

# thinsanity

7 steps to transform  
your mindset and say  
goodbye to dieting forever

GLENN  
MACKINTOSH

Figure 1

<b>Score</b>	<b>Oct 2017</b>	<b>Nov 2018</b>
Intuitive eating overall	2.52	<b>3.70</b>
Difficulty controlling overeating overall	166	<b>98</b>
Emotional eating	104	<b>50</b>
Socially acceptable circumstances	62	<b>48</b>
Dieting mindset – restrained eating	1.2	<b>0</b>
Dieting mindset – eating concern	1	<b>0</b>
Exercise confidence overall	25	<b>57</b>
Perceived stress	13	<b>9</b>
Depressed and anxious moods	17	<b>11</b>
Self-esteem	25	<b>30</b>
Body satisfaction	23	<b>33</b>
Body uneasiness overall	1.59	<b>0.12</b>
Body image thoughts – negative thoughts	34	<b>3</b>
Body image thoughts – positive thoughts	11	<b>45</b>

Diagram 1

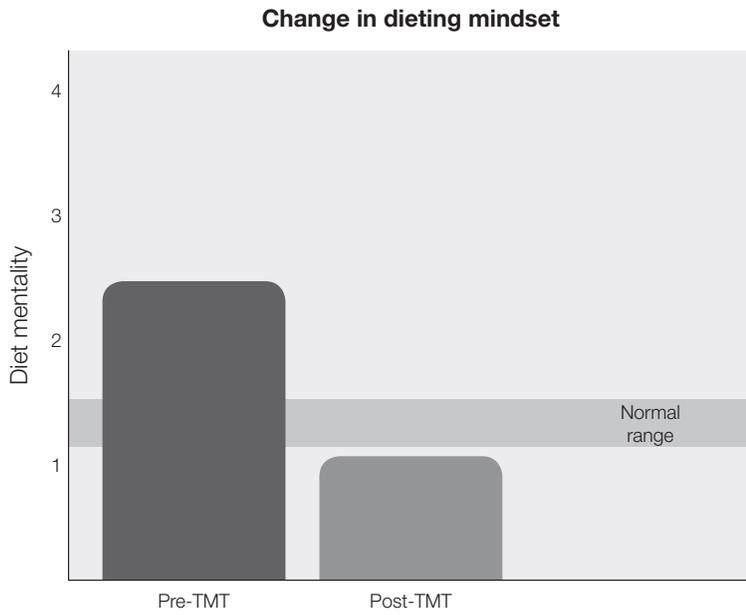


Diagram 2

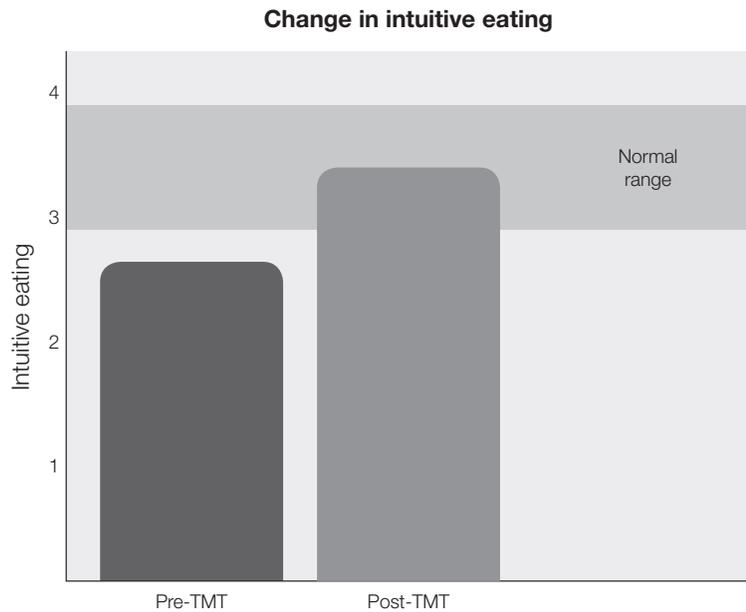


Diagram 3

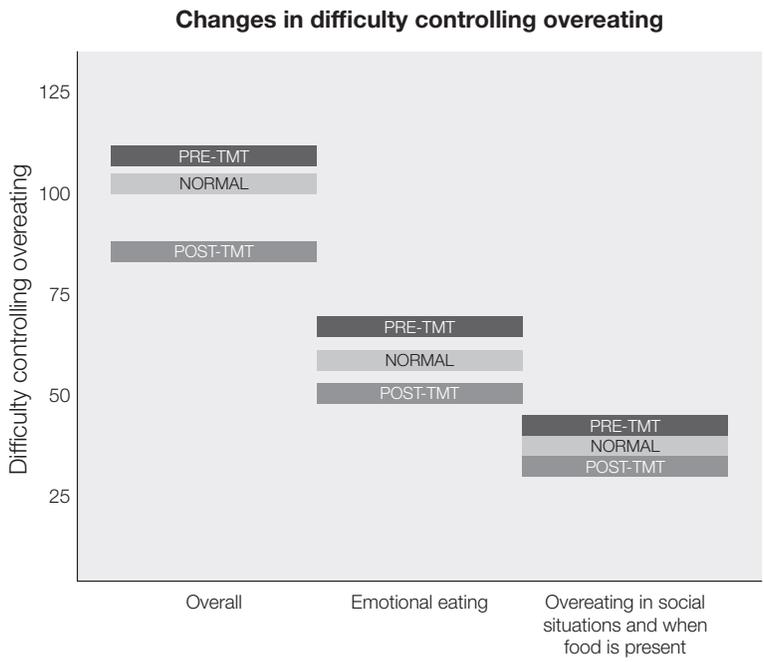


Diagram 4

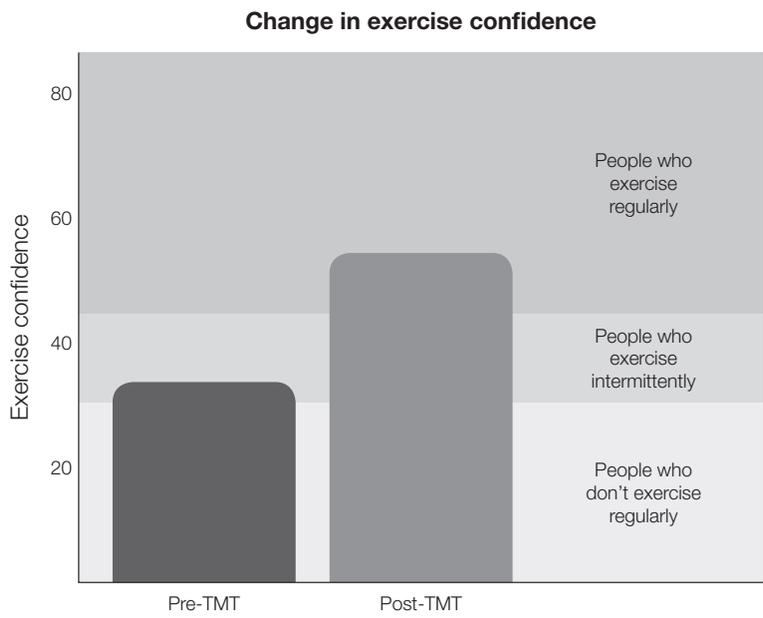
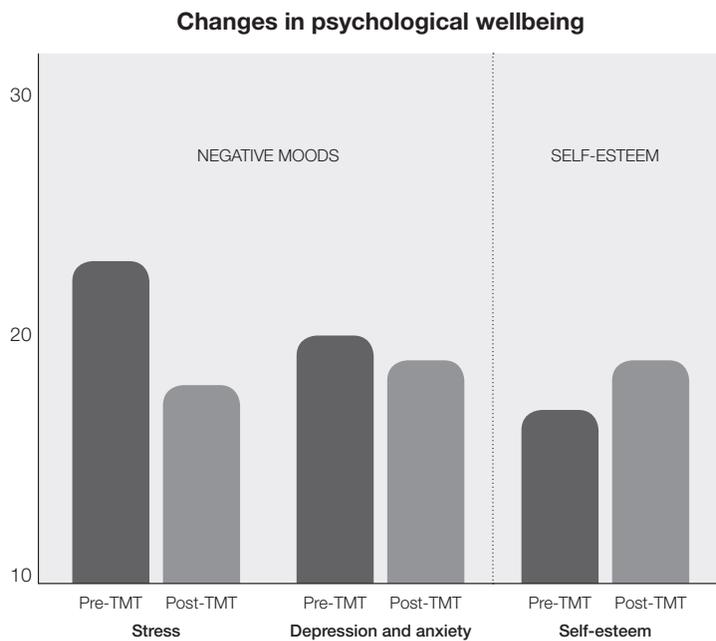


Diagram 5

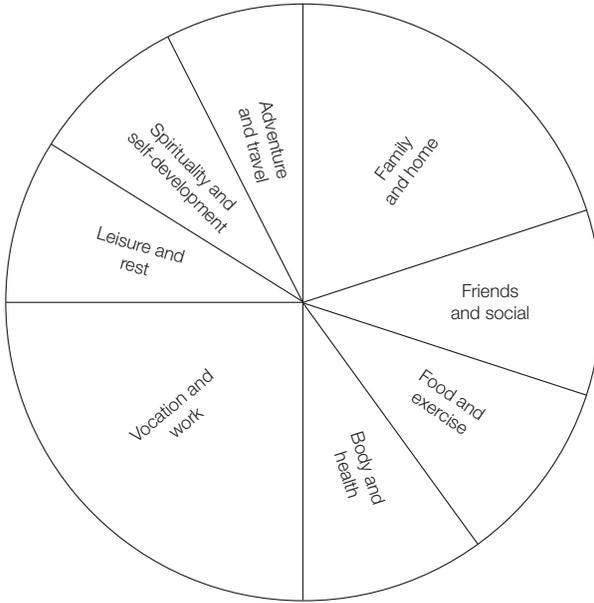


Part 1

# A weight off your mind

Diagram 6-7

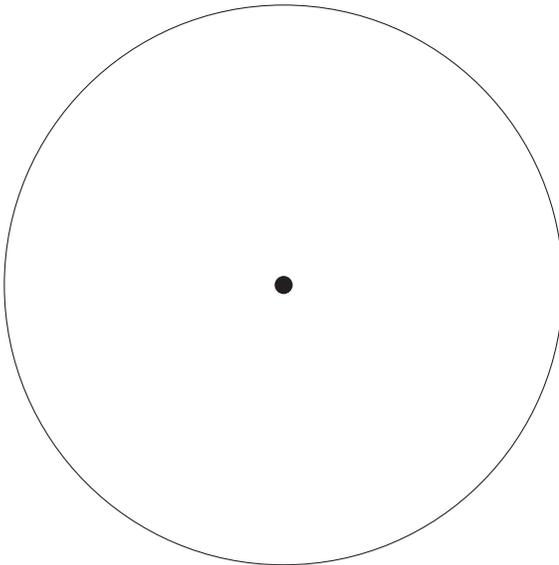
**An example of a balanced life**



**An example of most of my clients' lives**



Diagram 8-9



- Family and home \_\_\_\_%
- Friends and social \_\_\_\_%
- Food and exercise \_\_\_\_%
- Body and health \_\_\_\_%
- Vocation and work \_\_\_\_%
- Leisure and rest \_\_\_\_%
- Spirituality and self-development \_\_\_\_%
- Adventure and travel \_\_\_\_%

Figure 2

<b>BMI category</b>	<b>Hazard ratio (chance of dying)</b>
Normal (20–24.9)	1.00
Overweight (25–29.9)	0.94
Obese grade 1 (30–34.9)	0.95
Obese grades 2 and 3 (35+)	1.29

Figure 3

<b>BMI range</b>	<b>Medical category</b>	<b>Non-stigmatising title<sup>8</sup></b>
20–34.9	Normal weight	Healthy weight
35–39.9	Overweight	Above a healthy weight
40+	Obese	Well above a healthy weight

