st/index.htm>

# + Obesity among Adults Age 20 and Older, United States, 2009–2010 and 2011–2012



**Figure 4. Age-adjusted prevalence of obesity, by sex, among adults aged 20 and over: United States, 2009–2010 and 2011–2012**



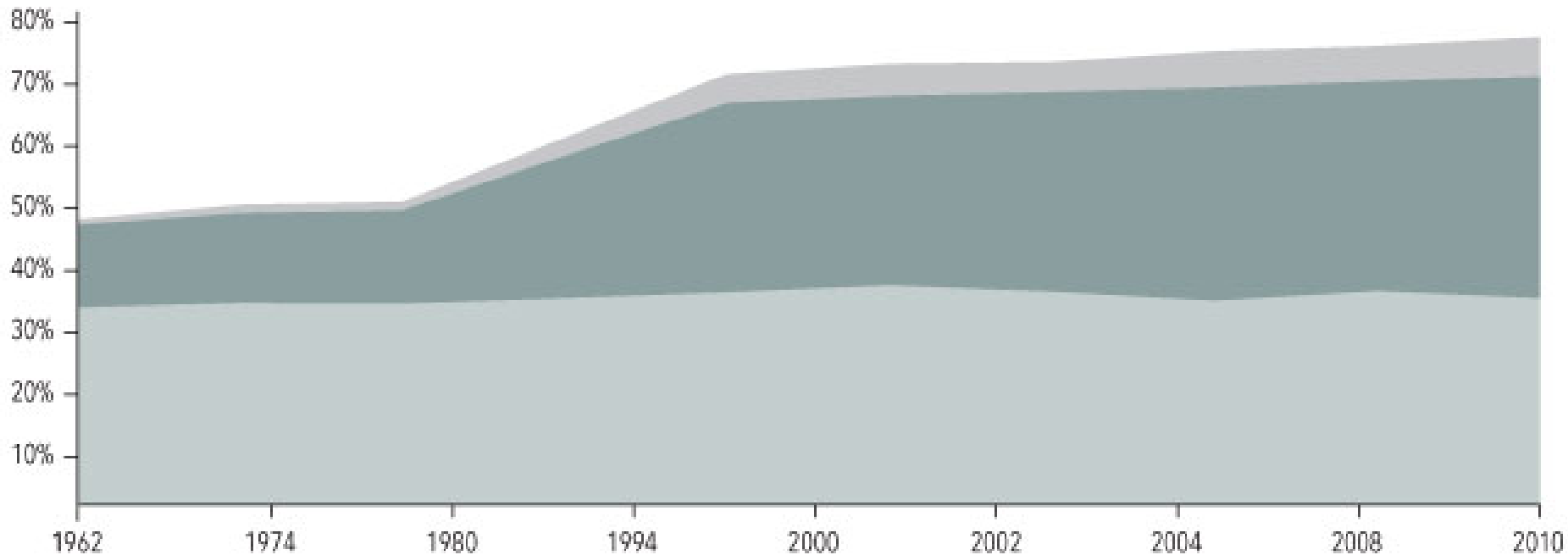
NOTE: Estimates are age-adjusted by the direct method to the 2000 U.S. census population using the age groups 20–39, 40–59, and 60 and over.

SOURCE: CDC/NCHS, National Health and Nutrition Examination Survey, 2009–2010 and 2011–2012.

# + Trends in Overweight and Obesity among Adults, United States, 1962–2010



■ Overweight (bottom)   ■ Obesity (middle)   ■ Extreme obesity (top)



# + Overweight/Obesity Prevalence by State



The Behavioral Risk Factor Surveillance System

## ◆ 1990

- ◆ 10 states had a prevalence of obesity  $<10\%$
- ◆ 0 states had a prevalence of obesity  $\geq 15\%$

## ◆ 1998

- ◆ 0 states had a prevalence of obesity  $<10\%$
- ◆ 7 states had a prevalence of obesity between 20-24%
- ◆ 0 states had a prevalence  $\geq 25\%$

# + Overweight/Obesity Prevalence by State



The Behavioral Risk Factor Surveillance System

## ◆ 2011

- ◆ All states had a prevalence of obesity  $>20\%$
- ◆ 25 states had a prevalence of obesity between 25-30%
- ◆ 12 states had a prevalence of obesity  $\geq 30\%$

