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States and most Westernized countries. If you are overweight, you are hardly alone, as you can see by looking around you. About two-thirds of Americans are overweight and the statistics climb by the year. Even children now are heavier than they have ever been – and this is happening during a time in our history when the thin look continues to be defined as the ideal (although this is gradually changing). Type II diabetes and hypertension (or high blood pressure) are two diseases associated with obesity, and the rates of these diseases have been increasing steadily over the years. Obesity is also linked to heart disease, stroke, and certain cancers.

The causes of obesity are easy to identify. We eat more calories than we burn off, and the excess calories are stored as body fat. In the 1960's the average person consumed about 3,100 calories per day. And now that number has increased to 3,700 calories per day. We have easy access to fast food and sugary sodas, and restaurants have found that their sales increase when they offer excessively large servings. We eat more processed foods and fewer natural or whole foods, and this is mostly due to convenience and low prices. We spend more time these days in front of the mobile device, computer or television set, and we drive to where we need to go rather than walking or biking. Our jobs are increasingly sedentary and don't involve as much physical labor as in the past. We pay a price for our present-day conveniences.

Getting the weight off involves more than going on a diet, although a calorie-restricted diet is essential for

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Patricia uses her excellent client rapport and clinical expertise to help clients overcome their struggles. Her professional counseling experience includes work with children, adolescents, couples, individuals and families with a wide range of clinical issues. She utilizes a variety of approaches including: psychodynamic, family systems, cognitive behavioral and solution-focused theoretical frameworks to match her client needs.

Patricia's educational background includes a Master of Science in Counseling Psychology with an emphasis in marital and family therapy from California Lutheran University and a Bachelor of Science in Organizational Leadership from Biola University. In addition to holding memberships in several honor societies and professional organizations, Patricia obtains ongoing psychological training, specializations and certifications.

losing excess pounds. To lose weight it is necessary to decrease caloric intake enough to cause an energy deficit, but it is important to avoid the binge eating that can result from feelings of food deprivation. Filling up on fiber with salads and lots of vegetables and some fruit, as well as drinking a lot of water and eating a number of low-calorie snacks throughout the day, can help in avoiding a deprived feeling. Make sure that your fat intake comprises no more than 30% of all the calories you consume in a day. In addition, making exercise a regular part of one's lifestyle is essential for successful weight management. However, even with a good diet and exercise, maintaining weight loss over time can be a challenge. Most people who lose weight gain it back again because they haven't come to terms with the emotional factors that were associated with the weight gain in the first place.

A number of psychological factors can affect our ability to maintain our weight at a healthy level over time. For example,

- When losing weight or maintaining weight loss, it is helpful to learn how to *think positively* by challenging negative beliefs.
- There are a number of strategies to use for *coping with difficult emotions and stress* rather than relying on food for emotional soothing.
- Maintaining your *motivation* over time to stay at a healthy weight is a key to long-term success.
- Successful maintenance of weight loss depends on improving your *body image*.
- Achieving *satisfaction in our daily lives* is an important component of maintaining weight loss, and this involves acquiring good living skills. These skills include the ability to assert yourself and your needs effectively, knowing how to solve everyday problems well, and nurturing supportive relationships with others.

You can work on these issues with the help of a professional therapist, and this increases your chances of keeping the weight off over time. Weight gain and the difficulty of maintaining weight loss are often associated with heredity, experiences in childhood, and family of origin influences. However, there are emotional factors associated with weight problems, and, fortunately, these issues can be addressed in therapy, in a confidential and trusting setting. Let's consider a few of these emotions —

Depression

At the core of most depression is a sense of loss. Depression may result from the loss of a significant person in one's life, from loss of opportunity or status, job loss, financial loss, loss of self-esteem, or the loss of a coherent sense of one's identity.

An overweight person may have a negative view of self and believes that "I am the problem." He or she may feel inadequate, a failure, or unworthy of love or acceptance. This core belief may affect everything in this person's life. This leads to other negative beliefs, such as "nothing will ever work out," or "when something bad happens, I'm the one to blame." This person often takes things personally and is sensitive to criticism. Or this person may assume the role of caregiver with friends and family, and when things don't work out, the feeling of being a failure is intensified.

Food may numb the person against what he or she experiences as a painful existence. Eating, and overeating, can be a small reward that soothes painful depressed feelings. The fatigue that accompanies depression can sometimes be treated with food — although this is a form of self-medication that, over the long run, has dire consequences in terms of health and body weight.

Overeating for emotional soothing can start a cycle in which obesity negatively affects self-esteem, and because self-esteem is low (confirming to the person that they are less attractive and effective in the world than other people) the person eats more. It never seems to stop.

In therapy the overweight person with depression might want to explore ways to improve self-esteem and negative beliefs that perpetuate the cycle of depression and overeating. This negative cycle can be broken and a more positive outlook can lead to learning new ways to take control over one's health.

Note that some people suffering from depression can undereat, and they say that they have no appetite. In this case, healthy nutrition needs to become the focus.