Diagram 10

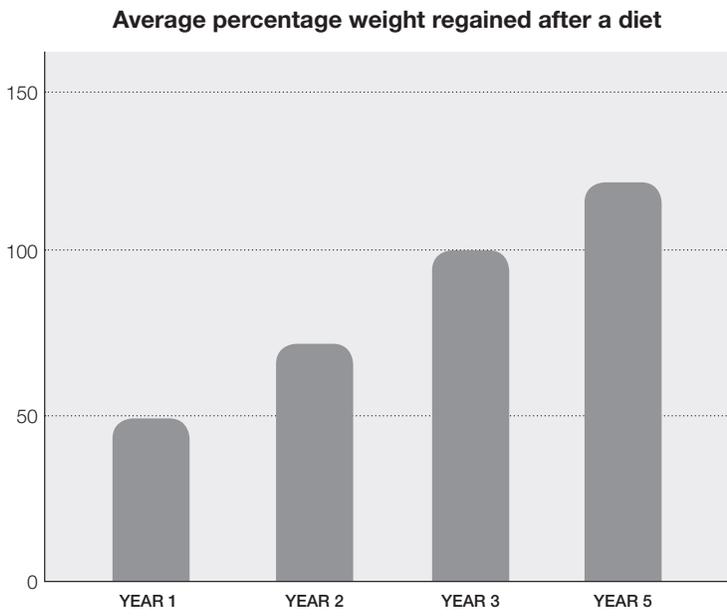
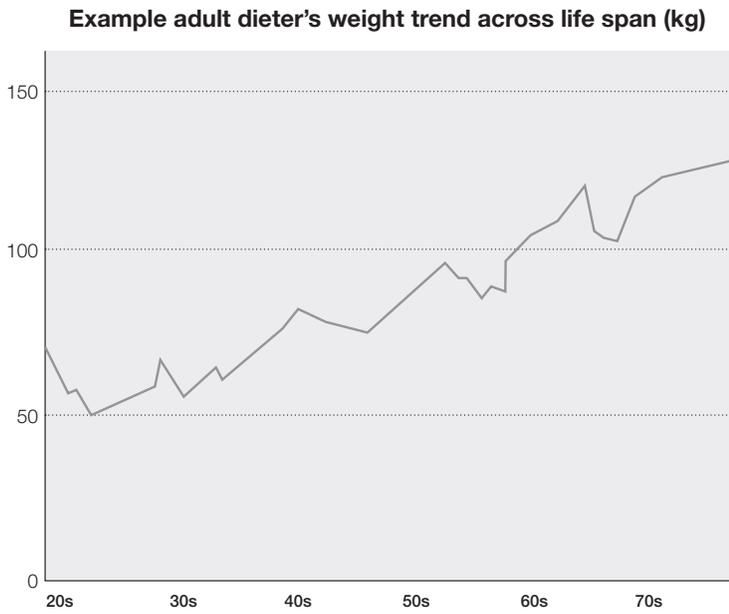


Diagram 11



## Sample Letter

### LETTER TO HEALTH PROFESSIONAL ABOUT WEIGHT-NEUTRAL HEALTH SUPPORT

Dear \_\_\_\_\_,

While I am aware that losing weight through diet and exercise works for some people, I am also aware that most people either fail to lose the amount they want to and/or fail to maintain weight loss in the long term. Given my history of unsuccessful dieting, including trying \_\_\_\_\_, \_\_\_\_\_ and \_\_\_\_\_,

I believe I am in the larger group of people who will ultimately be unsuccessful in losing weight with a diet and exercise plan. Given that some research\* suggests focusing on weight can contribute to mental health conditions, an unhealthy relationship with food and even weight gain over time, I am resolving not to focus on my weight in the future.

I am hoping you will be willing to continue to support my health and wellbeing without focusing on weight, and would ask you to treat me as if my weight and BMI were acceptable to you.

I understand you may have professional reservations about this approach, and I want to assure you that I remain committed to my health and wellbeing. I would ask that we try a twelve-month trial period as an 'experiment' to see how we both feel about it.

You may also be interested in reviewing a randomised controlled trial\*\* suggesting weight-neutral approaches can result in improved psychological and medical health outcomes, and may be favourable when compared with traditional diet and exercise approaches in the medium term.

Thank you for taking the time to read my letter, and for your consideration. I'm very much looking forward to paving my new way forward with you if you are willing to support me.

Sincerely,

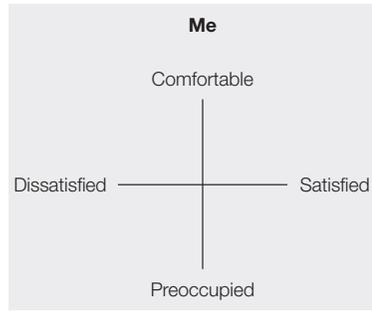
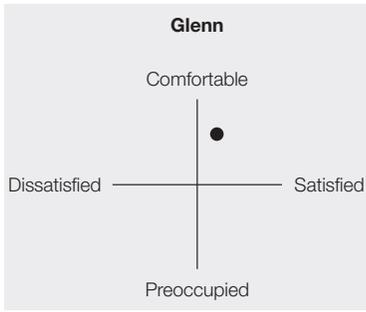
\_\_\_\_\_

P.S. This direction has been prompted by the work of psychologist Glenn Mackintosh, who supports medical and allied health professionals throughout Australia. Should you want to discuss this further, he is more than happy to correspond with you regarding what you think may be the best option for me.

\* C.G. Fairburn & S.J. Beglin, 'Eating Disorder Examination Questionnaire (EDE-Q 6.0)', Appendix in C.G. Fairburn, *Cognitive Behavior Therapy and Eating Disorders*. (Guilford Press, New York, 2008); E.A., Schur, S.R. Heckbert and J.H. Goldberg, 'The association of restrained eating with weight change over time in a community-based sample of twins', *Obesity*, 18(6) (2010), pp. 1146–52; T.L. Tylka, R.M. Calogero & Danielsdorir, 'Is intuitive eating the same as flexible dietary control? Their links to each other and wellbeing could provide an answer', *Appetite*, 95 (2015), pp 166–75.

\*\* L. Bacon, J.S. Stern, M.D. Van Loan & N. Keim (2005), Size acceptance and intuitive eating improve health for obese, chronic female dieters', *Journal of the American Dietary Association*, 105(6) (2005), pp. 929–36.

Diagram 12



## Exercise 1

### Insects

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Mosquito

Daffodil

Roach

Bugs

Daisy

Tulip

### Flowers

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## Exercise 2

### Insects or Good

....X....

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.....

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Joyful

Daisy

Terrible

Tulip

Excellent

Roach

Nasty

Bugs

Wonderful

Terrible

### Flowers or Bad

.....

....X....

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### Exercise 3

<b>Insects or Bad</b>		<b>Flowers or Good</b>
.....	Mosquito	.....
.....	Horrible	.....
.....	Daffodil	.....
.....	Excellent	.....
.....	Roach	.....
.....	Nasty	.....
.....	Bugs	.....
.....	Joyful	.....
.....	Daisy	.....
.....	Wonderful	.....
.....	Tulip	.....
.....	Terrible	.....

### Exercise 4

<b>Fat People or Bad</b>		<b>Thin People or Good</b>
.....	Obese	.....
.....	Horrible	.....
.....	Slim	.....
.....	Excellent	.....
.....	Large	.....
.....	Nasty	.....
.....	Fat	.....
.....	Joyful	.....
.....	Thin	.....
.....	Wonderful	.....
.....	Skinny	.....
.....	Terrible	.....

## Exercise 5

**Fat People  
or  
Good**

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Large

Nasty

Fat

Wonderful

Terrible

Thin

Slim

Excellent

Horrible

Obese

Joyful

Skinny

**Thin People  
or  
Bad**

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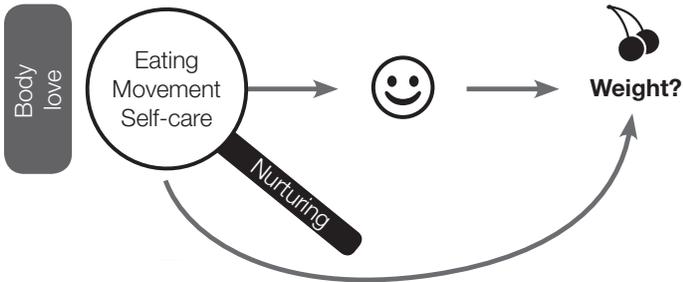
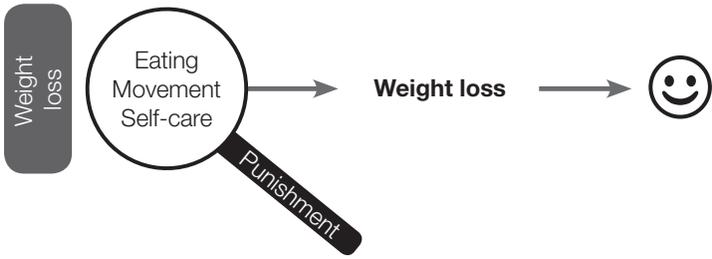
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Diagram 12-13



# Exercise 6

<b>MY MEDIA BEFORE AND AFTERS</b>	<b>Before</b>	<b>After</b>
Facebook pages liked and followed	_____	_____
Instagram accounts followed	_____	_____
Other social media .....	_____	_____
Email newsletters/subscriptions	_____	_____
Magazine subscriptions	_____	_____
Other .....	_____	_____