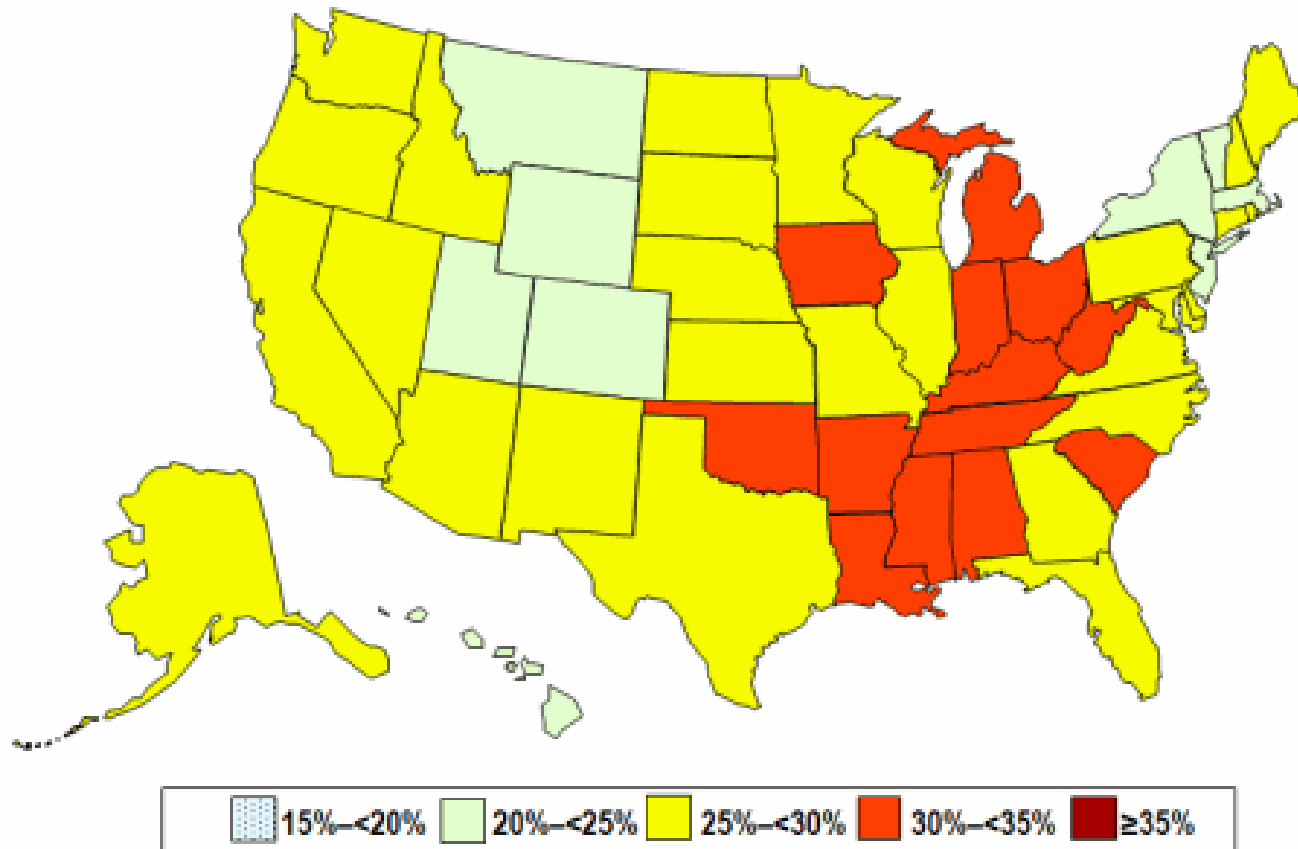
## ◆ 2012

- ◆ All states had a prevalence of obesity  $>20\%$
- ◆ 9 states, plus Washington DC had a prevalence of obesity between 20-25%
- ◆ 13 states had a prevalence of obesity  $\geq 30\%$



# Prevalence\* of Self-Reported Obesity Among U.S. Adults BRFSS, 2012

\*Prevalence reflects BRFSS methodological changes in 2011, and these estimates should not be compared to those before 2011.



<http://www.cdc.gov/obesity/data/adult.html>

# + Obesity Incidence



- ◆ Based on BMI approximately 66% of the adult population is classified as overweight and 31.5% of the US population is obese.
- ◆ The International Obesity Task Force estimated that the prevalence of obesity in the majority of European countries increased between 10-40% in the late 1980s to the late 1990s.
- ◆ <http://www.cdc.gov/nchs/pressroom/07newsreleases/obesity.htm>



# BMI In Children and Adolescents

(further discussed in session 5)



- ◆ BMI ranges are **NOT** used to determine weight status.
- ◆ Percentiles are calculated by a qualified health professional such as a Physician, Pediatric Registered Dietitian Nutritionists or Pediatric Registered Nurse.
- ◆ Keep in mind that some organizations use the terminology...
  - ◆ “at risk for overweight” in place of “overweight”
  - ◆ “overweight” in place of “obese”

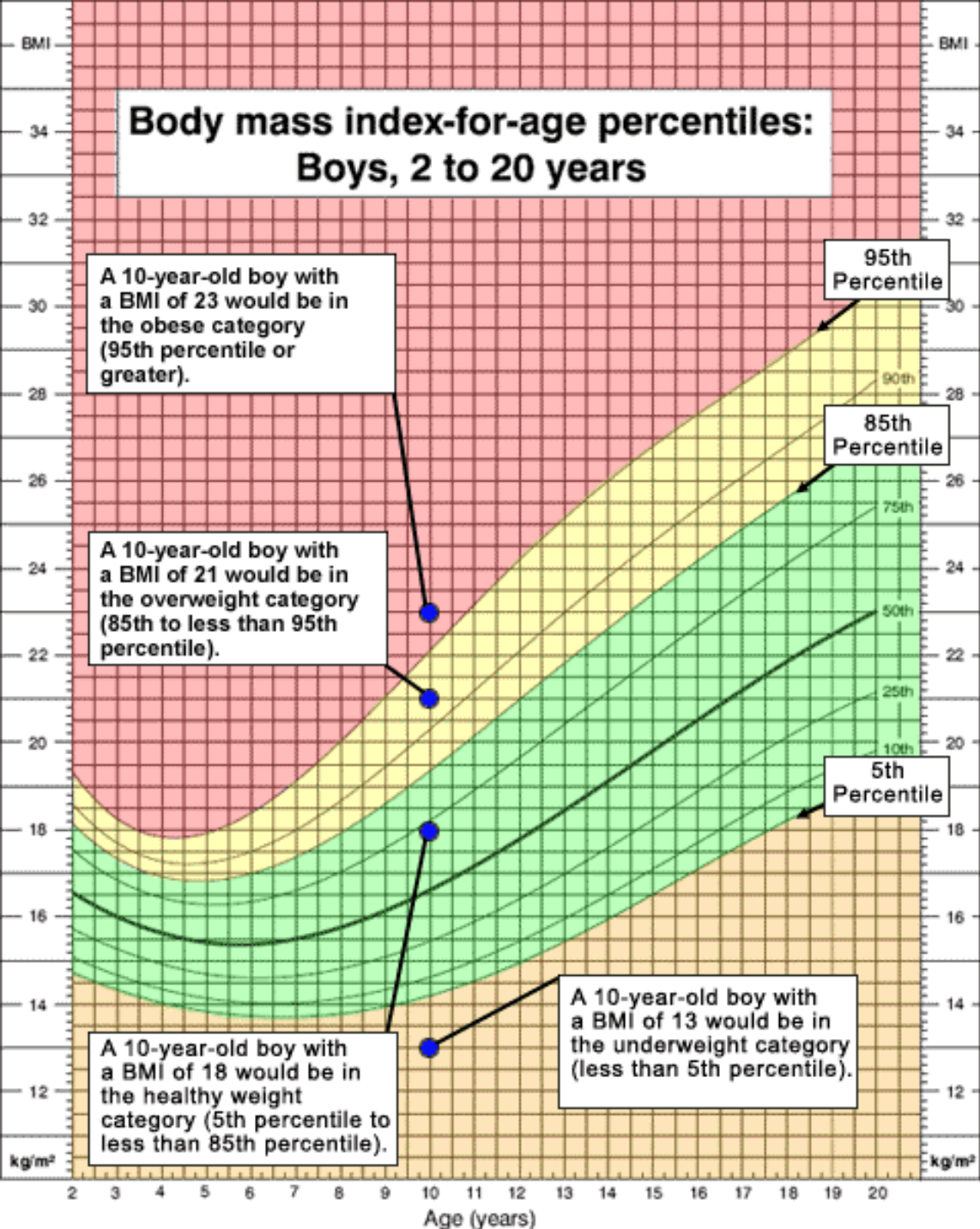
# + Overweight/Obesity in Children & Adolescents

- ◆ BMI for children is classified in percentiles using BMI-for-age growth charts (next slide)

BMI in Children	
At or above 95 <sup>th</sup> percentile	Obese
85 <sup>th</sup> to 95 <sup>th</sup> percentile	Overweight
5 <sup>th</sup> to 85 <sup>th</sup> percentile	Normal
Below 5 <sup>th</sup> percentile	Underweight