Anxiety

Feeling uneasy, apprehensive, fearful, or worried describes anxiety. It is brought on by a real or perceived threat to your safety or feeling of well being, along with doubts about your ability to cope with these threats. Anxiety can be helpful if it motivates a person

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to deal effectively with life's challenges. However, anxiety can be disruptive if it lasts too long or is too high or feels overwhelming.

There are several types of anxiety disorders – panic disorder, generalized anxiety disorder, OCD (or Obsessive-Compulsive Disorder), social phobia (or agoraphobia) and other phobias, and PTSD (or Post-Traumatic Stress Disorder).

Some people use eating in order to suppress symptoms of anxiety. They come home at the end of a stressed-out day and hit the kitchen. Eating can break tension and serve as a distraction from difficult tasks. Ongoing stress can build up throughout a day and is then broken with an eating binge. People may realize that they are overeating, but they don't feel they have any other tools for coping with their stress.

The overweight person in therapy can learn to deal with the anxiety that leads to overeating by working on their negative or catastrophizing thoughts. They can learn to observe their own anxiety, what causes it, and how to change the focus of their thoughts. There are a number of relaxation skills a person can learn in therapy to deal with anxiety, including deep breathing, progressive muscle relaxation, imagery, mindfulness, meditation, and new problem-solving skills. Once the anxiety is under control, so can be the overeating.

Anger

Anger is an intense emotion that prompts people to take action when they feel frustrated, rejected, or criticized. It can occur when someone else violates a standard of behavior or code of conduct. When it is the result of thoughts that build up, it can occur more gradually. When it is the result of perceived danger, it is a more like a reflex and can appear quickly. Anger is an emotion that can help us to take positive action (like solving a problem or asserting our rights) – or it can have negative consequences when it leads to aggressive behavior (in which case our safety or interpersonal relationships are jeopardized).

Anger is a problem when a person reacts quickly and intensely to provocations – this person reacts with angry comments, open hostility, or even physical violence. The person feels moved to take some kind of action, and eating may be one way of taking this action. If you are angry at someone who wants you to lose weight, you may eat in front of that person as a way of acting on your anger.

Other people suppress their anger, which in itself can cause a problem since it precludes taking positive action when a more assertive, problem-solving response is called for. In this case, overeating, or even binge eating in secret, is one way of discharging suppressed anger. It can also serve as a form of self-punishment when a person is angry at their own appearance or behavior.

When anger is the underlying problem, the person in therapy can learn a variety of more positive techniques to deal with their angry impulses or suppression of anger. They can understand the triggers to their anger, learn to change their thoughts, and replace the old behavior with more positive action.

Boredom and Loneliness

People can experience boredom when they have too few interests that can focus their attention and they slip into a lifestyle that



has become unchallenging and repetitive. It is often a passing phase, but it can also be a recurring problem.

Loneliness is a feeling that occurs when a person wants more meaningful social interaction and feels unable to achieve it. It may be due to social anxiety, shyness, a lack of social skills, or poor self-confidence. It can happen if a person is in an unsatisfying relationship or when an intimate relationship comes to an end.

Eating can be a behavior that obscures loneliness or boredom. The activity of thinking about what you want to eat, shopping for food, bringing it home, cooking, enjoying the food, and then cleaning up and starting again can be a focus of daily interest. Until the underlying problems of loneliness and boredom are addressed, this pattern of eating can lead to a weight problem.

In therapy, the lonely or bored person can learn to recognize the situation and explore different ways of getting out and developing new friends and interests. Learning to change your beliefs and thought processes are essential tools for dealing with this form of overeating.

THE BACK PAGE

WHAT CAUSES OBESITY?

Research studies have been conducted to find the factors that do and don't contribute to weight gain.

The following have been shown *not to be related* to weight problems –

- 1. Being born overweight
- 2. Poor metabolism
- 3. Love of food
- 4. Lack of nutrition-related knowledge

And the conditions listed below are *linked to obesity* –

- 1. A person's need to make themselves feel better with food.
- 2. A person's need to feel safe excess weight can take away a person's need to deal with social interaction, intimacy, responsibilities, and job demands.

In comparing slender people with those who are overweight, it has been found that people who have had chronic weight problems are more likely to have —

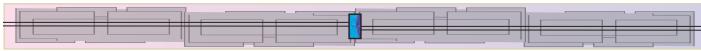
1. Experienced the loss of a parent in early childhood – either through death or divorce

(48% of overweight people vs. 23% of thin people)

- 2. Grown up with a parent who had an alcohol or other substance-related problem (40% vs. 17%)
- 3. Experienced emotional, physical, or sexual abuse (25% vs. 6% for mostly women and sexual abuse, and 29% vs. 14% for mostly men and early physical abuse)
- 4. Suffered from chronic depression (57% vs. 22%)
- 5. Experienced rage (12% vs. 3%)
- 6. Sleep disturbances (46% vs. 23%)
- 7. Relationship dysfunction involving intimacy (54% vs. 16%)
- 8. Felt that fat is protective (25% vs. 0%).

Source: Positive Choice Weight Management Program at Kaiser-Permanente in San Diego.





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