Diagram 14

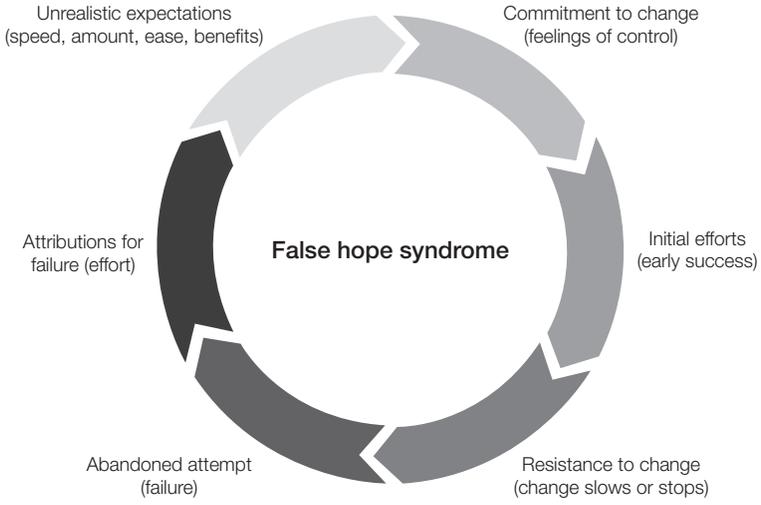


Diagram 15

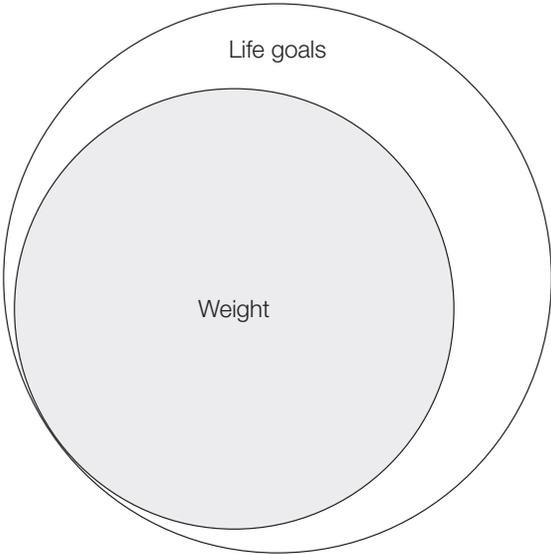


Diagram 16

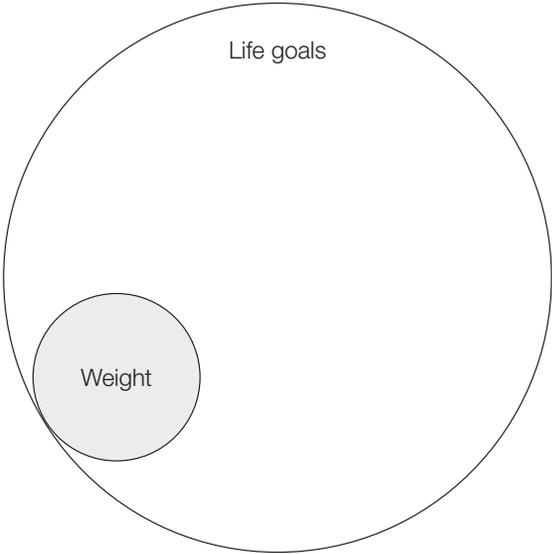


Figure 4

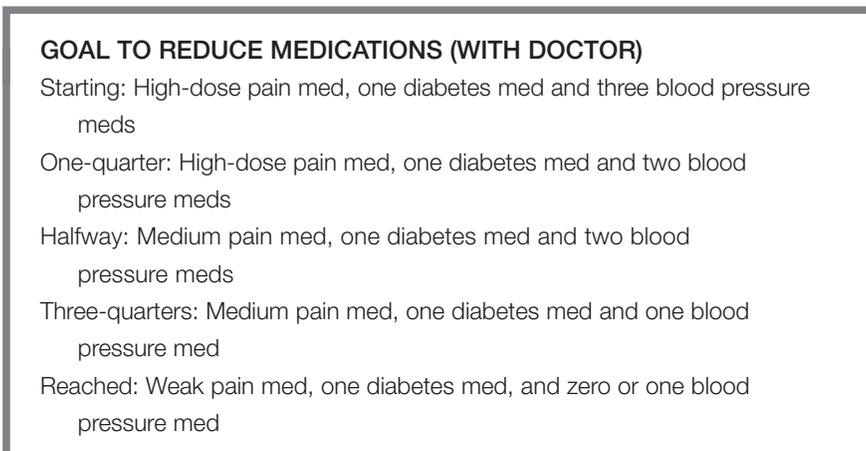


Figure 5



Figure 6

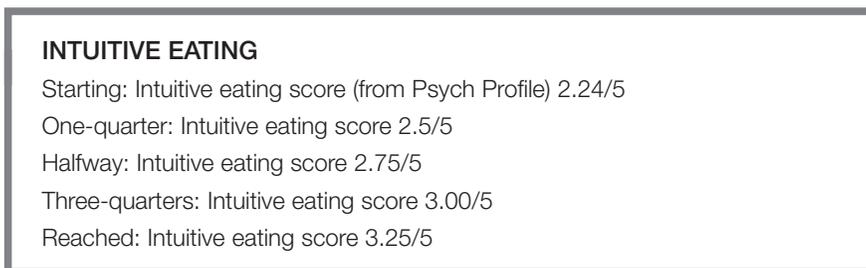


Figure 7

**SAVINGS AND FINANCIAL RESPONSIBILITY**

Starting: No money saved

One-quarter: Set up special savings account and scheduled regular transfers of \$200/week

Halfway: Have \$2500 in account and read ½ of *The Barefoot Investor*

Three-quarters: Have \$5000 and read *The Barefoot Investor*

Reached: Have \$7500 and have ACTIONED *The Barefoot Investor*

Figure 8

**TRAVEL AND ADVENTURE**

Starting: Haven't had an overseas holiday in eight years

One-quarter: Choose country from Thailand, Japan and Africa

Halfway: Dates chosen, passport sorted and rough itinerary planned

Three-quarters: Flights and accommodation booked, visas organised

Reached: Gone on holiday, returned safely and am photo-spamming everyone!

Figure 9

**MEDITATION**

Starting: Not meditating (have done in the past, but always stopped)

One-quarter: Chosen guided meditation app and meditated 25 times total

Halfway: Meditated 50 times total

Three-quarters: Meditated 75 times total

Reached: Meditated 100 times and am in the habit of meditating weekly

# Exercise 7

## MY WHOLE-PERSON GOALS

Date: \_\_\_\_\_

1) \_\_\_\_\_

Starting: \_\_\_\_\_

One-quarter: \_\_\_\_\_

Halfway: \_\_\_\_\_

Three-quarters: \_\_\_\_\_

Reached: \_\_\_\_\_

2) \_\_\_\_\_

Starting: \_\_\_\_\_

One-quarter: \_\_\_\_\_

Halfway: \_\_\_\_\_

Three-quarters: \_\_\_\_\_

Reached: \_\_\_\_\_

3) \_\_\_\_\_

Starting: \_\_\_\_\_

One-quarter: \_\_\_\_\_

Halfway: \_\_\_\_\_

Three-quarters: \_\_\_\_\_

Reached: \_\_\_\_\_

Figure 10

**VALUES LIST**

- |                 |                   |                    |
|-----------------|-------------------|--------------------|
| Acceptance      | Fun               | Practicality       |
| Accomplishment  | Generosity        | Problem-solving    |
| Accountability  | Gratitude         | Progress           |
| Achievement     | Greatness         | Prosperity         |
| Adventure       | Growth            | Purpose            |
| Assertiveness   | Happiness         | Quality of life    |
| Authenticity    | Hard work         | Reciprocity        |
| Beauty          | Harmony           | Recognition        |
| Body positivity | Health            | Relationships      |
| Calm            | Honesty           | Reliability        |
| Challenge       | Humility          | Resourcefulness    |
| Change          | Humour            | Respect for self   |
| Comfort         | Independence      | Respect for others |
| Commitment      | Individuality     | Responsibility     |
| Communication   | Industry          | Results            |
| Community       | Inner peace       | Romance            |
| Compassion      | Innovation        | Safety             |
| Competence      | Integrity         | Satisfaction       |
| Competition     | Intimacy          | Security           |
| Conformity      | Intuition         | Self-awareness     |
| Connection      | Intuitive eating  | Self-care          |
| Consistency     | Joyful movement   | Self-compassion    |
| Cooperation     | Justice           | Self-development   |
| Courage         | Kindness          | Self-nurturing     |
| Creativity      | Knowledge         | Service            |
| Curiosity       | Leadership        | Sexuality          |
| Decisiveness    | Learning          | Simplicity         |
| Discipline      | Love              | Skilfulness        |
| Discovery       | Loyalty           | Spirituality       |
| Diversity       | Meaning           | Spontaneity        |
| Effectiveness   | Mindfulness       | Stability          |
| Empowerment     | Modelling         | Status             |
| Equality        | Money             | Structure          |
| Excellence      | Nutritious eating | Success            |
| Excitement      | Open-mindedness   | Teamwork           |
| Exercise        | Openness          | Time management    |
| Fairness        | Orderliness       | Tolerance          |
| Faith           | Passion           | Tradition          |
| Family          | Patience          | Transformation     |
| Fitness         | Perfection        | Trust              |
| Flair           | Persistence       | Truth              |
| Flexibility     | Personal choice   | Unity              |
| Focus           | Physical health   | Variety            |
| Forgiveness     | Physical activity | Wealth             |
| Freedom         | Pleasure          | Wellbeing          |
| Friendliness    | Power             | Wisdom             |

Insert your own values here: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Exercise 8

<b>Scale (from Psychological Profile)</b>	<b>Original score (date __/__/__)</b>	<b>Current score (date __/__/__)</b>
Dieting mindset – restrained eating*		
Dieting mindset – eating concern*		
Body satisfaction		
Body uneasiness – overall*		
Body image thoughts – negative thoughts*		
Body image thoughts – positive thoughts		

\*Lower scores represent improvement.

Part 2

# Creating healthy habits

Diagram 17

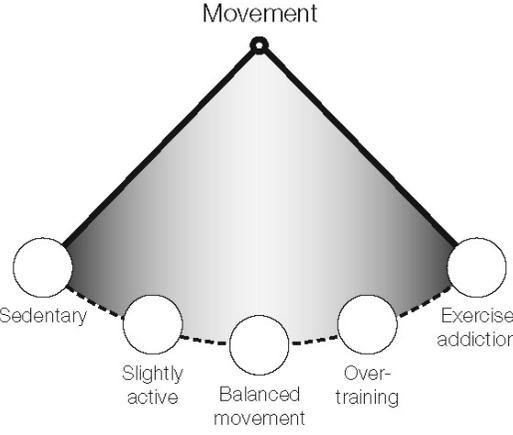
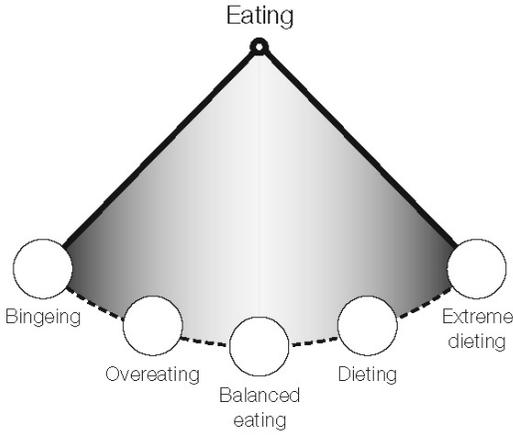
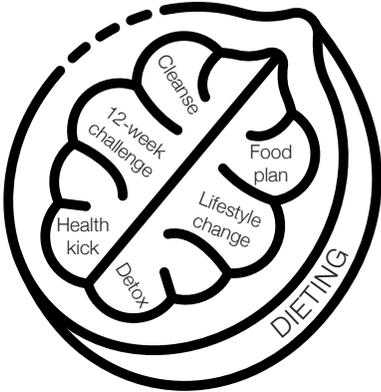


Diagram 18



## Exercise 9

### **DIET DISCOVERY AUDIT**

Simply check off what you are doing right now to see whether it matches any of the dieting criteria.

Am I:

- focusing on how food affects weight?
- counting or limiting calories?
- skipping meals or purposely delaying eating?
- not allowing certain foods?

Tally the ticks to give yourself a dieting score out of 4. You can give certain factors half marks if you need (we give these in-session when a person says 'I sort of am' or 'I suppose a little bit'), but just be sure those boxes don't warrant full marks.

My dieting score: \_\_\_/4

## Exercise 10

<b>Good</b>		<b>Bad</b>
.....	People	.....
.....	Buildings	.....
.....	Psychology	.....
.....	Girls	.....
.....	Cars	.....
.....	Engineering	.....
.....	Boys	.....
.....	Pens	.....
.....	Academia	.....

## Exercise 11

<b>Good</b>		<b>Bad</b>
.....	Apple	.....
.....	Cake	.....
.....	Vegetables	.....
.....	Chocolate	.....
.....	Cookies	.....
.....	Spinach	.....
.....	Salad	.....
.....	Ice-cream	.....
.....	Fruit	.....

Figure 11

### **HUNGER/FULLNESS SCALE INDICATORS**

Checking in with the scale below, where are you right now? \_\_\_\_\_

- 1 Famished/starving
- 2 Weak, headache, cranky, low energy
- 3 Want to eat now, stomach growls and/or feels empty
- 4 Hungry, but could wait to eat, starting to feel empty
- 5 Not hungry, not full
- 6 Feeling satisfied, stomach feels full and comfortable
- 7 Feeling full, certainly don't need any more food
- 8 Uncomfortably full
- 9 Stuffed, very uncomfortable
- 10 Bursting, painfully full

## Exercise 12

### CHECKING IN WITH THE BODY

Observe your hunger and fullness levels when you start and stop eating. Make a mark both where you start and where you stop, and draw a line between them, as shown in the example below. You can record this up to twenty minutes after eating so you give yourself time to feel the fullness cues.

Hunger and fullness indicators									
1	2	3	4	5	6	7	8	9	10
		X				X			

**Note:** This activity is not about your *desire to eat* or *satisfaction*, but your *physical sensations*. Although they are related, differentiating between the physical and psychological appetite is an important part of mindful-intuitive eating.

Diagram 19

Which centre circle is bigger?