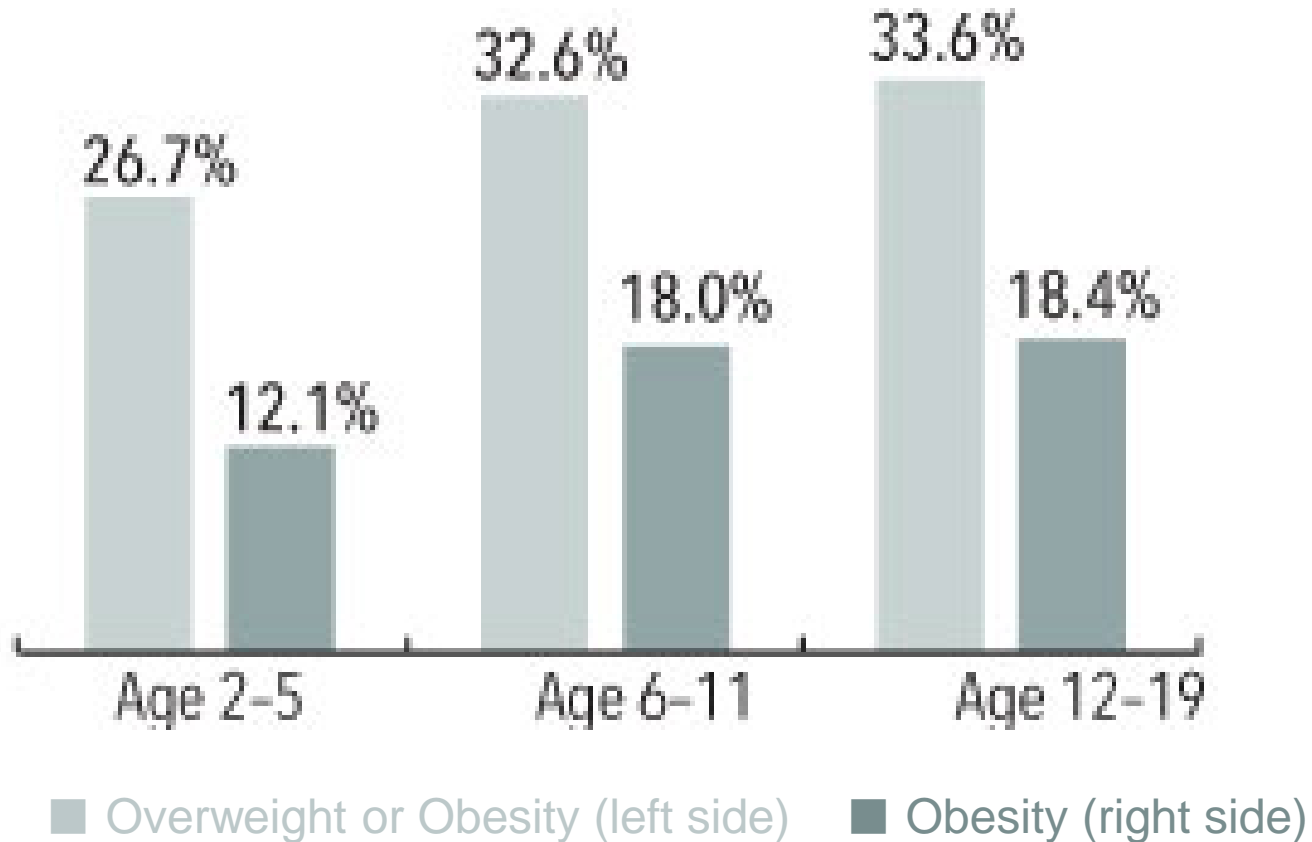
# Sample BMI-for-age percentile chart, for boys ages 2-20 years old



<http://www.cdc.gov/growthcharts/>



# Estimated Percentage of Youth with Overweight or Obesity, United States, 2009–2010





# Contributing Factors of Obesity

The Food and Agricultural Organization & World Health Organization (FAO/WHO) report states:

*“The increasing westernization, urbanization and mechanization occurring in most countries around the world is associated with changes in diets toward one of high fat, high energy foods and a sedentary life style.”*





# Contributing Factors of Obesity



- ◆ Inappropriate dietary and lifestyle habits such as large portion consumption and sedentary activities contribute to America's obesity epidemic.
- ◆ Eating and dietary patterns are tied to social customs, which are likely to remain stagnant.
- ◆ Genetics, family history, and lack of access to healthy foods contribute to obesity.



# + Contributing Factors of Obesity

- ◆ The increase in the prevalence of obesity coincides with an increase in portion sizes, both inside and outside the home.
- ◆ This implies that larger portions *may* play a role in the obesity epidemic.
- ◆ It would be difficult to establish a causal relationship between increasing portion sizes and obesity as there are many contributing factors to obesity. Yet data indicate that portion sizes influence energy intake.
- ◆ Several well-controlled, laboratory-based studies have shown that providing older children and adults with larger food portions can lead to significant increases in caloric intake, and ultimately, excessive weight gain.

# + Food Intake Regulation of Body Weight Management



“Food intake regulation involves a complex integration of hormonal, neuronal, physiologic, and metabolic controls. In humans, such regulation is especially complex because many non-physiological factors may also influence it, and the environment may promote overeating.”



How Does A Person  
Become Obese?

# + Basic Definitions



- Appetite is influenced by hunger, as well as food palatability, social settings and environmental conditions.
  - **Hunger** – a drive to fulfill a physiological need for energy or macronutrients.
  - **Appetite** - reflects the desire to eat at a given point in time.
- Hunger and appetite are usually positively correlated but not always.

# + Basic Definitions

- ◆ **Satiation:** refers to immediate reactions after ingestion which causes inhibition of hunger and appetite, influencing meal termination.
- ◆ **Satiety:** refers to your body's response after energy consumption and processing of the available nutrients from food.
  - ◆ Feeling satiated is the state of being satisfactorily full.
  - ◆ The term *satiety* is used throughout obesity and weight management literature.



# + The Effects of Different Factors on Food Intake

- Energy density (the amount of kcal/gram of a food), food volume (amount of fiber and water), satiation and satiety all influence how much and what you eat.
- Low-energy density, high-volume foods (few kcal/gram) like fruits and vegetables sustain short-term satiety more than high-energy density foods (many kcal/gram) like doughnuts or potato chips.



# + What Does This All Mean?

- ◆ **Nutrient Dense:** Compares nutrients (vitamin and mineral content) to the number of kcals of a food.
  - ◆ Ratio derived by dividing the nutrient composition to its total energy.
  - ◆ When the nutrient needs exceed the energy value, the food is considered to have a favorable nutrient density.
- ◆ **Empty calories**
  - ◆ Poor nutrient content, typically high in sugar and low in other nutrients, such as soda.



