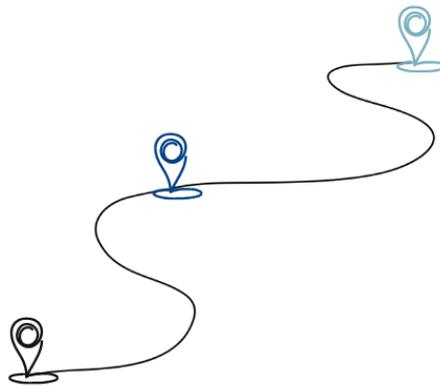

Weight Basics

Introducing You to Weight



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Chapter Goals

- Learn what weight is and how it is maintained
- Learn about a gold-standard treatment for weight
- Start to identify your own weight patterns

What is Weight?

The question ‘What is Weight?’ seems to have an obvious answer. However, weight is a complicated subject. How many pounds you weigh can be categorized as



underweight, normal weight, overweight, and obese using a **Body Mass Index** (BMI) calculation. BMI can indicate the relative amount of body fat on an individual’s frame but does not directly calculate body fat percentage. Although imperfect—BMI tends to overestimate body fat in those with a lean body mass (for example, athletes or bodybuilders) and underestimates excess body fat in those with an increased body mass—BMIs above 25 to 29 are considered **overweight** and BMIs 30 or above are considered **obese**. Excess weight increases the risk of developing health complications, such as hypertension, diabetes, sleep apnea, and pain, with higher weights being associated with higher risks (Zierle-Ghosh & Jan, 2025).

Why weight sticks around and how to manage weight is the focus of this workbook. Excess weight can persist for various reasons, including physiological and psychological reasons. Not everyone in an obesogenic environment (that is, environments that encourage overeating and inactivity) develops obesity. Hormones that regulate hunger and eating behaviors can become dysregulated

through gene/environment interactions (Bouret et al., 2015; Levin, 2010). Unintentional patterns of grazing along with being preoccupied with food for pleasure or to reduce negative emotions are psychological factors that contribute (Raman et al., 2023).

We can think of weight maintenance as a cycle. Here's an example of such a cycle. As you read, take note of anything with which you can relate. It's okay if you don't quite understand what is outlined here or if your situation is a bit different. Your therapist can help.

Those experiencing excessive weight likely have genetic and environmental vulnerabilities that encourage overeating and inactivity. Once exposed to these conditions, eating and inactivity can provide many, for example, social connection, positive emotions, relief, and relaxation. As behaviors that encourage weight continue, they also become fairly automatic or *habitual*. People can find themselves grazing throughout the day in various places of their home. Some compensate by skipping meals, which can further disrupt their hunger drive and lead to overeating when they inevitably do eat. Some have negative thoughts about themselves as a result of uncontrolled eating, which can increase negative emotions and subsequent eating. As weight increases, daily activities become more and more difficult as they require more energy and pain may become a deterrent. Physical activity decreases and metabolism slows, thereby making it harder to lose weight.

Despite this continuous and automatic cycle, we can still make changes. Many researchers and clinicians agree that identifying patterns of attending,

thinking, feeling, and acting that keep us stuck and practicing new ways of responding can really help us lose weight and move us closer to a life worth living (Samdal et al., 2017). Making changes can even be observed in our nervous system, which inherently responds to our environments and can be shaped by our experiences (Lien et al., 2009; Linden, 2006). However, we need to start by getting a better sense of your own experiences with weight.

Although there are common patterns across people, excess weight can look a little different from person to person, especially when considering the culture in which people live. Take a moment to write down your experience with weight: (1) when and where you overeat or stay sedentary the most, (2) how your weight feels—such as what you notice in your body, (3) what you tend to pay attention to as it relates to your weight, (4) how or what you tend to think about as it relates to your weight, and (5) what you tend to do *or* not do that contributes to weight gain. Write down whatever currently comes to mind.

