

The Mythology of Dieting: Part II

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Recently, I was walking down the hall of the community hospital where I work and my attention was drawn to some intensely coloured flyers placed strategically along the walls. The flyers showed streamers and champagne bottles, sparkles and balloons – I instantly thought that there must be an upcoming celebration, so I took a closer look, excited at the prospect of a party. The flyer read: “Make Your Y2K Resolution Now!” Below the heading was information about the “diet at work” programme given by a very popular weight-loss company, which I won’t name, offered right in my own workplace. I was disappointed as my hopes of a party were dashed. I was also amused and dismayed at the marketing strategy taken by the company. The idea that the celebration of a new millennium should be associated with going on a diet seems preposterous. We all know that going on a diet or depriving ourselves of the foods that we enjoy is anything *but* a party and is most definitely *not* fun. What this advertisement does is perpetuate the mythology of dieting – the myth, or *fiction*, that weight loss leads to health, happiness, beauty and success. This article examines the most common myths of dieting, reviewing evidence to show that many of our commonly held beliefs about the virtues of dieting are, in reality, more fiction than fact.

Myth # 1: weight loss makes you healthier

In the 1950s, the medical profession considered it to be unhealthy to be underweight. Underweight people were thought to be more vulnerable to physical illness and disease. A large, robust physique was associated with vitality and a strong immune system. This view was endorsed by the medical profession and products were available to help people gain a few extra pounds. For the past few decades, however, the opposite view has dominated. The medical profession associates overweight with ill health, and perhaps the most common advice given to patients is to lose some weight. However, a close inspection of the evidence shows that in the long run, weight loss actually does not make you healthier and, in fact, may be harmful to your health.

A review of the research examining the relationship between weight loss and health was recently conducted by Paul Ernsberger (1999). He found that the belief that losing weight improves health is primarily based on research showing that weight loss is an effective treatment for decreasing risk factors related to coronary heart disease (e.g., blood pressure, cholesterol) and treating disease (e.g., diabetes and hypertension). However, this conclusion is based on data examining the **short-term** benefits of weight loss. These data are typically collected while participants are still on the weight-loss programme. The **long-term** benefits of weight loss are far less favourable. Some research shows that it is the initial rapid weight loss that is beneficial and any health gains made are lost once the

diet is no longer followed. Other research shows that health benefits diminish over time, even when weight loss is maintained. It is true that weight-loss programmes can produce health benefits, especially programmes focusing on permanent lifestyle change, increased physical activity, and healthier food choices. However, these lifestyle changes can be made without a focus on losing weight. In addition, medications are becoming an increasingly effective alternative for treating the illnesses (e.g., hypertension, high cholesterol and Type 2 diabetes) where weight loss as a primary line of treatment is recommended.

In the long term, weight-loss may actually be harmful to health. Regardless of the intervention programme followed, weight loss is seldom permanent and when weight is regained, not only are the short-term health benefits lost, but often the risk factors are worse than they were before the initial weight loss. An increased risk of death due to heart attack in individuals who lose and regain weight (weight-cyclers) may be explained by a worsening of risk factors after weight regain. In addition, weight-loss programmes may lead to binge eating. This may be extremely harmful to those with chronic disease and may interfere with treatment of high blood pressure and high cholesterol.

Conclusion: Dieting to lose weight is unlikely to improve your long-term health and may even worsen it.

Myth # 2: going on a diet makes you eat less

It would seem obvious that dieting involves eating less. Certainly, when one goes on a diet, one *attempts* to eat less. However, the evidence shows that dieters often eat the same amount as do non-dieters. Moreover, in response to a number of circumstances (e.g., feelings of anxiety or depression, exposure to alcohol or forbidden foods) dieters actually eat *more* than non-dieters. The psychological deprivation of dieting involves denying ourselves of foods we enjoy and this has the effect of increasing our desire for those foods that become viewed as *forbidden*. Thus, in reality, most dieters have an eating pattern that involves periods of eating minimally punctuated by periods of overeating, and for some people, bingeing.

Myth # 3: dieting makes you lose weight

It is a widely held belief that anyone can lose weight with the right diet and enough will power. In fact, there is overwhelming evidence to show that diets do not work. In the short term, you may lose weight, but 90 per cent of individuals who undergo weight-loss programmes regain all of the weight they lost and often more, usually within one year of completing the programme. We can no more control our weight than we can our shoe size or our height. It is this fact that the weight-loss companies, such as the one mentioned above, bank on. If diets truly worked, there would not be a 30 billion-dollar diet industry.

Evidence shows that our weight naturally regulates itself and that dieting is a good way to disrupt our natural regulatory cycle. When we eat less, our metabolisms slow down and our bodies become more efficient at storing energy, protecting us against the “food shortage” by making it easier to gain weight. This increased propensity for weight gain combined with the increased vulnerability to overeating makes dieting the best way to gain weight! A number of studies have found that dieting does not lead to decreased weight over time but actually may lead to weight *gain*. For example, a recent community study conducted over a four-year period found that adolescent girls who engaged in extreme efforts to lose weight (e.g., dieting, use of appetite suppressants and laxatives, vomiting and exercise for the purpose of weight control) were actually more likely to gain weight over time and were at an elevated risk for the onset of obesity.