# + Examples of Different Nutrient Densities

## ◆ Nutrient dense, high kcal:

- ◆ Nuts (i.e. almonds)
- ◆ Dried fruit (i.e. apricots)
- ◆ Cheese



## ◆ Nutrient dense, low kcal:

- ◆ Fresh vegetables (i.e. broccoli)
- ◆ Fresh fruit (i.e. apples)
- ◆ Legumes



## ◆ Low nutrient density, high kcal:

- ◆ Soda
- ◆ French fries
- ◆ Hot Dogs





# + Nutrient Density

- ◆ Several studies have demonstrated that eating low-energy, nutrient-dense foods maintains satiety while reducing energy intake.
- ◆ Advising clients to eat mostly low-energy, nutrient dense foods can be a successful weight loss strategy.
- ◆ During weight loss or weight management, eating satisfying portions of low-energy, nutrient dense foods can help enhance satiety and control hunger while restricting energy intake.

## + Sensory Specific Satiety (SSS), Dietary Variety and Meal Replacements:

- ◆ SSS means that the longer the exposure to particular foods means you will like them less over time, limiting the variety of foods consumed leads to less intake.
- ◆ Weight loss strategies using meal replacements, limited menus, or food types may help control short term energy intake via SSS.
- ◆ Hyperphagic ("eating a lot") responses may be stimulated by a wider variety of available foods.

# + Why do we overeat?: Other factors to consider

- ◆ Home-cooked food has become less common, and the proportion of food expenditures spent on fast food has tripled since 1970. [1]
- ◆ Commercially prepared food is often created from nutritionally vacant ingredients which can promote overconsumption, including refined flours, added oils, sugar, and flavorings. [2]
- ◆ We snack more than we did in the 1970s. [3]
- ◆ Increasing food variety increases total calorie intake. [4]



**Why Fad Diets Don't  
Work—But Lifestyle  
Changes Do!**

## + What is a Fad Diet?

- ◆ Fad diets are any weight loss program or aid that promises rapid weight loss in a short amount of time.
- ◆ There is generally no plan for long term weight loss or maintenance.
- ◆ Fad diets vary in their food restrictions and the amount of food consumed.
- ◆ Fad diets typically become very popular and then get phased out for the next fad diet.



# + Diet Mentality



- ◆ Dieting can help combat the hyperphagic response to food by limiting the variety available.
  - ◆ Think of the buffet mentality –more choices can lead to more eating
  - ◆ Think of a set menu –limited choices can lead to less eating.
  - ◆ Think of popular diet that restricts a certain food group and therefore limits variety.
    - ◆ This often leads to short term weight loss, until that “forbidden” food group is reintroduced into the diet.

## + Diets That Eliminate or Downplay a Food Group

- ◆ Diets that downplay one food group or have odd restrictions placed on types of foods will lead to quick *short term* weight loss.
- ◆ Unfortunately, keeping off the lost weight is challenging because these diets are monotonous and too restrictive to stick with long term.
  - ◆ Fad diets will be discussed in further detail during Session 3.

## + Diets That Eliminate or Downplay a Food Group

- ◆ One of the reasons people tend to focus on a single food group, like carbs, fat, or protein, is that this philosophy is featured on all the best seller lists for diet books.
  - ◆ What really grabs our attention are titles like *Eat All the Foods You Want but don't mix Carbs and Proteins Together and Get THIN!*
- ◆ Imagine the title: *To Lose Weight and Keep it Off for Life, Cut Back on 100-300 Calories Per Day and Start Exercising.*
  - ◆ I doubt this would be on the NY times Bestseller List!



# + Fad diets



Don't believe the hype!

- <http://www.superkidsnutrition.com/saying-no-to-fad-diets-as-a-family/>
- <http://melissashealthyliving.com/fad-diets-dont-work/>
- <http://www.foodinsight.org/should-you-cleanse-detox-diet>



# Ideas for Successful Weight Management

# + Successful Weight management

- ◆ The best way to maintain weight is to balance “calories in” with “calories out” and choose healthy, balanced meals.
  - ◆ Calories In = Calories Out
- ◆ To lose weight, you need to either burn off extra calories that your body doesn't need or eat less calories than your body needs, *but in a healthy manner.*
- ◆ Controlling portion sizes of the foods we eat is an important way to get the “calories in” side of the equation right.

# + Evaluating Effective Strategies

- ◆ Consumers need to stop, think and evaluate if their strategies are healthy and effective long term goals for successful weight loss and maintenance.



# + Weigh your foods

- To accurately estimate the portion size of different foods, weigh them with a kitchen scale or measure out your food with some measuring spoons and cups.
  - Put a measuring cup in your cereal box and use it as a serving tool.
- Once you get an eye for what a serving looks like on a particular bowl or plate you won't always need to measure.
  - Check out: <http://www.shapeup.org/>





# Academy of Nutrition and Dietetics Offers Tips on Serving Suggestions



This...	...Looks Like This
Medium Potato	The size of a computer mouse
½ Average Bagel	The size of a hockey puck
Cup of Fruit	The size of a baseball
Cup of Lettuce	Four leaves
3 Ounces of Meat	The size of a deck of cards
1 Ounce of Cheese	The size of four dice
2 Tbsp. Peanut Butter	The size of a ping pong ball
1 Ounce of Snack Foods	A large handful

[http://www.eatright.org/kids/article.aspx?id  
&terms=serving%20sizes](http://www.eatright.org/kids/article.aspx?id&terms=serving%20sizes)

# + Examples of Serving Sizes



This...	...Looks Like This
¼ Cup	Golf ball (a serving of dried fruits, beans, peas)
1/3 Cup	2 standard ice cubes
½ Cup	Yo-yo (a serving of fruits or vegetables, cooked grains)
1 Cup	Tennis ball (serving of salad vegetables, milk/yogurt, cereal)
1 Tbsp.	Ping pong ball (serving of peanut butter)
2 Tbsp.	4 dice or a walnut in its shell
¾ Ounce	1 ½ domino blocks
1 Ounce	2 domino block or a matchbook (serving of meat, poultry, fish)
1 ½ Ounces	3 domino blocks (serving of hard cheese)
2 Ounces	4 domino blocks (serving of processed cheese)
3 Ounces	Deck of cards (adult portion of meat or fish)

# + Use Visual Cues



- ◆ What you see influences how much you eat.
  - ◆ If you use smaller, salad-size plates, smaller food servings will fill the plate, appear larger and satisfy your psychological appetite.
- ◆ Visualizing different portion sizes side by side can also help you to control what you eat.





# + Sensory Specific Appetite

- ◆ Long term sensory specific appetite (SSA) may lead to an overconsumption of previously restricted foods.
- ◆ In other words, the “diet mentality” may make you crave forbidden foods and forgo the “diet” out of a desire to eat *everything* forbidden.
- ◆ Or you may follow the diet for 5 days and then overcompensate with forbidden “non-diet” foods.