Cognitive Behavioral Therapy

Cognitive Behavioral Therapy (CBT) has been adapted to treat different psychological disorders within different cultures (Naeem et al., 2019). It is considered a “gold-standard” treatment because it is the most effective and reliable treatment with enduring long-term benefits (David et al., 2018; Samdal et al., 2017). The basic idea

behind CBT is that different events

can trigger different

responses—attention, thoughts,

feelings, and actions. This happens

because at some point in our lives,

we learned to respond to certain

events in particular ways. We call

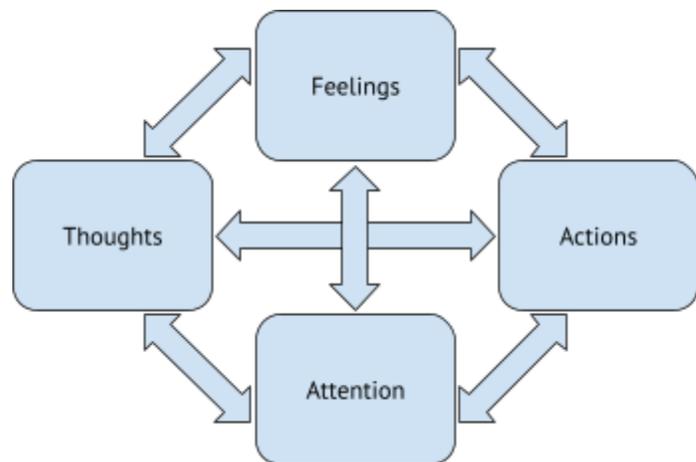
this our “learned history,” which includes our personal experiences as well as

cultural expectations. These responses can actually impact one another and end up

forming one’s binge eating disorder. Characteristic responses of binge eating

include:

- **Attention** - Towards food and weight, away from physical activity
- **Thoughts** - “I broke my diet, might as well give up.”
- **Feelings** - Hunger, cravings towards foods
- **Actions** - Grazing throughout the day, skipping meals



How these responses are triggered and maintained is what you and your therapists will uncover together. Developing this understanding is what we call a **case formulation** and it directly informs what your treatment will look like.

It is helpful to have clear expectations through treatment. CBT can help you improve your binge eating by helping you notice the thoughts, feelings, actions, and attention that keep you stuck as well as guide you towards new ways of responding. However, CBT isn't guaranteed and there are a lot of factors that impact how

successful someone may

be—for example, how

many sessions you have,

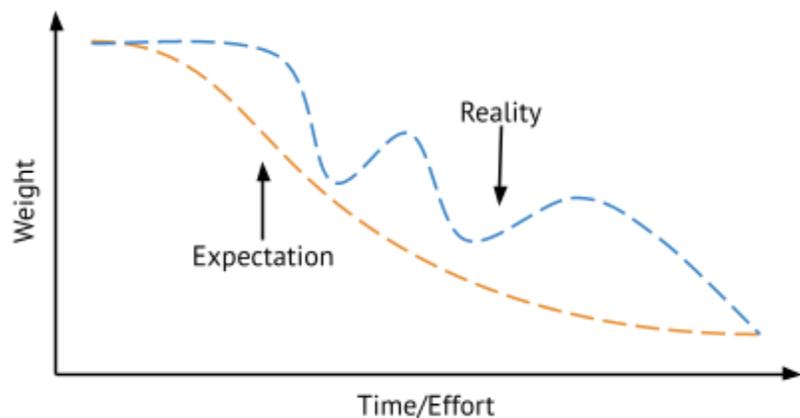
how much effort you put

into change, how

supportive your

environment is, etc. If you

do see improvements, they likely won't be linear.



There are a number of what we call “core clinical change processes” that you and your therapists will consider when developing your **treatment plan**—for example, goal setting, self-monitoring, stimulus control, etc. Aside from structured dietary guidance and exercise plans, a common change process used in weight management programs is stimulus control (Forman et al., 2023), which has to do with changing a person's environment and creating new associates so that the problematic behaviors are less likely to occur and more desired behaviors are more

likely to occur. Stimulus control helps create a routine so that particular times and places automatically trigger different eating and exercising behaviors. Each process comes with different change techniques, which you could think of as different skills.