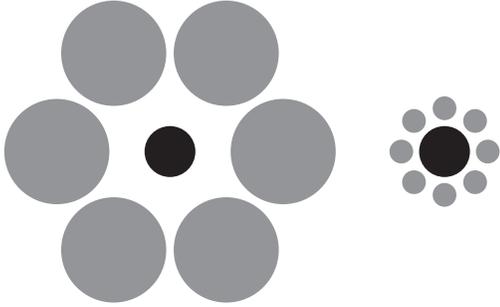


Diagram 20

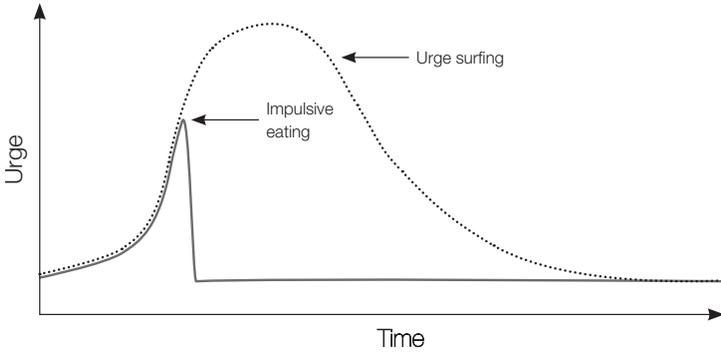
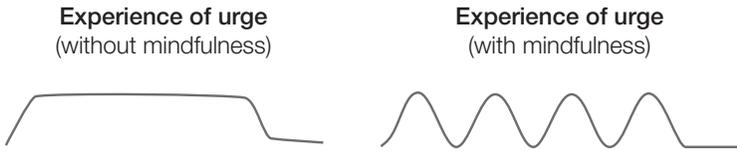


Diagram 21



## Exercise 13

### HOME ENVIRONMENT AUDIT

(Tick all that apply)

	Audit	Re-audit
1. Are low-nutrition, high-impulse meals available?	_____	_____
2. Are low-nutrition, high-impulse meals convenient (e.g. easy to prepare or ready made)?	_____	_____
3. Are low-nutrition, high-impulse snacks available?	_____	_____
4. Are low-nutrition, high-impulse snacks convenient (e.g. easy to prepare or ready made)?	_____	_____
5. Are low-nutrition, high-impulse snacks visible and/or in close proximity (e.g. a lolly jar on the table)?	_____	_____
6. Are low-nutrition, high-impulse drinks (e.g. soft drinks/sugary drinks/processed fruit juices) available?	_____	_____
7. Are low-nutrition, high-impulse drinks convenient and/or in close proximity (e.g. cold in the fridge)?	_____	_____
8. Are alcoholic drinks available?	_____	_____
9. Are alcoholic drinks convenient (e.g. cold in fridge)?	_____	_____
10. Are alcoholic drinks visible (e.g. in an open wine rack)?	_____	_____
11. Are large packages of low-nutrition, high-impulse foods available (e.g. family packs)?	_____	_____
12. Are larger bottles of low-nutrition, high-impulse drinks available (e.g. family bottles)?	_____	_____
13. Do I have easy access to have low-nutrition, high-impulse food delivered (e.g. downloaded app for food delivery service)?	_____	_____

Add your ticks to give an overall score: \_\_\_\_/13

Make any changes you want to. When you are done, re-audit yourself by adding your ticks in the right-hand column.

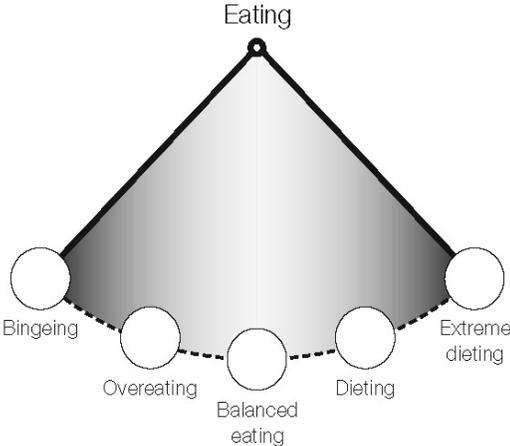
Re-audit score: \_\_\_\_/13

## Exercise 14

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Breakfast							
Morning tea							
Lunch							
Afternoon tea							
Dinner							
Dessert							



Diagram 22



## Exercise 16

### **GOOD, BETTER, HOW**

Good (what I did well)

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Better (what can be improved)

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How (what I will do to improve it)

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## Exercise 17

### JOYFUL MOVEMENT ACTIVITY

#### If you aren't physically active

Think of what type(s) of physical movement you would like to do. (Think of what you have enjoyed in the past, what you daydream about doing, or what you would do if you had the motivation.)

Write it below.

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#### If you are physically active

List the types of movement you're doing and rate how much you currently enjoy them in the 'current enjoyment' column (0 – no enjoyment to 10 – maximum enjoyment).

Type of movement	Current enjoyment	New enjoyment
_____	_____	_____
_____	_____	_____
_____	_____	_____

If you are below an 8 for any type of movement, make some notes on how you can raise your level of enjoyment. For example, would it help to do it with someone else or to go alone? Listen to music or change what you listen to? Go at a different time or to a different place? Get creative!

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Write the new enjoyment levels if you were to make the changes you noted in the 'new enjoyment' column above. If they are higher, well done – you are on your way to getting friendlier with movement. Now get to actioning your notes!

## Exercise 18

### MOVEMENT CONFIDENCE ACTIVITY

#### If you aren't physically active

Think of the type of movement you would have most confidence in doing (or the least lack of confidence). It's okay if it's really small. It may be just getting on a treadmill or stepping outside the house.

Write it below.

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#### If you are physically active

List the types of movement you're doing and rate them on how confident you currently feel about doing them in the 'starting efficacy' column (0 – no confidence to 10 – maximum confidence).

Type of movement	Starting efficacy	New efficacy
_____	_____	_____
_____	_____	_____
_____	_____	_____

If you are below an 8 for any type, make some notes on how to improve your confidence levels. For example, would it help to have a chat with your walking partner about reducing their speed? Do some extra practice or get some expert coaching? See a physiotherapist to improve your mobility or manage injuries?

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Write the new confidence levels if you were to make the changes you noted in the 'new efficacy' column above. If they're higher, you're on your way to creating a better relationship with movement. Now get to actioning your notes!

## Exercise 19

### EMBARRASSMENT TO EMPOWERMENT ACTIVITY

#### If you aren't physically active

Think about what type of movement you would feel most empowered and/or least embarrassed to do. Write it below.

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#### If you are physically active

List the types of movement you're doing and rate how embarrassed you currently feel when doing them in the 'current embarrassment' column (0 – no embarrassment to 10 – maximum embarrassment). Note that we are measuring embarrassment, not how empowered you feel.

Type of movement	Current embarrassment	New embarrassment
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>

If you are above a 4 for any type, make some notes on how to reduce your level of embarrassment. For example, would it help to change the place, time or way in which you move? Change the way you think about moving your body or the importance you place on others' opinions? Seek support from trusted friends or health professionals?

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Write the new embarrassment levels if you were to make the changes you noted in the 'new embarrassment' column above. If they're lower, you're on your way to a more empowered way of moving your body. Now get to actioning your notes!

## Exercise 20

### EMPATHIC PROBLEM-SOLVING

This is a simple process you can use to help you solve any problem, with a client example to help you apply each step to yourself. Choose a movement-related problem you are experiencing and see if you can apply the process to overcome it.

**Step 1: Goal or aim.** You can get so stuck in a problem that you forget what you actually want the solution to look like. So start by writing down what you want to achieve. This helps you clarify what you want and gives the *why* for problem-solving.

*Client example:* To do one exercise session a week.

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**Step 2: Problem(s).** Define the barriers holding you back from achieving your aim. To help identify the various problems, you can break them up into: environmental barriers (E) – barriers in the physical environment (e.g. no safe walking tracks near me); organisational barriers (O) – barriers of planning, schedules or time management (e.g. I stay up late and can't get up for my morning walk); social barriers (S) – barriers relating to other people or lack of them (e.g. Jim always says he'll walk with me but never does); and personal barriers (P) – barriers within yourself, such as thoughts, feelings and habits (e.g. I've got no motivation). Breaking up your barriers this way can help you to identify solutions that will work for different types of problems (e.g. if the problem is an organisational barrier, time management may help). Don't get too hung up on what type of barrier it is, though – it's just to get you thinking.

*Client example:* (O) shift work, (S) no one in the house will go with me (who doesn't annoy me) and (P) no motivation to go myself.

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**Step 3: Solution(s).** *On a separate piece of paper, brainstorm all potential solutions you can think of. Allow yourself to be creative and don't shutdown any ideas at this stage – this brainstorming allows you to think outside the box of your problem. Once you've exhausted all possibilities you can then refine them, picking the most workable solution(s).*

*Client example (after brainstorming on an A4 sheet):* See a personal trainer.

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**Step 4: Review of solution(s).** Set a reminder in your calendar to ensure you remember this step. Reflect on your progress and refine as necessary (using the good, better, how technique if you'd like). Reviewing your strategies is important for continued progress, and knowing you will check up on yourself is important for accountability.

*Client example (at the time of writing):* Increased to two PT sessions a week after six months, and have begun my own training!

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Diagram 23

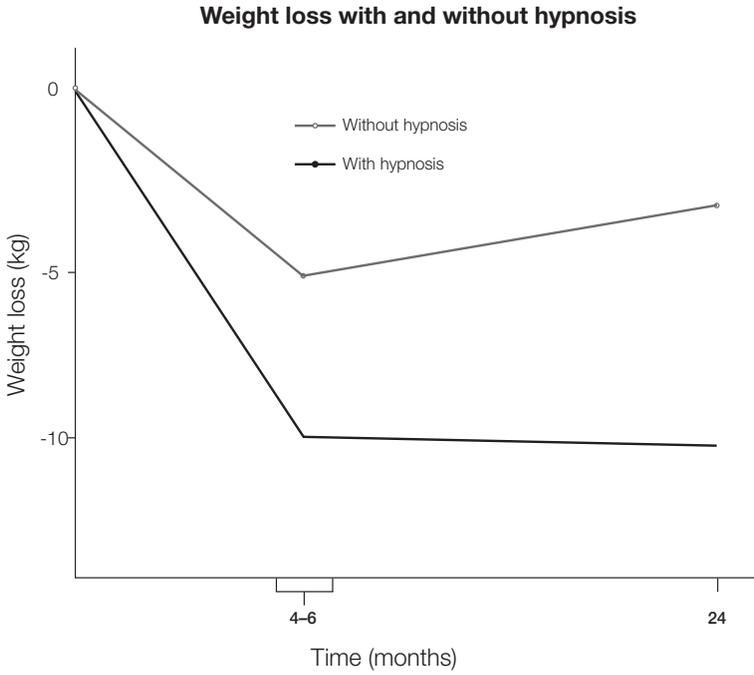


Diagram 24

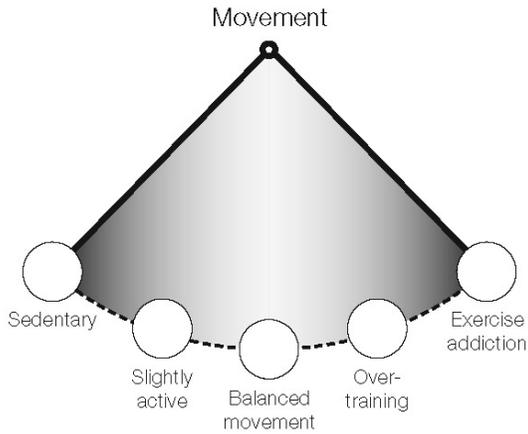
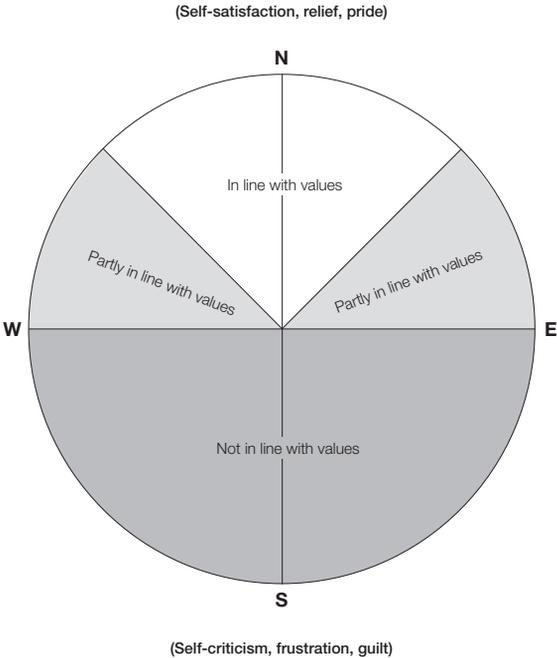


Diagram 25

CHECKING YOUR VALUES COMPASS



This values compass will help you stay in line with your three super values from Step 3. Starting from the centre, draw three arrows on the compass to represent how in line with each value you have been (write the name of the value outside the circle so you know which value each arrow represents). Your feelings are important here. If you are in line with a value (i.e., pointing fairly north), you will feel satisfied and proud. If you are way out of line (i.e., pointing south), you will feel frustrated and guilty. If you are partly in line (i.e., north-east or north-west), you may feel a mix of feelings or no strong feelings at all. (Note, if you *are* somewhat out of line with a value, you can represent this with an arrow going either east or west, it doesn't matter!) Make some notes on key things you can do to stay in line with, or reorient yourself towards, your personal super values.