# + Perceived Variety

- ◆ Increased variety of fruits and vegetables is associated with reduced total energy intake and BMI, variety in this case may help balance SSS and SSA by decreasing diet boredom.
- ◆ Including more fruits and vegetables in your diet provides variety and may help combat the “diet mentality,” forbidden food scenario.
- ◆ One doesn’t feel like they are limited on a set menu – even though they are because most of the foods are limited, except additional fruits and vegetables.
- ◆ They perceive that they are allowed a variety of foods.

# + Eating Rate and Food Intake Regulation

- ◆ Eating slowly allows satiating hormones such as cholecystokinin (CCK) to take effect.
- ◆ Eating bulky foods to prolong gastric emptying may cause you to feel satisfied before you overeat and reduce the total energy intake.
- ◆ Not all data has supported the hypothesis that eating slowly has an independent effect on reducing food intake.
- ◆ However, as an RD with over 10 years of counseling experience, I have seen this can make a difference in many clients. In addition, adding high-volume, low-calorie foods will take longer to eat and helps!

# + Combining Carbs, Protein and Fats

- ◆ Each macronutrient (carb, protein, fat) may promote satiety through different physiologic methods.
- ◆ Therefore, including a balance of each macronutrient may promote the satiety response over a prolonged time.
- ◆ At meal time, balancing macronutrients can provide long lasting energy and satiety.

# + Philosophy That Works : Variety/Balance/Moderation



- ◆ Variety: Consume a variety of foods
  - ◆ For good health be sure to include a variety of colors of fruits and veggies.
- ◆ Balance: do not overeat any single type of food
  - ◆ Balance your meals in terms of macro and micro nutrient content.
- ◆ Moderation: control portion size
  - ◆ Moderate intake of each food—try eating 90% healthy, 10% indulgence and watch portion sizes.

# + Advice from the Academy of Nutrition & Dietetics



- ◆ Be realistic—make small changes
- ◆ Be adventurous—try new foods
- ◆ Be flexible—balance sweets and fatty foods with physical activities
- ◆ Be sensible—watch portions
- ◆ Be active daily
- ◆ Read labels for portion sizes

# + Alcohol Inhibitions



- ◆ Alcohol is associated with higher eating rates, prolonged meal duration, and delayed increases in satiation.
- ◆ Binge drinking may be associated with **central** adiposity in women and men.
- ◆ Drinking patterns may affect the distribution of body fat, an important CHD risk factor.

# + Adults Who Eat Breakfast



- ◆ Maintain a healthy weight
- ◆ Eat less later in the day
- ◆ Have a healthier diet overall with more nutrients
- ◆ Tend to have more success at work
- ◆ Miss less work
- ◆ Have better concentration
- ◆ Have more energy
- ◆ Have better moods



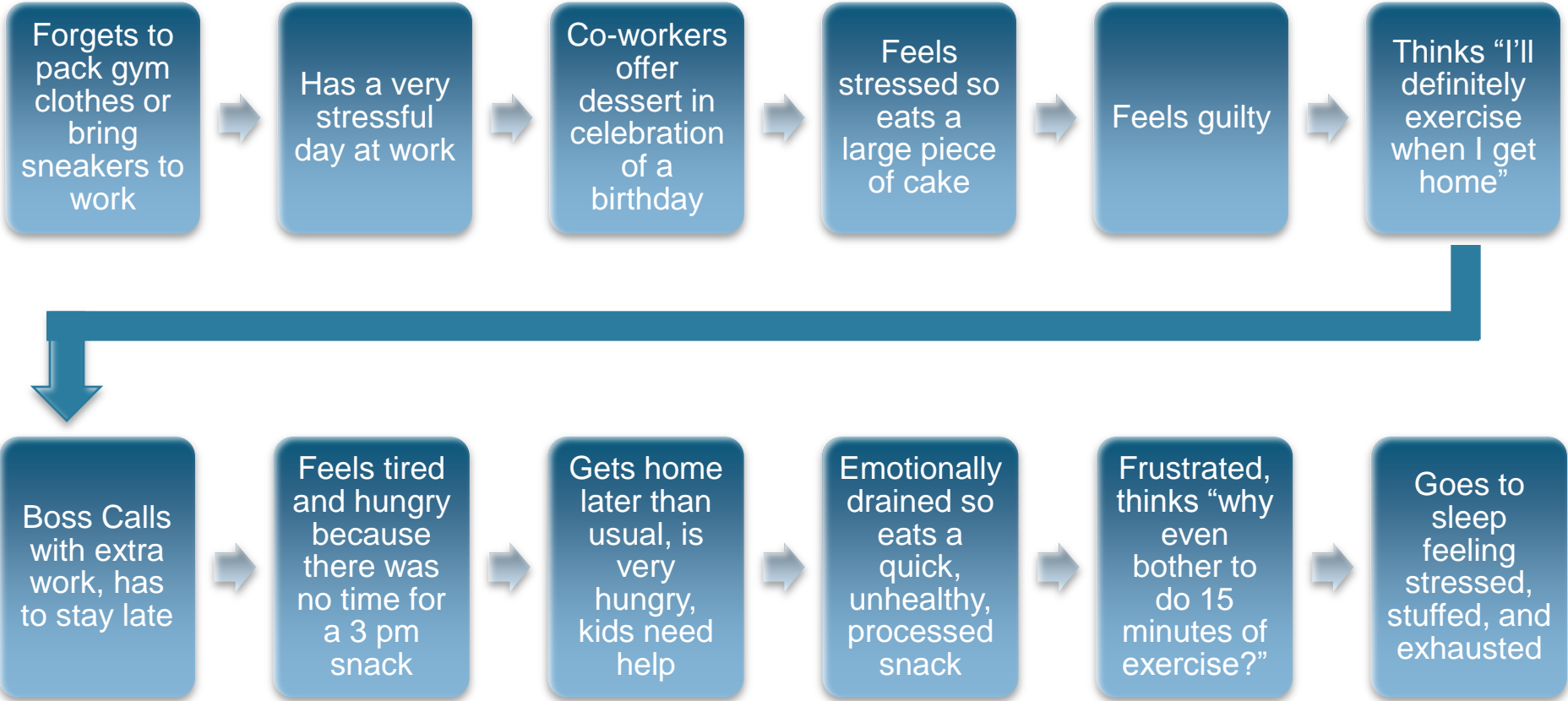
# + Behaviors & Habits



- ◆ Small steps lead to **BIG** changes.
- ◆ One poor choice during the day often leads to a pattern of poor choices later on.
- ◆ Encourage clients to stop, take a step back and evaluate choices.
- ◆ Planning is an integral part of a healthy diet.
- ◆ Tips on Planning Healthy Family Meals can be found at:
  - ◆ [www.cfs.purdue.edu/CFF/promotingfamilymeals/links.html](http://www.cfs.purdue.edu/CFF/promotingfamilymeals/links.html)
  - ◆ <http://mealmakeovermoms.com/kitchen/>
  - ◆ [www.superkidsnutrition.com](http://www.superkidsnutrition.com)



