

Resilient Health at Any Size

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Background

- Chronic disease affects nearly one out of every two adults in America (CDC, 2014).
- Heart disease and cancer account for nearly half of all deaths (CDC, 2013).
- More than one-third of adults in the U.S. are classified as “obese” (CDC, 2013).
- Obesity is frequently blamed for the onset of chronic health conditions and the associated health care costs.

Background

- Correlation vs. Causation.
 - Confounding factors are rarely considered when analyzing the relationship between weight and disease (Campos, Saguy, Ernsberger, Oliver, & Gaesser, 2006).
 - Changes in lifestyle habits can improve health, regardless of changes in weight (Bacon & Aphramor, 2011).

Background

- Dieting is mostly ineffective.
 - 95% failure rate (Ikeda et al., 2005).
 - Weight cycling (Bacon & Aphramor, 2011).
 - Cumulative weight gain (Mann et al., 2007).

Non-Diet Approach

- Call for a paradigm shift.
 - Guiding principles of the Health At Every Size® (HAES) approach:
 1. Accept and respect diversity of body shapes and sizes.
 2. Recognize that health is multi-dimensional.
 3. Promote all aspects of health for people of all sizes.
 4. Promote eating in a manner which balances individual nutritional needs, hunger, satiety, appetite, and pleasure.
 5. Promote individually appropriate, enjoyable, life-enhancing physical activity, rather than exercise that is focused on a goal of weight loss.

Non-Diet Approach

- Non-Diet approaches include:
 - Respect for size diversity.
 - Intuitive eating.
 - Joyful movement.
 - Body acceptance.

Non-Diet Approach

- Prior HAES studies found improvements in:
 - Physiological measures and physical activity (Rapoport, Clark & Wardle, 2000; Bacon, 2005).
 - Eating behaviors (Provencher et al., 2009).
 - Depression (Bacon, 2005; Robison, Putnam & McKibbin, 2007).
 - Self-esteem (Ciiiska, 1998; Bacon 2005).

HAES Study Example (Bacon, 2005)

- Traditional Weight Loss (Diet) Group.
 - Instructed in calorie restriction, nutrition, exercise, and social support.
- Health at Every Size Group.
 - Instructed in body-acceptance, eating behavior, nutrition, physical activity, and social support.

HAES Study Example: Results

	HAES Group	Diet Group
Weight	No change.	Lost weight, then regained.
LDL Cholesterol	Improved.	Short term improvements.
Blood Pressure	Improved.	Short term improvements.
Physical Activity	Increased.	No change.
Depression	Improved.	No change.
Self-Esteem	Improved.	Worsened.

Limitations of Non-Diet Approaches

- Often considered a “dieting alternative.”
- Less focus on resilience and integrative health methods.

Resilience

- Resilience training aims to help individuals access resilient qualities, or personal strengths, via the resilient drives (Richardson, 2002).

Resilient Drives

- **Essential:** The drive to meet one’s physical needs.
- **Childlike:** The drive to explore and have fun. This drive motivates a person to be curious, playful, adventurous, and creative.
- **Noble:** The drive to feel valued and have meaning in life; to be altruistic and live with purpose; to feel self-esteem and self-efficacy.
- **Character:** The drive to live within one’s chosen moral framework.

Resilient Drives

- **Ecological:** The drive to be enriched by one's ecosystem.
- **Synergistic:** The drive to connect with others.
- **Universal:** The drive to find strength and wisdom beyond oneself.
- **Intellectual:** The drive to become aware of and understand the subtle cues of the other resilient drives.



Psychological Wellbeing

- Resilience training can improve psychological wellbeing (Waite & Richardson, 2004).
- Psychological wellbeing is associated with health.
 - Regular exercise.
 - Healthy diet.
 - Avoidance of substance abuse.
 - Reduced risk of illness.
 - Reduced risk of heart attack and stroke.

Lyubomirsky, King & Diener, 2005; Pressman & Cohen, 2005; Steptoe, Dockray & Wardle, 2009; Kim, Sun, Park, Kubzansky & Peterson, 2013; Chida & Steptoe, 2008

Non-Diet/Resilience Hybrid Program

- Designed a new program, “Live Health Positive,” that combined resilience training and self-compassion with the non-diet (HAES) approach.
- Conducted a study to determine the efficacy of and participant experiences with the combined non-diet/resilience health education program.

Non-Diet/Resilience Hybrid Program

- Participants.
- Study Procedures.
 - Program description.
 - Sample program activity.
- Results.
 - Experiences with the program (qualitative).
 - Changes in attitudes and behaviors (quantitative).

Results: Qualitative

- Participant experiences included:
 - Feeling connected to classmates.
 - Developing self-awareness.
 - Practicing self-kindness.

Results: Quantitative

- Program outcomes included:
 - Significant increase in intuitive eating.
 - Significant increase in enjoyment motivations for physical activity.
 - Increase in self-compassion.

Future Directions

- How can you use a non-diet approach in your integrative health practice?