To complete this exercise anytime, download the values compass worksheet from the Free Resources section of our website: [www.weightmanagementpsychology.com.au/free-resources](http://www.weightmanagementpsychology.com.au/free-resources).

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Diagram 26

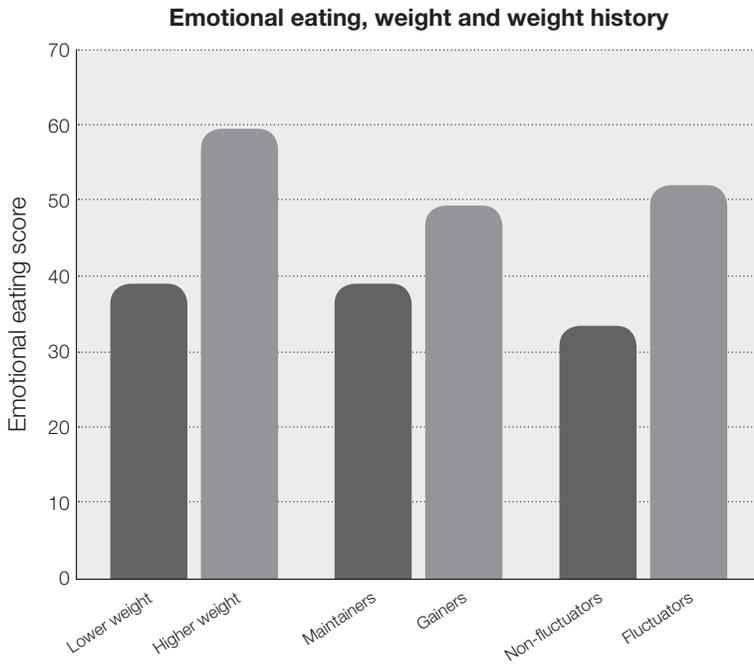


Figure 12

Feelings	Possible wants and needs	Ways to attend to uncomfortable feelings and/or meet wants or needs
<p>Sad, blue, down                      Betrayed, abandoned, let down                      Hurt, upset, disappointed</p>	<p>Clarity, sureness, insight                      Belonging, connection, inclusion, friendship, community                      Authenticity, honour, purpose</p>	<p><i>Self-talk:</i> Remind myself that everyone is entitled to their own opinion (and theirs was voiced respectfully).  <i>Action:</i> Connect with people who value my work and I value theirs – ‘my tribe’.  <i>Reflection:</i> Check in with myself, is there any validity to the criticism and, if so, what can I do about it?</p>

## Exercise 21

### FEELINGS, WANTS AND NEEDS ACTIVITY

Use this list to identify what you are feeling, wanting and needing, helping you listen to and care for yourself in more effective, healthy and life-enhancing ways.

**Note:** The feelings you identify may or may not relate to the wants and needs. This activity is just to help you understand the feelings you are experiencing and your wants and needs at the time, so you can make choices that work better for you. If you have trouble filling out the third column, think of yourself as a child with this combination of feelings, wants and needs. Understanding how to nurture your inner child can help you find the answer.

Feelings (circle all that apply)	Possible wants and needs (circle all that apply)	Ways to attend to uncomfortable feelings and/or meet wants or needs (write)
Sad, blue, down Stressed, tense, overwhelmed Angry, frustrated, resentful, hostile Bored, lonely, disconnected Guilty, shameful, disappointed with myself Weak, powerless, hopeless Jealous, yearning, longing Anxious, scared, frightened, Hurt, upset, disappointed Humiliated, embarrassed, belittled Uncertain, confused, insecure Tired, exhausted, fatigued Betrayed, abandoned, let down Other feeling (write) _____	Nurturing, caring, support Belonging, connection, inclusion, friendship, community Trust, dependability, honesty, commitment Respect, appreciation, recognition Fairness, justice, accountability Autonomy, independence, freedom, choice, self-expression To matter, to make a difference, to be acknowledged Wellbeing, health, vitality Consideration, understanding, to speak, to be heard Safety, peace, serenity Authenticity, honour, purpose Fun, humour, pleasure Clarity, sureness, insight Empowerment, change, progress Other want or need (write) _____	

You can download as many of these worksheets as you'd like from our Free Resources section at [www.weightmanagementpsychology.com.au/free-resources](http://www.weightmanagementpsychology.com.au/free-resources).

## Exercise 22

Scale (from Psychological Profile)	Original score (date __/__/__)	Current score (date __/__/__)
Intuitive eating (IE) overall		
IE – Eating for physical reasons		
IE – Unconditional permission to eat		
IE – Reliance on hunger and satiety cues		
IE – Body-food choice congruence		
Difficulty controlling overeating (DCO) overall*		
DCO – Emotional eating*		
DCO – Socially acceptable circumstances*		
Dieting mindset – restrained eating*		
Dieting mindset – eating concern*		
Exercise confidence overall		
Perceived stress*		
Depressed and anxious moods*		
Self-esteem		
Body satisfaction		
Body uneasiness – overall*		
Body image thoughts – negative thoughts*		
Body image thoughts – positive thoughts		

\*Lower scores represent improvement.

## Exercise 23

### GOAL REACHER ACTIVITY

Check in with each of your whole-person goals. See how far you've come and make any comments on your progress and how to continue it.

Whole-person goal 1 (write main goal): \_\_\_\_\_  
\_\_\_\_\_

Milestone reached (circle): Starting, one-quarter, halfway, three-quarters, reached Progress notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Whole-person goal 2 (write main goal): \_\_\_\_\_  
\_\_\_\_\_

Milestone reached (circle): Starting, one-quarter, halfway, three-quarters, reached Progress notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Whole-person goal 3 (write main goal): \_\_\_\_\_  
\_\_\_\_\_

Milestone reached (circle): Starting, one-quarter, halfway, three-quarters, reached Progress notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

This activity is good to do every few months, so when you're finished, set a reminder in your phone or calendar for your next goal-reacher session! For downloadable goal-reacher worksheets, visit [www.glenmackintosh.com](http://www.glenmackintosh.com).

## Exercise 24

### BEHAVIOURS TO HABITS ACTIVITY

Anchoring a new behaviour to a cue helps it become habitual, automatic and unconscious over time. Select a few habits you are still looking to create, and choose appropriate cues to anchor them to.

New behaviour	Cue to make it habitual
1. _____	_____
2. _____	_____
3. _____	_____

Note that cues can include day of the week, time of day, an event (e.g. leaving work or attending a party), a physical cue (e.g. a reminder or space in your home) or any existing habits (e.g. showering or having lunch), to name a few.

Like building a new highway, building the connection between the anchor and the habit takes awareness, time and effort. But over time the mental roadway establishes itself and takes over, so the journey happens with less thought than it takes you to drive to work each day.

## Exercise 25

### AUTUMN TIDY-UP

The autumn tidy-up has three parts:

- Unfollow.** Unfollow, unlike and unsubscribe from any body-positive content that is no longer making you feel good. You may also be able to identify thin-ideal imagery that has snuck back in or that you didn't catch the first time!
- Follow.** Follow, like and subscribe to some appearance-neutral content. Choose stuff that makes you feel good, like nature photography, design or other things you are into (or want to get into). As one of my non-diet colleagues hilariously put it, the above study suggests 'cat videos and Harry Potter memes for the win'!
- Audit.** Rather than striving for likes, comments and attention with image-based posts, remove your own appearance-related posts. This can be incredibly difficult but powerfully cathartic. Then focus on posting some of your interests without the (often unnecessary) focus on your body. This helps reduce your thinsanity and also ever-so-slightly lowers the temperature of the ocean of thinsanity in which we are all swimming. While this may not make a big difference to the world, it may make the world of difference to the people around you.

Check off as many boxes as you can. This helps you get out of your body and into your life!

# Notes

## The start of therapy

- 1 As it tends to; see K. Shaw, P. O'Rourke, C. Del Mar & J. Kenardy (2006). Psychological interventions for overweight or obesity (Review). *Cochrane Database of Systemic Reviews*, 18(2): 4.
- 2 I. Kirsch (1996). Hypnotic enhancement of cognitive-behavioral weight loss treatments – another meta-reanalysis. *Journal of Consulting and Clinical Psychology*, 64(3), 517–19.
- 3 L. Bacon, J.S. Stern, M.D. Van Loan & N. Keim (2005). Size acceptance and intuitive eating improve health for obese, female chronic dieters. *Journal of the American Dietetic Association*, 105: 929–36.
- 4 P.B. Stapleton, T. Sheldon & B. Porter (2012). Clinical benefits of emotional freedom techniques on food cravings at 12-months follow up: A randomized controlled trial. *Energy Psychology*, 4(1): 1–12.
- 5 P.E. O'Brien, L. Brennan, C. Laurie & W. Brown (2013). Intensive medical weight loss or laparoscopic adjustable gastric banding in the treatment of mild to moderate obesity: Long-term follow-up of a prospective randomised trial. *Obesity Surgery*, 23(9): 1345–53.
- 6 P.E. O'Brien, L. Macdonald & M. Anderson et al. (2013). Long-term outcomes after bariatric surgery: Fifteen year follow up of adjustable gastric banding and a systematic review of the bariatric surgery literature. *Annals of Surgery*, 257(1): 87–94. This is the longest-term weight management follow-up study I have seen.
- 7 This is unpublished data, but it is data that no weight management clinic will ever provide (as they don't want you to see the results). For the scientifically minded, we have conducted a clinical trial of our Twelve Month Transformation program, and are beginning the publication process at the time of writing.

## Step 1: Break up with the scales

- 1 A drug that has since been taken off the market in many countries due to findings that it led to increased risk of strokes and heart attacks.
- 2 P.T. James, R. Leach, E. Kalamara & M. Shayeghi (2001). The worldwide obesity epidemic. *Obesity Research*, 9(4): 228–33.
- 3 They found over 7000 relevant articles in scientific journals and, after controlling for quality, chose 97 of them to analyse, which still yielded a combined sample of 2.88 million people.
- 4 K.M. Flegal, B.K. Kit & H. Orpana et al. (2013). Association of all-cause mortality with overweight and obesity using standard body mass index categories: A systematic review and meta-analysis. *Journal of the American Medical Association*, 309(1): 71–82.
- 5 Ibid., 71.
- 6 Ibid., 71.
- 7 E. Banks, G. Joshy, & M.F. Weber et al. (2015). Tobacco smoking and all-cause mortality in a large Australian cohort study: Findings from a mature epidemic with current low smoking prevalence. *BMC Medicine*, 13, Article 38, doi: 10.1186/s12916-015-0281-z.
- 8 Non-diet pioneer and medical doctor Rick Kausman suggests using these descriptions if you have to focus on BMI, saying, 'It's a few extra words, but it's worth it.'
- 9 According to the Australian Institute for Health and Welfare, women born in 1960–62 could expect to live for 72.4 years and men for 67.9 years. Comparatively, women born in 2014–17 can expect to live for 84.6 years, and men for 80.4 years. These findings are comparable with WHO and other data worldwide.
- 10 I'm not saying not to take medications to manage your weight or health, just that many people have been influenced to take these drugs without evidence-based indications.