# Day in the Life of a Dieter that Didn't Plan



# + Where Can the Chain be Broken?

- ◆ Put sneakers in a bag and place them in the car the night before.
- ◆ Put fruit out on the desk for a snack so it's visible and won't be forgotten.
- ◆ Ask the person serving cake for a half portion, or ask a couple of co-workers if anyone is willing to split the cake.
- ◆ Have pre-washed crunchy veggies in the front of the refrigerator to snack on when cooking for family.
- ◆ ***What are a few more suggestions to break the chain?***

# + Evaluate



- ◆ Pre-plan your meals and snacks
  - ◆ Ask yourself or your clients: how often are you pre-planning?
    - ◆ Quantify it: how many lunches and dinners per week are you pre-planning?
- ◆ Eat 3 meals at fairly consistent times and a snack OR 5-6 *small* meals
  - ◆ Self evaluate: how often is this practiced and what works for you?
- ◆ Keep meals within 4-5 hours of each other
  - ◆ How many days a week is this consistently practiced?

# + Evaluate

- ◆ Take time to eat and be mindful of the foods that nourish the body.
  - ◆ Check out [www.TCME.org](http://www.TCME.org) for more on mindful eating
- ◆ Try recording your dietary intake for about 3-7 consecutive days, at least once a month. Take note of any patterns.
- ◆ If trimming down on calories, try creating a small deficit of only 100 to 150 calories a day.
- ◆ Lose no more than 1 pound per week for long term results\*

\*In some cases more weight loss is advisable for medical reasons, so speak to your healthcare provider

# + Mindful Eating



- ◆ Leave  $\frac{1}{4}$  to  $\frac{1}{3}$  of your stomach empty
  - ◆ It makes digestion easier
  - ◆ It gives you more energy
- ◆ Sit quietly for a few minutes after your meal
  - ◆ Pay attention to how you feel after your meal
  - ◆ Be thankful for the food that nourished your body and mind



# + Weight Loss Strategies

- ◆ **Aim for Effective and Gradual Weight Loss:** Weight loss of only 5 to 15% of your body weight over 6 months or longer can do much to improve your health.
- ◆ For example, if you weigh 200 pounds, losing 5 percent of your body weight means losing 10 pounds. Losing 15 percent of your body weight means losing 30 pounds.
- ◆ **A safe rate of weight loss is 1/2 to 2 pounds per week.**



# + Weight Loss –Keys to Success

- Regularly weighing in. If you start to move up slightly on the scale, you'll take a look to see if you're falling back to old habits like late night snacking, extra coffee creamer, etc.
- Stay consistent with a balanced approach. A vacation with lots of splurges and weight gain can have lasting consequences.
- You'll need to eat a little less as you age, your metabolism does slow down and you'll have less lean body mass. It's essential to include resistance training especially as you age, to boost your metabolism.
- Watch out when you dine out! The average meal out has around 1300 calories. Visit [www.healthydiningfinder.com](http://www.healthydiningfinder.com) to plan your meals before eating out.



# + Weight Loss –Keys to Success (weight control is mostly impacted by how many calories you eat)

- Eat more real foods! Whole foods like whole corn vs corn chips, or apples vs apple juice have more fiber. You'll feel fuller and increase satiety.
- Not all calories are created equal. For example, nuts take a little work to digest vs potato chips for the same amount of calories. So you're expending calories with more real food.
- Also there's some evidence that extra calories from added sugars like sucrose and high fructose corn syrup may also prefer to settle in deep-belly fat.
- You can't out exercise poor nutrition. Most people overestimate the amount of calories they burn while working out.



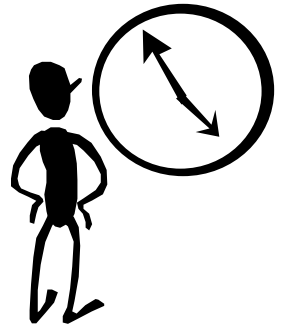
# Factors That Influence Food Intake

# + Factors that Influence Eating



Identify “feelings of hunger”

- ◆ Differentiate between actual hunger and other triggers to eat, such as:
  - ◆ Stress, anger, loneliness, happiness
  - ◆ Boredom
  - ◆ Time of day
  - ◆ Just because the food is there
- ◆ Ask yourself if you are really hungry or if you need a drink of water.
  - ◆ Studies show that most people mistake hunger for thirst.



# + Factors that Influence Obesity/Overweight



## ◆ Habits:

- ◆ Eating because of boredom or stress, or while watching TV, surfing the net or checking email.
- ◆ Mindless eating.
- ◆ Getting together socially with food and alcohol instead of meeting for a bike ride, walk or hike.
- ◆ Choosing activities with less movement like going to movies, taking elevators, valet parking.

◆ **Genes:** Overweight and obesity tend to run in families.

◆ **Illness:** Some diseases can lead to weight gain or obesity. These include hypothyroidism, Cushing's syndrome, and depression.

- ◆ Make sure to get regular medical check ups and discuss concerns with your health care provider.

# + Factors that Influence Obesity/Overweight

- ◆ **Medicine:** Some medicines can cause weight gain.
  - ◆ Be sure to know the side effects of any medication you or your client is taking, and encourage them to learn more from their health care provider.
- ◆ **Environment:** Busy schedules, travel time, fast foods, working more, less time for physical activity.
- ◆ **Emotions:** Many people eat when they are bored, depressed, angry, stressed or need to unwind, even when they are not hungry.



# + Food Pressure Factor

Healthy Choices

Should eat healthy foods  
Should watch portion size  
Should cook more  
Should eat only when hungry

Food Availability  
Abundance, Snacking,  
Convenience Stores,  
Vending Machines,  
Processed foods,  
Cooking less, Large portions,  
Eating out more,  
Fast-food choice,  
Value meals, Food courts,  
All you can eat Buffets

Unhealthy Environment

Robert Kushner

# + The Weight of Technology Factor

Healthy Choices

Should walk up stairs  
Should park further away  
Should be more active  
Should do less passive activities

Elevators, Escalators,  
Telephones, Delivery services,  
Remote controls,  
Cars, buses, trains,  
Computers, emails,  
Drive-thru windows,  
Television, Video games  
VCRs, DVDs

Unhealthy Environment

Robert Kushner

# + Time Pressure Factor

Healthy Choices

Should make time to exercise  
Should make time to eat healthier  
Should make time to cook  
Should make time to relax

Juggling schedules  
Living the hurried life  
Always rushing  
Less leisure time  
Family stresses  
Overdoing it  
Not living in the moment  
No time for family  
No time for self