Myth # 4: dieting makes you happier

Think of your typical weight-loss advertisement; we have the “before” picture featuring a larger woman who is presented in unattractive, dishevelled clothing and little makeup. Her expression is one of despair. Then, we have the “after” picture. We see the same woman, pounds lighter, wearing attractive clothing. Her hair and makeup are professionally done. She is standing beside a handsome man leaning against a beautiful car. So what is this ad telling us? Well, it appears that weight has many powerful meanings attached—it determines how you feel, whether you will take time to care for your appearance, and it will also determine your success in dating! Whatever happened to personality, intelligence and perseverance? This type of advertising perpetuates the illusory connection between thinness and success, and the false hope that losing a few pounds will transform your life.

Is losing weight the solution to achieving happiness and success? The evidence clearly shows that it's not. In fact, the dieting pathway actually may lead people to feel worse about themselves. In the early stages of dieting, the dieter loses some weight, and feels better about herself. Her weight loss is reinforced by compliments from others. This compliment usually takes the following form: “You look great! Have you lost weight?” I think we have all heard this at one time or another, whether we have been on a diet or not. The message is that thinner is better. A boost in self-worth combined with the positive attention from others motivates the dieter to expect further improvements from increased weight loss. However, as the diet continues, the negative effects of dieting start to emerge, including increased irritability, decreased energy, increased preoccupation with food, and impaired concentration and decision-making.

Evidence shows that the psychological deprivation of dieting has a negative impact on dieters' emotional well-being. Dieting has been associated with increased psychological distress, depression, social anxiety, stress and emotional instability. Dieters tend to be hyper-responsive to common anxiety-provoking situations and will get more upset and distressed than non-dieters in the same situation.

It is paradoxical that the behaviours many individuals undertake to improve body image and self-esteem actually make it worse. Eventually, the dieter breaks her diet. As the diet failures add up, so does weight regain, leading to a further decline in self-image and self-esteem and an increased motivation to find the diet that will work. Thus, the dieter becomes drawn into a chronic cycle of repeated attempts at weight loss, with each diet attempt eventually leading to failure and a worsening of mood and self-worth. So we see that dieting does not lead you to feel better about yourself but actually makes you feel worse. The message seems clear – trying to change your body on the outside will not make you feel better on the inside.

A word on those new year's resolutions...

A newspaper recently published some people's New Year's resolutions. One individual's resolution really stood out. He stated, "I resolve to be a better parent and to lose those obligatory pounds." His use of the word *obligatory* captures what many people feel, that is, an obligation, a moral or ethical duty, a social pressure to keep their weight in line with some current "fashionable" standard. When reviewing your New Year's resolutions this year, keep in mind the evidence: Dieting will not lead you to be healthier, eat less, lose weight, be happier, more attractive, or more successful. These connections are illusory and more myth than fact. The diet myths are perpetuated by a society in which weight prejudice is considered acceptable, and there is enormous social pressure to be thin, to achieve an unattainable beauty ideal. The evidence shows that dieting may worsen your health, lead you to eat more, lead you to weigh more, and decrease your feelings of self-worth.

However, people continue to try anything that promises a miracle weight loss. Why? An advertisement for a health club points to the answer. In this advertisement, a huge billboard in San Francisco showed a hungry space alien with the caption "When they come, they will eat the fat ones first." Now, if we replaced the word fat with a cultural or racial descriptor it would be evident to all that the advertisement would be racist and completely intolerable. However, if it is the "*fat*" ones, somehow it is acceptable. Clearly, it is not. It takes a lot of courage and strength to recondition ourselves against these social messages, to respect and accept ourselves no matter what our size, and to believe that we are worthwhile, regardless of our clothing size.

References

Ernsberger, P. 1999. Exploding the myth: Weight-loss makes you healthier. *Healthy Weight Journal*, 13: 4-6.

Heatherton, T. F. and J. Tickle. 1999. Exploding the myth: Dieting makes you thin. *Healthy Weight Journal*, 13: 7-8.

McCabe, R. E., J. S. Mills and J. Polivy. 1999. Exploding the Myth: Dieters eat less than nondieters. *Healthy Weight Journal*, 13: 11-13.

Mills, J. S., R. E. McCabe and J. Polivy. 1999. Exploding the myth: Dieting makes you happier. *Healthy Weight Journal*, 13: 9-10.

Stice, E., R. P. Cameron, C. Hayward, C. Barr Taylor and J. D. Killen. 1999. Naturalistic weight-reduction efforts prospectively predict growth in relative weight and onset of obesity among female adolescents. *Journal of Consulting and Clinical Psychology*, 67: 967-974.

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