Keep in mind that CBT is an effortful process. It is imperative that once you learn a new technique/skill, you practice it over and over and over again. We want you to retain your new pattern of responding so that it—and not the problem pattern—becomes automatic. You may find that you take two steps forward and one step back. This is normal. Change is hard and it takes time to develop new patterns. Try not to get too discouraged. Anything worth doing is typically hard. Remember, if you're ever having a hard time understanding anything in this workbook or doing the activities in this workbook, reach out to your therapist.

Illuminating Your Patterns

What we mean by that is, shine a big ol' light on your weight cycle. Really look at the events and subsequent responses—attention, thoughts, feelings, and actions—that keep you stuck. This process, which we call **self-monitoring**, can increase the likelihood of changing unproductive habits (Zhao et al., 2021). Put simply, we can't change something that we aren't aware of.

To do this, you will need to make note of five things: events, attention, thoughts, feelings, and actions. **Events** are the triggers for eating and inactivity. Situations you are in can automatically trigger specific responses. These situations can be anything, such as standing in your kitchen, sitting on your couch. Triggers

can also be various emotions that you may be experiencing. Sometimes we can change these events. Oftentimes we are changing how you respond to them. Both can be useful strategies.

<p>Attention is where your focus is. It is the built-in flashlight that we have. It is what you notice outside and inside your body. What we attend to can bias our cognitive processing. Do you find yourself overly focused on food or engaging in sedentary activities? Do you become hooked by thoughts about how difficult and not worth change is?</p>	<p>Thoughts are how you make sense of things that have happened. Sometimes how we perceive an event is more important than the event itself. For instance, what does it mean about you and your efforts that you ate outside your scheduled meal plan? This all-or-nothing thinking is common and can deter progress.</p>
<p>Feelings are the sensations in your body. They are the body's way of telling us that something is amiss or needs to be addressed. However, feelings can be learned and removed from any actual problem. Oftentimes people who are overweight or obese may feel hungry even though they are getting enough calories.</p>	<p>Actions are the things you do to try to address or cope with the events or feelings. They can serve us in the short-run or the long-run. Grazing while standing in the kitchen typically serves a purpose (that is, doing something when you are bored). Activities that improve your weight may be hard, but worth it in the long-run.</p>

See the next page for your first “Change Task,” which outlines how to monitor your binge eating along with a helpful worksheet.





Change Task

Illuminate Your
Weight Cycle

It is helpful to get in the habit of tracking the ebb and flow of your eating, inactivity, and weight cycle. So, what are your triggers and what does your cycle look like—your attention, thoughts, feelings, and actions? On the flip side, what improves your eating and activity towards weight loss? If you are unclear on whether something is a trigger or not, just write down what is going on during or just before you are eating or inactivity. You can start to monitor your weight cycle using the worksheet on the next page. It's helpful to get a couple weeks of data before you can start to see a pattern emerge. As you monitor, write down the events and responses as soon as you can. You may find that it is helpful to keep this workbook with you or jot down some notes on a piece of paper and then transfer your notes to this worksheet.

Self-Monitoring Worksheet

Events The triggers of your eating and inactivity	Attention What you tend to notice or focus on	Thoughts How you make sense of different events	Feelings The sensations in your body	Actions How you cope with the event or feelings

Chapter Summary

You have learned quite a bit in this chapter. You learned:

1. that eating and inactivity are common responses that can create problems,
2. that weight can be viewed as a cycle of psychological responding,
3. how cognitive-behavioral therapy can help,
4. what are reasonable expectations for progress through treatment,
5. the difference between events, attention, thoughts, feelings, and actions, and
6. the importance of knowing your weight cycle.

Your **change task** for the week is to write down when and where you are eating or inactivity and any responses—attention, thoughts, feelings, and actions—before or during.

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