Unhealthy Environment

Robert Kushner



# + Snacking Factor

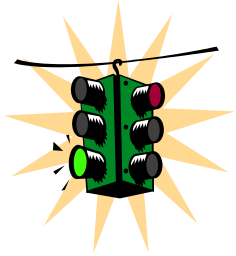
- ◆ Snacking can help control your appetite so you don't overeat at lunch or dinner, increase your daily servings of fruit, vegetables, and whole grains by incorporating them into snacks.
  - ◆ Prevent weight gain with smaller portion sizes.
- ◆ Plan ahead and pack a snack.
  - ◆ Have a nutritious snack handy when the hunger urge strikes.
- ◆ Tips:
  - ◆ Keep an assortment of snacks in plastic zipper bags and pre-measured containers to make your homemade snack portable.
  - ◆ ***Most processed snacks are oversized and high in fats, sugar and salt –choose whole foods!***



# + Factors that Influence Change

- ◆ Make goals **measurable, realistic and attainable**. Teach clients and yourself to be rewarded when goals are met.
- ◆ **Use a STOP, START, & KEEP Goal sheet**
  - ◆ This incorporates a habit that needs to be eliminated (Stop), something healthy that needs to begin (Start) and something already being done (Keep).
  - ◆ It's a simple step you can easily take if you're overwhelmed with a lot of new information.
- ◆ Write your goals down and keep in a place where you will be reminded





**Start:**

---



**Stop:**

---

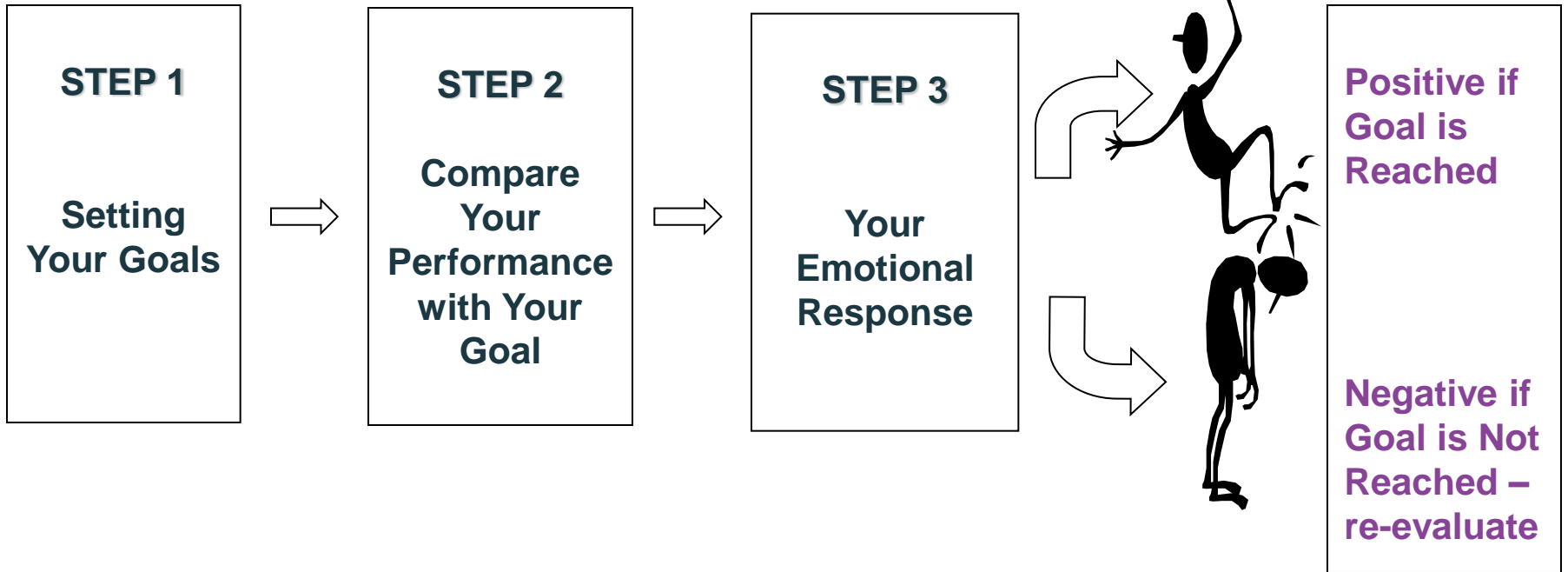


**Keep:**

---



# Measuring Up to Your Own Goals



## Remember:

- 1) Keep your goals realistic
- 2) Keep your goals measurable
- 3) Make your goals attainable



Styles of Eating: What Kind of  
“Eater” are you?

# + Attuned Eater

- ◆ Someone who eats when they're hungry and stops eating when they're satisfied.
- ◆ Seldom do you eat when you're not hungry.
- ◆ You usually maintain your “natural” weight and don't worry too much about weight loss or maintenance.
- ◆ You occasionally eat emotionally, but when you do, you do not eat again until you are hungry.



## + Attuned Eater

- ◆ You don't deprive yourself of pleasurable foods, but consider nutrition when choosing foods.
- ◆ *Advice:* There is always room for improvement.
  - ◆ Keep a food record and assess if you are meeting your daily recommended servings from each food group.
  - ◆ Adjust your diet as needed.





## Misguided Eater

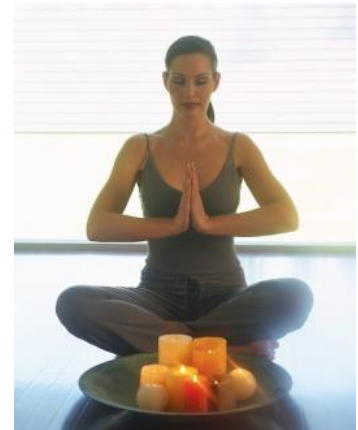
- ◆ You don't diet often, but when you do it is to drop a few pounds.
- ◆ Occasionally you eat emotionally.
- ◆ You are concerned about nutrition, but are subject to believing current dietary propaganda.
- ◆ You often ignore signals of hunger or satiety from your body.
  - ◆ Example: if food is present, you will eat when you are not even hungry, or the food will make you realize that you are hungry.
- ◆ You often overeat. Your excuse: I was always told to "clean my plate!"





# + Misguided Eater

- ◆ You are subject to pre-packaged and portioned meals and will not cue in to your hunger if the meal did not provide enough nourishment.
- ◆ *Advice:* Practice listening to your body's signals.
  - ◆ Slow down, figure out if you are hungry or not.
  - ◆ Eat when you are hungry; stop eating when you are satisfied (most of the time).



# + Deprivation-Driven Eater

- ◆ You have been on a restrictive nutritional or weight-loss diet before.
  - ◆ As a result of the deprivation, you have feelings of being out of control around food or thoughts of food.
- ◆ You label foods as either “good” or “bad.”
  - ◆ As a result of this thinking, you often don’t listen to your body’s cues of being hungry or full.
  - ◆ You need an external structure to help you know when you should or should not eat.
- ◆ You may find it difficult to be relaxed around food or to walk away from food simply because you are satisfied.