- 11 While the shape of the Nike swoosh may vary between various diet and exercise approaches, it remains a swoosh nonetheless. For a detailed review, see R.W. Jeffery, A. Drewnowski, L.H. Epstein, A.J. Stunkard, G.T. Wilson, R.R. Wing & D.R. Hill (2000). Long-term maintenance of weight loss: Current status. *Health Psychology*, 19 (1): 5–16.
- 12 E.A. Schur, S.R. Heckbert & J.H. Goldberg (2010). The association of restrained eating with weight change over time in a community-based sample of twins. *Obesity*, 18(6): 1146–52.

## Step 2: Make up with your body

- 1 M.P. McCabe & L. Ricciardelli (2003). Body image and strategies to lose weight and increase muscle among boys and girls. *Health Psychology*, 22(1): 39–46.
- 2 Ibid.
- 3 S.J. Paxton, D. Nuemark-Sztainer, P.J. Hannan & M.E. Eisinger (2006). Body dissatisfaction prospectively predicts depressive mood and low self-esteem in adolescent girls and boys. *Journal of Clinical Child and Adolescent Psychology*, 35(4): 539–49.
- 4 J. Mond, D. Mitchison, J. Latner, P. Hay, C. Owen & B. Rodgers (2013). Quality of life impairment associated with body dissatisfaction in a general population sample of women. *BMC Public Health*, 13, Article 920, [www.biomedcentral.com/1471-2458/13/920](http://www.biomedcentral.com/1471-2458/13/920).
- 5 Ibid.
- 6 Brown, B. (2012). *Daring Greatly: How the Courage to Be Vulnerable Transforms the Way We Live, Love, Parent, and Lead*. New York: Gotham Books. This is a wonderful book, and well worth the read.
- 7 L. McClaren & D. Kuh (2004). Body dissatisfaction in midlife women. *Journal of Women & Aging*, 16(1–2): 35–54.
- 8 Tom wrote a great workbook called *The Body Image Workbook*, which goes into learning to like your looks in even more detail. If you want to dive deeper into body image after reading this book, especially body image *not* related to weight, I'd highly recommend it.
- 9 See <https://implicit.harvard.edu/implicit> for more information on the IAT.
- 10 If you'd like to measure your weight bias more precisely, you can complete the online version, which measures your reaction time in milliseconds, and gives an assessment not only of the existence of implicit associations, but also the *strength* of them. Visit Project Implicit at <https://implicit.harvard.edu/implicit>. It has IATs not only for weight, but also race, gender, religion and more. A fascinatingly eye-opening (if not terrifyingly unsettling) self-awareness tool!
- 11 Mark Manson (2016). *The Subtle Art of Not Giving a F\*ck*. Sydney: Pan Macmillan, p. 9.
- 12 We've previously talked about the pharmaceutical industry, we're talking about the beauty industry now and we'll be talking about several other industries too. While we may single them out where they're most relevant, the reality is that these industries work together to propagate the messages that make us thinsane.
- 13 F. Kong, Y. Zhang & Z. You (2013). Body dissatisfaction and restrained eating: Mediating effects of self-esteem. *Social Behaviour and Personality*, 41(7): 1165–70.
- 14 B. Major, J.M. Hunger, D.P. Bunyan & C.T. Miller (2014). The ironic effects of weight stigma. *Journal of Experiential and Social Psychology*, 51: 74–80.
- 15 L.R. Vartanian & S.A. Novak (2011). Internalised societal attitudes moderate the impact of weight stigma on avoidance of exercise. *Obesity*, 19: 757–62.
- 16 P.J. Teixeira, S.B. Going & L.B. Houtkeeper et al. (2002). Weight loss readiness in middle-aged women: Psychosocial predictors of success for behavioural weight reduction. *Journal of Behavioural Medicine*, 25(6): 499–523.
- 17 S. Byrne, Z. Cooper & C. Fairburn (2003). Weight maintenance and relapse in obesity: A qualitative study. *International Journal of Obesity*, 27: 955–62.

- 18 C. Thomas (1991). Stable vs unstable weight history, body image and weight concern in women of average body weight. *Psychological Reports*, 68(2): 491–9.
- 19 M. Scott Peck (2008). *The Road Less Travelled*. Harmondsworth: Penguin, p. 22.
- 20 J. Fardouly & L.R. Vartanian (2015). Negative comparisons about one's appearance mediate the relationship between Facebook usage and body-image concerns. *Body Image*, 12: 82–8.
- 21 M. Tiggerman & M. Zaccardo (2015). Exercise to be fit, not skinny: The effect of fitpiration imagery on women's body-image. *Body Image*, 15: 61–7.
- 22 K.L. Challinor, J. Mond, I.D. Stephen, D. Mitchison, R.J. Stevenson, P. Hay & K.R. Brooks (2017). Body size and shape misperception and visual adaptation: an overview of an emerging research paradigm. *Journal of International Medical Research*, 45(6): 2001–8.
- 23 I see this as related to the #metoo movement's call for zero tolerance on sexual harassment. While I don't believe fat talk to be as serious as sexual harassment, fat shaming is undeniably underpinned by the same culture of objectification of women that has allowed sexual harassment to flourish.
- 24 Brené Brown (2006). *Daring Greatly*. Ringwood: Penguin, p. 34.
- 25 See *How to Embrace Body Positivity with Taryn Brumfitt (Pt. 3)* for a wonderful conversation about having elevated conversations with others, including practical examples from Taryn's and my clients' experiences! Video and podcast versions of Part 1, 2 and 3 of our elevated conversation are available on my website at [www.weightmanagementpsychology.com.au](http://www.weightmanagementpsychology.com.au).
- 26 For a great video relating the poodle metaphor to health science by the Association for Size Diversity and Health (ASDAH), search 'Poodle Science' on YouTube. After watching this video, I expanded on the idea in conversations with my clients and they love it!
- 27 L. Bacon, J.S. Stern, M.D. Van Loan & N. Keim (2005). Size acceptance and intuitive eating improve health for obese, female chronic dieters. *Journal of the American Dietetic Association*, 105: 929–36; J.L. Mensinger, R.M. Calogero, S. Stranges & T.L. Tylka (2016). A weight neutral versus weight loss approach for health promotion in women with high BMI: A randomised controlled trial. *Appetite*, 105: 364–74.
- 28 Mensinger, Calogero, Stranges & Tylka (2016). A weight neutral versus weight loss approach for health promotion.
- 29 R.E. Kleck & A. Strenta (1980). Perceptions of the impact of negatively valued physical characteristics on social interaction. *Journal of Personality and Social Psychology*, 39(5): 861–73.
- 30 Terry Cole-Whittaker (1979). *What You Think of Me is None of My Business*. London: Oak Tree Press.
- 31 George Blair-West (2008). *Weight Loss for Food Lovers*. Brisbane: Alclare, p. 56.
- 32 See *Thursday Therapy #28 Find Love at Any Weight* for a wonderful conversation on weight and dating, including real-life examples from both of our clients: [www.weightmanagementpsychology.com.au/episode-28](http://www.weightmanagementpsychology.com.au/episode-28).
- 33 M.E. Beutel, Y. Stöbel-Richter & E. Elmar Brähler (2008). Sexual desire and sexual activity of men and women across their lifespans: Results from a representative German community survey. *BJU International*, 101(1): 76–82.
- 34 S. Both, E. Laan & W. Everaerd (2010). Focusing 'hot' or focusing 'cool': Attentional mechanisms in sexual arousal in men and women. *The Journal of Sexual Medicine*, 8: 167–79.
- 35 S.A. McLean, S.J. Paxton & E.H. Wertheim (2011). A body image and disordered eating intervention for women in midlife: A randomized controlled trial. *Journal of Consulting and Clinical Psychology*, 79(6): 751–8.
- 36 J.C. Rosen, P. Orosan & J. Reiter (1995). Cognitive behavior therapy for negative body image in obese women. *Behaviour Therapy*, 26: 25–42.

### Step 3: From sabotage to success

- 1 K. Murphy, L. Brennan, J. Walkley, J. Reece & E. Little (2011). Primary Goals for Weight Loss Questionnaire (PGWLQ): Development and psychometric evaluation in overweight and obese adults. *Behaviour Change*, 28(1): 29–43.
- 2 J. Polivy & P. Herman (2002). If at first you don't succeed: False hopes of self-change. *American Psychologist*, 57(9): 677–89.
- 3 Ibid.
- 4 G. Buehler, D. Griffin & M. Ross (1994). Exploring the 'planning fallacy': Why people underestimate their task completion times. *Journal of Personality and Social Psychology*, 67: 366–81.
- 5 G.D. Foster, T.A. Wadden, R.A. Vogt & G. Brewer (1997). What is a reasonable weight loss? Patients' expectations and evaluations of obesity treatment outcomes. *Journal of Consulting and Clinical Psychology*, 65: 79–85.
- 6 K.D. Brownell (1991). Dieting and the search for the perfect body: Where physiology and culture collide. *Behaviour Therapy*, 22: 1–12.
- 7 Polivy & Herman (2002), If at first you don't succeed, 679.
- 8 E.J. Dhurandhar, K.A. Kaiser, J.A. Dawson, A.S. Alcorn, K.D. Keating & D.B. Allison (2015). Predicting adult change in the real world: A systematic review and meta-analysis accounting for compensatory changes in energy intake or expenditure. *International Journal of Obesity*, 39: 1181–7.
- 9 T.K. Hansen, R. Dall, H. Hosoda, M. Kojima, K. Kangawa, J.S. Christiansen, J.O. Jørgensen (2002). Weight loss increases circulating levels of ghrelin in human obesity. *Clinical Endocrinology*, 56(2): 203–6.
- 10 J.E. Reseland, S.A. Anderssen, K. Solvoll, I. Hjermann, P. Urdal, I. Holme & C.A. Drevon (2001). Effect of long-term changes in diet and exercise on plasma leptin concentrations. *The American Journal of Clinical Nutrition*, 73(2): 240–5.
- 11 E.J. Dhurandhar, K.A. Kaiser, J.A. Dawson, et al. (2015). Predicting adult change in the real world.
- 12 Adapted from Polivy and Herman's False Hope Syndrome model: Polivy & Herman (2002). If at first you don't succeed.
- 13 For a wonderful discussion on setting whole-person goals with practical examples and a guided daydream meditation to follow along with, see *Sidestep Sabotage & Set Up for Success* (Interview with Libby Babet): [www.weightmanagementpsychology.com.au/sidestep-sabotage-and-set-up-for-success-interview-with-libby-babet](http://www.weightmanagementpsychology.com.au/sidestep-sabotage-and-set-up-for-success-interview-with-libby-babet).
- 14 Russ Harris wrote a book called *The Happiness Trap* (New York: Exisle, 2013), which is another great read if you want to delve into this topic further.
- 15 Scott Pape (2017), *The Barefoot Investor*, Brisbane: John Wiley & Sons.

### Step 4: Make peace with food

- 1 Four and five are Herman and Polivy's, I named one, two and three, although the ideas have certainly been discussed by others well before me.
- 2 L.L. Birch, S.L. Johnson, G. Andresen, J.C. Peters & M.C. Schulte (1991). The variability of young children's energy intake. *The New England Journal of Medicine*, 324: 232–5.
- 3 L.L. Birch & J.O. Fisher (2000). Mothers' child feeding practices influence daughters' eating and weight. *American Journal of Clinical Nutrition*, 71: 1054–61.
- 4 L.L. Birch, J.O. Fisher & K.K. Davison (2003). Learning to overeat: Maternal use of restrictive eating practices promotes girls' eating in absence of hunger. *American Journal of Clinical Nutrition*, 78: 215–20.
- 5 Birch, Johnson, Andresen, Peters & Schulte (1991). The variability of young children's energy intake.
- 6 J.C. Franklin, C.S. Burtrum, J. Brozek & A. Keys (1948). Observations on human behaviour in experimental semistarvation and rehabilitation. *Human Behaviour*, 4(1): 28–45.