# + Deprivation-Driven Eater



- ◆ You are fearful that after a meal you will not be satisfied and therefore will have trouble ending your meal.
- ◆ You have idealistic thoughts about the “right” way to eat.
- ◆ This often leads to unhealthy food plans because of a lack of sufficient food.

# + Deprivation-Driven Eater



- ◆ *Advice:* Stop dieting! You can manage your weight more effectively if you are not promoting a diet mentality.
  - ◆ Do not buy “diet” foods, which encourage obsessive behavior and lead to deprivation.
  - ◆ Calorie counting is not for you.
- ◆ Throw out your scale; weighing yourself repeatedly does more harm than good.
- ◆ Legalize all foods! Think like an attuned eater.
  - ◆ Eat when you are hungry, stop when you are satisfied.
- ◆ Carry food with you that you enjoy so that you don't feel deprived.

# + Emotional Eater

- ◆ You use food as a means to satisfy emotional needs, without regard to any feelings of hunger.
- ◆ You react to emotions by overeating or under eating.
  - ◆ As a result your weight fluctuates.
- ◆ You may or may not be in tune with feelings of hunger or satiety.
  - ◆ You will eat without considering the messages your body is sending.
- ◆ You use food as a coping instrument to gain an emotional sanctuary or relief from feelings that seem uncontrollable, such as anger, sadness, or happiness.
  - ◆ It can lead to overeating, even to the point of pain.



# + Emotional Eater

- ◆ *Advice:* Use a food journal and a hunger scale to help you differentiate emotional “hunger” from physical hunger.
- ◆ Document your emotions and eating practices and listen to your body’s signals for hunger.
- ◆ Eat when you are hungry, stop when you are satisfied.
- ◆ You may benefit by speaking to a trained Registered Dietitian Nutritionist or therapist with a specialty in emotional eating issues.

# + Other Eating Personalities

- ◆ **Volume Eaters-** Prefer quantity
  - ◆ *Advice:* Fill half your plate with veggies and divide the rest between lean protein and whole grains (similar to MyPlate).
  - ◆ Eat high volume low calorie foods like watermelon.
  - ◆ Check out the book *The Volumetrics Weight-Control Plan: Feel Full on Fewer Calories* by [Barbara J. Rolls, Robert A. Barnett](#)
- ◆ **Special Occasion Victim–** Entertaining or traveling often provides too much temptation for highly processed foods and alcohol.
  - ◆ *Advice:* Pack healthy snacks when you travel. Stop at a grocery store or convenience store (for fresh fruit etc.) to keep in your room.
  - ◆ Have a plan for your alcoholic beverage consumption and stick to it!

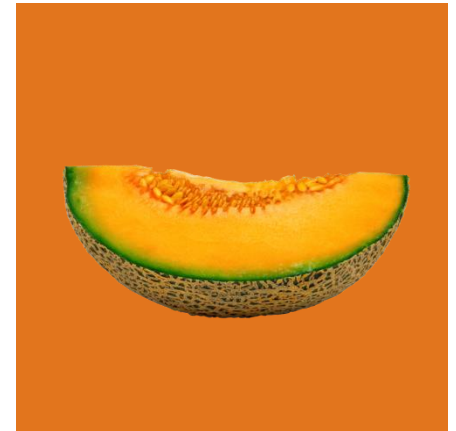


## + Other Eating Personalities

- ◆ **Must Have-See it and eat it (The see-food diet):** Everyone is having dessert, and so must you.
- ◆ *Advice:* Just have a taste or share with your friends!
- ◆ Don't waste calories on things you could have anytime or that aren't all that tasty!
- ◆ Remember holiday foods or party foods are usually available all year round.



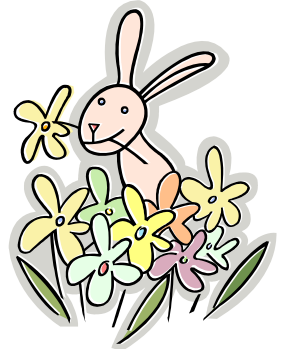




**How to Make Your  
Healthy Eating Habits  
Work for You!**

# + Where's that Energizer Bunny?

- ◆ Surveys show women often complain of fatigue due to hectic demands of careers and family care.
- ◆ Research also shows that men will lose weight more rapidly than women because of their higher muscle mass.
  - ◆ Muscle is more metabolically active and thus burns more calories
- ◆ Keeping your energy level up while maintaining or losing weight can be challenging.
- ◆ Clients often have all of these concerns.



# + Increasing Calorie Expenditure



- ◆ Carve out time to exercise everyday, even if it's a 15 minute walk around the block.
- ◆ Try to plan your exercise schedule, and stick to that routine.
- ◆ Look for ways to be more active during the day.
  - ◆ Deliver messages to employees versus emailing.
- ◆ Pack lunch and eat it outside, weather permitting—so you have to walk a little farther.
- ◆ Walk places instead of driving.
- ◆ Park your car farther away.
- ◆ Get up and stretch every hour to get your blood circulating.

# + Keeping Energy Up When Cutting Back on Calories



- ◆ It's important not to skimp too low on calories as it can lower your energy levels.
- ◆ While running a successful weight loss program I found each person had their own success strategies.
- ◆ However, some frequently used strategies were more successful than others.

# + Keeping Energy Up when Cutting Back on Calories

- ◆ Eat 3 small meals and include a healthy snack to keep your energy going.
- ◆ Don't skip meals.
- ◆ Maintain a consistent energy flow by eating evenly spaced meals and snacks throughout the day.
- ◆ Avoid high-calorie, high-fat meals, which will make you feel sluggish.
- ◆ Limit caffeine to no more than the equivalent of 1-2 filtered 8 oz. cups per day
  - ◆ Higher amounts of caffeine can exacerbate stress and fatigue



# + Keeping Up Energy When Cutting Back on Calories:

- ◆ Aim for 8 hours of sleep per night
  - ◆ Lack of sleep is correlated with obesity
  - ◆ Try to keep regular bedtimes and waking times
- ◆ During the winter, get exposure to sunlight or other bright light.
  - ◆ It helps regulate sleep and wake cycles.
- ◆ Get Moving! Aim for exercise each day:  
<http://www.health.gov/dietaryguidelines/dga2000/document/aim.htm>

## + Keeping Up Energy When Cutting Back on Calories:

- ◆ Being active aids your quality of sleep.
- ◆ Physical activity elevates certain hormones and raises the body's metabolism, which boosts your energy level.
- ◆ Evaluate what's keeping you from getting enough sleep: see if you're overextending yourself, rushing too much, or watching too much TV.
- ◆ Have yourself or your client write out a START, STOP, & KEEP for the week.



**Thank You!**