- 7 C.P. Herman & D. Mack (1975). Restrained and unrestrained eating. *Journal of Personality*, 43(4): 647–60.
- 8 D. Urbszat, P. Herman & J. Polivy (2002). Eat, drink, and be merry, for tomorrow we diet: Effects of anticipated deprivation on food intake in restrained and unrestrained eaters. *Journal of Abnormal Psychology*, 111(2): 396–401.
- 9 T.L. Tylka, R.M. Calogero & S. Daniélsdóttir (2015). Is intuitive eating the same as flexible dietary control? Their links to each other and wellbeing could provide an answer. *Appetite*, 95: 166–75, 166.
- 10 For this section I combine several areas of research and theory into a workable model I find useful for clients. The research-minded will notice I use a correlational study as supporting evidence (Tylka et al., cited in the previous note) but experimental data – including that cited previously – shows causality. Academics, you’re going to have to trust me that I’m painting an accurate picture or feel free to use the references provided as a starting point for your own research.
- 11 T.L. Tylka & A.M. Kroon Van Diest (2013). The Intuitive Eating Scale-2: Item refinement and psychometric evaluation with college women and men. *Journal of Counseling Psychology*, 60(1): 137–53; C. Framson, A.R. Kristal, J.M. Schenk, A.J. Littman, S. Zeliadt & D. Benitez (2009). Development and validation of the Mindful Eating Questionnaire. *Journal of the American Dietetic Association*, 109(8): 1439–44.
- 12 If you have completed the Psych Profile, you already have a measure of your overall Intuitive Eating Score, as well as measures of the first four principles, in subscales called IE – Unconditional Permission to Eat (Principle 1), IE – Reliance on Hunger and Satiety Cues (Principle 2), I-E Eating for Physical Reasons (Principle 3), and IE Body – Food Choice Congruence (Principle 4). If you haven’t already, you may like to get baseline measures of them now. This may help you to identify principles you most want to work on, and it will certainly help you acknowledge your progress as your scores improve.
- 13 Bacon, Stern, Van Loan & Keim (2005). Size acceptance and intuitive eating improve health. Linda Bacon and her colleagues showed that intuitive eating could be learned by ‘obese, female, chronic dieters’. While I don’t love all of those terms, they reflect a group of people who *should* struggle to become more intuitive eaters. If they can do it you can too!
- 14 Geneen Roth (2003). *Breaking Free from Emotional Eating*. New York: Plume.
- 15 B. Wansik, K. van Ittersum & J.E. Painter (2006). Ice cream illusions: Bowls, spoons, and self-served portion sizes. *American Journal of Preventative Medicine*, 31(3): 240–3.
- 16 M. Peng (2017). How does plate size affect estimated satiation and intake for individuals in normal-weight and overweight groups? *Obesity Science & Practice*, 3(3): 282–8.
- 17 J. Brug, F.J. van Lenthe & S.P.J. Kremers (2006). Revisiting Kurt Lewin: How to gain insight into environmental correlates of obesogenic behaviors. *American Journal of Preventative Medicine*, 31(6): 525–9.
- 18 To learn more about how you can manage food-rich environments and turn social saboteurs into supporters, see *Thursday Therapy #31 Food is Everywhere ... and It’s After Me!* At [www.weightmanagementpsychology.com.au/episode-31](http://www.weightmanagementpsychology.com.au/episode-31).
- 19 E. Tribole and E. Resch (2003). *Intuitive Eating*. London: St Martin’s Griffin, p. 196.
- 20 Ibid.
- 21 R. Kausman (1998). *If Not Dieting, Then What?* Sydney: Allen & Unwin.
- 22 For two more of Lyndi’s tips and some of my own on this common sticking point, see *Thursday Therapy #34: Combining Intuitive Eating & Nutritious Eating (Ft. Lyndi Cohen)* at [www.weightmanagementpsychology.com.au/episode-34-combining-intuitive-eating-and-nutritious-eating](http://www.weightmanagementpsychology.com.au/episode-34-combining-intuitive-eating-and-nutritious-eating).
- 23 L.H. Epstein, C.C. Gordy, H.A. Raynor et al. (2001). Increasing fruit and vegetable intake and decreasing fat and sugar intake in families at risk for childhood obesity. *Obesity Research*, 9(3): 171–8.

- 24 P.Y. Hong, D.A. Lishner & K.H. Han (2014). Mindfulness and eating: An experiment examining the effect of mindful eating on the enjoyment of sampled food. *Mindfulness*, 5(1): 80–7.
- 25 S.A. Giduck, R.M. Threatte & M.R. Kare (1987). Cephalic reflexes: Their role in digestion and possible roles in absorption and metabolism. *Journal of Nutrition*, 117(7): 1991–6.
- 26 B. Baldaro, M.W. Battachi, G. Trombini, D. Palomba & L. Stegagno (1990). Effects of an emotional negative stimulus on the cardiac, electrogastrographic, and respiratory responses. *Perceptual and Motor Skills*, 71(2): 647–55.
- 27 For some great tips on how to free yourself from excessive screen time and mobile phone addiction, see *Thursday Therapy #23 Help! I'm Addicted to My Phone!* at [www.weightmanagementpsychology.com.au/episode-23](http://www.weightmanagementpsychology.com.au/episode-23).
- 28 R.W. Jeffrey & S.A. French (1998). Epidemic obesity in the United States: Are fast foods and television viewing contributing? *American Journal of Public Health*, 88(2): 277–80.
- 29 L.A. Tucker & M. Bagwell. (1991). Television viewing and obesity in adult females. *American Journal of Public Health*, 81(7): 908–11.
- 30 Jeffrey & French (1998). Epidemic obesity in the United States; Tucker & Bagwell (1991). Television viewing and obesity in adult females.
- 31 M. Story & P. Faulkner (1990). The prime time diet: A content analysis of eating behavior and food messages in television program content and commercials. *American Journal of Public Health*, 80(6): 738–40.
- 32 E.M. Blass, D.R. Anderson, H.L. Kirkorian, T.A. Pempek, I. Price & M.F. Koleini (2006). On the road to obesity: Television viewing increases intake of high-density foods. *Physiology & Behavior*, 88: 597–604.
- 33 F. Bellisle, A.M. Dalix & G. Slama (2004). Non food-related environmental stimuli induce increased meal intake in healthy women: Comparison of television viewing versus listening to a recorded story in laboratory settings. *Appetite*, 43: 175–80.
- 34 J. Brunstrom & G.L. Mitchell (2006). Effects of distraction on the development of satiety. *British Journal of Nutrition*, 96: 761–9.
- 35 Blass, Anderson, Kirkorian, Pempek, Price & Koleini (2006). On the road to obesity.
- 36 Thomas Kurz (2003). *Stretching Scientifically: A Guide to Flexibility Training*, Island Pond, VT: Stadion.
- 37 For further support with this, including a mindful eating activity you can follow along with in real time, watch *Thursday Therapy #51 Overcome Fear of Forbidden Foods*: [www.weightmanagementpsychology.com.au/episode-51-overcome-fear-of-forbidden-foods](http://www.weightmanagementpsychology.com.au/episode-51-overcome-fear-of-forbidden-foods).
- 38 P.B. Stapleton, T. Sheldon & B. Porter (2012). Clinical benefits of emotional freedom techniques on food cravings at 12-months follow up: A randomized controlled trial. *Energy Psychology*, 4(1): 1–12.
- 39 P. Stapleton, A.J. Bannatyne, K. Urzi, B. Porter & T. Sheldon (2016). Food for thought: A randomised controlled trial of emotional freedom techniques and cognitive behavioural therapy in the treatment of food cravings. *Applied Psychology: Health and Wellbeing*, 8(2): 232–57.
- 40 P.B. Stapleton & H. Chatwin (2018). Emotional freedom techniques for food cravings in overweight adults: A comparison of treatment length. *OBM Integrative and Complementary Medicine*, 3(3), doi: 10.21926/obm.icm.1803014.
- 41 For more on this, listen to *The Glenn Mackintosh Show Podcast #3 The Science Behind Tapping with Dr Peta Stapleton*: [www.weightmanagementpsychology.com.au/petastapleton](http://www.weightmanagementpsychology.com.au/petastapleton)
- 42 The parts that were activated were mainly around the superior temporal gyrus (an area activated by food cues) and the lateral orbitofrontal cortex (which is associated with reward, emotion, decision-making and olfactory and taste information). These parts of the brain perform many functions and, this being the first study, I'm sure we have a lot to

learn. It's only recently that fMRIs have been used for wide-scale research, so watch this space.

- 43 We have been researching this program and have a two-year follow-up trial in publication: P. Stapleton, T. Roose, G. Mackintosh, E. Sparenburg, D. Sabot & B. Carter (in press). Online delivery of emotional freedom techniques in the treatment of food cravings and weight management: A randomised trial. *OBM Integrative and Complementary Medicine*. I'm extremely proud of this, as it is the longest follow-up period for research into tapping and food issues to date and the first ever trial of online delivery of tapping for any issue in the world. Our analysis of the data shows online tapping achieves comparable results to face-to-face tapping.

### Step 5: Fall in love with movement

- 1 K. Allen & M.C. Morey (2010). Physical activity and adherence. In H. Bosworth (ed.), *Improving Patient Treatment Adherence*. New York: Springer, pp. 9–38.
- 2 IBISWorld (2018). *Gyms and Fitness Centres – Australia Market Research Report*, <https://www.ibisworld.com.au/industry-trends/market-research-reports/arts-recreation-services/gyms-fitness-centres.html>.
- 3 With estimates of around 27 per cent. See D. Ross (2018). Lazy Aussies wasting \$1.8 billion on unused gym memberships, news.com, 23 September, [www.news.com.au/finance/money/costs/lazy-aussies-wasting-18-billion-on-unused-gym-memberships/news-story/6243cf35a8424a8dfa212ea17c1a0208](http://www.news.com.au/finance/money/costs/lazy-aussies-wasting-18-billion-on-unused-gym-memberships/news-story/6243cf35a8424a8dfa212ea17c1a0208). I couldn't find any data on this in peer-reviewed studies (I suppose, why would a gym want to give it out?).
- 4 Fitness Australia (2017). *Australian Fitness Industry Retention Report 2017*, Sydney.
- 5 Allen & Morey (2010). Physical Activity and Adherence.
- 6 L. Jones, C.I. Karageorghis & P. Ekkekakis (2014). Can high-intensity exercise be more pleasant? Attentional dissociation using music and video. *Journal of Sport and Exercise Psychology*, 36(5): 528–41; S.H. Boutcher & M. Trenske (1990). The effects of sensory deprivation and music on perceived exertion and affect during exercise. *Journal of Sport and Exercise Psychology*, 12(2): 167–76; D. Kendzierski & K.J. DeCarlo (1991). Physical Activity Enjoyment Scale: Two validation studies. *Journal of Sport and Exercise Psychology*, 13(1): 50–64.
- 7 Boutcher & Trenske (1990). The effects of sensory deprivation and music on perceived exertion and affect during exercise.
- 8 Kendzierski & DeCarlo (1991) Physical Activity Enjoyment Scale: Two Validation Studies.
- 9 S.M. Burke, A.V. Carron, M.A. Eys, N. Ntoumanis & P.A. Estabrooks (2005). Group versus individual approach? A meta-analysis of the effectiveness of interventions to promote physical activity. *Sport & Exercise Psychology Review*, 2(1): 19–35.
- 10 J. Jakicic, R. Wing, B. Butler & J.R. Robertson (1995). Prescribing exercise in multiple short bouts versus one continuous bout: Effects on adherence, cardiorespiratory fitness, and weight loss in overweight women. *International Journal of Obesity and Related Metabolic Disorders*, 19: 893–901.
- 11 J.F. Sallis, W.L. Haskell, S.P. Fortmann, K.M. Vranizan, C.B. Taylor & D.S. Solomon (1986). Predictors of adoption and maintenance of physical activity in a community sample. *Preventive Medicine*, 15(4): 331–41.
- 12 J. Rimer, K. Dwan, D.A. Lawlor, C.A. Greig, M. McMurdo, W. Morley & G.E. Mead (2012). Exercise for depression. *Cochrane Database of Systematic Reviews*, 7, CD004366. doi: 10.1002/14651858.CD004366.pub5. This is not to say that you should stop taking medication or seeing your therapist. In fact, research suggests that the effects of these three approaches are *additive*, meaning they achieve a better result together than individually. I have had dozens of clients who have worked with their doctors to reduce medications following a combination of psychology and movement, and also clients who have benefited from starting medication to help the psychology and movement become

- more effective. It must be noted that when I present this data to psychologists, they inevitably reply ‘but psychology is the only thing that resolves the underlying problem’, and there is some truth to that. It’s about combining them in a way that works for you.
- 13 T.M. DiLorenzo, E.P. Bargman, R. Stucky-Ropp, G.S. Brassington, P.A. Frensch & T. LaFontaine (1999). Long-term effects of aerobic exercise on psychological outcomes. *Preventive Medicine*, 28(1): 75–85; H. Hausenblas & E. Fallon (2006). Exercise and body image: A meta-analysis. *Psychology & Health*, 21: 33–47.
  - 14 See John Ratey (2008). *Spark. The Revolutionary New Science of Exercise and the Brain*. New York: Little, Brown and Co for a review on this topic.
  - 15 K.C. Young, K.A. Machell, T.B. Kadshan & M.L. Westwater (2017). The cascade of positive events: Does exercise on a given day increase the frequency of additional positive events? *Personality and Individual Differences*, 120: 299–303.
  - 16 K. Mikkelsen, L. Stojanovska, M. Polenakovic, M. Bosevski & V. Apostolopoulos (2017). Exercise and mental health. *Maturitas*, 106: 48–56.
  - 17 Of course, true exercise addiction is a real and debilitating condition. But it’s also often a product of thinsanity and an unhealthy relationship with exercise, so the principles in this book will only guide you away from the negative elements of addiction to exercise.
  - 18 The authors of the review on exercise and depression acknowledged we don’t know enough about the exact circumstances, types and durations of exercise that people find most beneficial, and stated (p. 19) that, ‘A pragmatic approach would be to recommend that patients choose a form of exercise which they will enjoy.’ We’re with you, researchers – especially given research showing that varying ways of moving your body can have very similar effects.
  - 19 A.M. Lane & D.J. Lovejoy (2001). The effects of exercise on mood changes: The moderating effect of depressed mood. *The Journal of Sports Medicine and Physical Fitness*, 41(4): 539–45.
  - 20 To measure the longer-term effects of movement on your mental health, use the Perceived Stress, Depressed and Anxious Moods, and Self-Esteem scales on your Psych Profile.
  - 21 S.S. Lennox, J.R. Bedell & A.A. Stone (1990). The effect of exercise on normal mood. *Journal of Psychosomatic Research*, 34(6): 629–36.
  - 22 Download as many *movement and my mind experiment* sheets from the free resources page of our website as you like: [www.weightmanagementpsychology.com.au/free-resources](http://www.weightmanagementpsychology.com.au/free-resources).
  - 23 For further support with this and other common barriers to getting into formal movement, see *Thursday Therapy #36 Getting the Confidence to Go to the Gym, with Libby Babet*: [www.weightmanagementpsychology.com.au/episode-36-getting-the-confidence-to-go-to-the-gym](http://www.weightmanagementpsychology.com.au/episode-36-getting-the-confidence-to-go-to-the-gym).
  - 24 For the whole interview, listen to *The Glenn Mackintosh Show Podcast #1 Unleash Your Inner Athlete at ANY Size*: [www.weightmanagementpsychology.com.au/louisegreen](http://www.weightmanagementpsychology.com.au/louisegreen).
  - 25 E. Ivanova, D. Jensen, J. Cassoff, F. Gu & B. Knäuper (2015). Acceptance and commitment therapy improves exercise tolerance in sedentary women. *Medicine and Science in Sports and Exercise*, 47(6): 1251–8.
  - 26 I. Kirsch, G. Montgomery & G. Sapirstein (1995). Hypnosis as an adjunct to cognitive-behavioural psychotherapy: A meta-analysis. *Journal of Consulting and Clinical Psychology*, 63(2): 214–20.
  - 27 I. Kirsch (1996). Hypnotic enhancement of cognitive-behavioural weight loss treatments – another meta-reanalysis. *Journal of Consulting and Clinical Psychology*, 64(3): 517–19, 517.
  - 28 For more information on hypnotherapy, see *Thursday Therapy #7 What is Hypnosis – and Can It Help Me Lose Weight?:* [www.weightmanagementpsychology.com.au/episode-7](http://www.weightmanagementpsychology.com.au/episode-7).
  - 29 F. Frasilho, D. Oakley & D. Ross-Anderson (1998). Hypnotizability and body-image malleability in restrained and non-restrained eaters. *Contemporary Hypnosis*, 15(2): 84–93.

## Step 6: Nurture your inner self

- 1 J.A. Redlin, R.G. Miltenberger, R.D. Crosby, G.E. Wolff & M.I. Stickney (2002). Functional assessment of binge eating in a clinical sample of obese binge-eaters. *Eating and Weight Disorders*, 7(2): 106–15.
- 2 P. Rozin, C. Fischler, S. Imada, A. Sarubin & A. Wrzesniewski (1999). Attitudes to food and the role of food in life in the USA, Japan, Flemish Belgium and France: Possible implications for the diet-health debate. *Appetite*, 33(2): 163–80.
- 3 V. Ricca, G. Castellini, C. Lo Sauro, C. Ravalidi, F. Lapi, E. Mannucci, C.M. Rotella & C. Faravelli (2009). Correlations between binge eating and emotional eating in a sample of overweight subjects. *Appetite*, 53(3): 418–21; S. Pinaquy, H. Chabrol, C. Simon, J. Louvet & P. Barbe (2003). Emotional eating, alexithymia, and binge-eating disorder in obese women. *Obesity Research*, 11(2): 195–201.
- 4 W.S. Carlos Poston, J.P. Foreyt & G.K. Goodrick (1997). The Eating Self-Efficacy Scale. In S. St Jeor (ed.), *Obesity Assessment: Tools, Methods, Interpretations*. London: Chapman and Hall, pp. 317–25.
- 5 J.P. Foreyt, R.L. Brunner, G.K. Goodrick, G. Cutter, K.D. Brownell & S.T. St Jeor (1995). Psychological correlates of weight fluctuation. *International Journal of Eating Disorders*, 17(3): 263–75.
- 6 Ibid.; S. Byrne, Z. Cooper & C. Fairburn (2003). Weight maintenance and relapse in obesity. *International Journal of Obesity*, 27(8): 955–62.
- 7 M.A. Ouwens, T. van Strien & J.F. Leeuwe (2009). Possible pathways between depression, emotional and external eating: A structural equation model. *Appetite*, 53(2): 245–8.
- 8 S.T. Spoor, M.H. Bekker, T. van Strien & G.L. van Heck, (2007). Relations between negative affect, coping, and emotional eating. *Appetite*, 48: 368–76.
- 9 N.D. Volkow & R.A. Wise, (2005). How can drug addiction help us understand obesity? *Nature Neuroscience*, 8: 555–60.
- 10 G. Wang, N. Volkow, J. Logan, et al. (2001). Brain dopamine and obesity. *The Lancet*, 357: 354–7.
- 11 J. Alsiö, P.K. Olszewski, A.H. Norbäck et al. (2010). Dopamine D1 receptor gene expression decreases in the nucleus accumbens upon long-term exposure to palatable food and differs depending on diet-induced obesity phenotype in rats. *Neuroscience*, 171(3): 779–87.
- 12 I. Katsounari & N. Zeeni (2012). Preoccupation with weight and eating patterns of Lebanese and Cypriot female students. *Scientific Research*, 3(6): 507–12.
- 13 F. Kong, Y. Zhang & Z. You (2013). Body dissatisfaction and restrained eating: Mediating effects of self-esteem. *Social Behaviour and Personality*, 41(7): 1165–70.
- 14 R.A. Andrews, R. Lowe & A. Clair (2011). The relationship between emotional eating and basic need satisfaction in obesity. *Australian Journal of Psychology*, doi: 10.1111/j.1742-9536.2011.00021.x.
- 15 F.F. Sneihotta, S.A. Simpson & C.J. Greaves (2014). Weight loss maintenance: An agenda for health psychology. *British Journal of Health Psychology*, 19(3): 459–64, 461.
- 16 To learn more about the reflective and impulsive systems and how they relate to choice-making, see *Thursday Therapy #29 I Know What to Do but I Just Can't Do It*: [www.weightmanagementpsychology.com.au/episode-29](http://www.weightmanagementpsychology.com.au/episode-29).
- 17 The capital 'S' is deliberate, referring to the greater, unified or whole Self. To learn more about looking deeper in order to completely heal from emotional and binge eating, listen to *The Glenn Mackintosh Show Podcast #4: Stop Self-sabotage and End Binge Eating with Dr Julie T Anné*: [www.weightmanagementpsychology.com.au/drjulietanne](http://www.weightmanagementpsychology.com.au/drjulietanne).
- 18 I always laugh to myself about this resource. Of all the time I've spent creating workshops, online programs and other resources, this one took less than an hour to create and is one of the most useful tools I have – go figure! See [www.weightmanagementpsychology.com.au/free-resources](http://www.weightmanagementpsychology.com.au/free-resources).

- 19 The HAES® approach is fiercely weight neutral. While my approach de-emphasises weight, it doesn't completely take it off the table for all clients and is thus inconsistent with a pure HAES® approach.
- 20 If you feel truly unsafe acknowledging some feelings and/or feel that some life challenges are too significant to deal with on your own, this is the perfect time to seek the help of a qualified therapist.

### **Step 7: 'Layer up' with healthy habits**

- 1 G. Cleo, P. Glasziou, E. Beller, E. Isenring & R. Thomas (2018). Habit-based interventions for weight loss maintenance in adults with overweight and obesity: A randomized controlled trial. *International Journal of Obesity*, doi: 10.1038/s413660180067.
- 2 For the whole interview, listen to *The Glenn Mackintosh Show Podcast #6 Creating Healthy Habits with Dr Gina Cleo*: [www.weightmanagementpsychology.com.au/ginacleo](http://www.weightmanagementpsychology.com.au/ginacleo).
- 3 M. Behara, A.D. Hutchinson & C.J. Wilson (2013). Does mindfulness matter? Everyday mindfulness, mindful eating and self-reported serving size of energy dense foods among a sample of South Australian adults. *Appetite*, 67: 25–9.
- 4 C. Framson, A.R. Kristal, J. Schenk, A.J. Littman, S. Zeliadt & D. Benitez (2009). Development and validation of the Mindful Eating Questionnaire. *Journal of the American Dietetic Association*, 109(8): 1439–44.
- 5 S. Taheri, L. Lin, D. Austin, T. Young & E. Mignot (2004). Short sleep duration is associated with reduced leptin, elevated ghrelin, and increased Body Mass Index. *PLoS Med*, 1(3): e62, doi: 10.1371/journal.pmed.0010062.
- 6 P. Lally & B. Gardner (2013). Promoting habit formation. *Health Psychology Review*, 7(1): 137–58.
- 7 To learn more about self-compassion follow the magnificent work of Dr Kristin Neff: [www.self-compassion.org/](http://www.self-compassion.org/).

### **Bonus step: Become a body-positive badass!**

- 1 I focus on these as they are my area of expertise and the topic of this book. It has to be acknowledged that the body-positive movement extends far beyond weight into areas such as physical ability, race, gender, sexuality and socio-economic status.
- 2 R. Cohen, J. Fardouly, T. Newton-John & A. Slater (2019). #BoPo on Instagram: An experimental investigation of the effects of viewing body-positive content on young women's mood and body image. *New Media & Society*, 21(7): 1546–64.
- 3 Mahatma Gandhi (1964). *The Collected Works of Mahatma Gandhi, Volume Twelve*. Delhi: Ministry of Information and Broadcasting, p. 158.