

# SUPPORT

## How to Support a Family Member/Friend with Weight Issues

---

We applaud you wanting to support a loved one in their journey toward improved health and weight loss. On the surface providing support may seem obvious, but our experience tells us it is anything but that. Depending on your relationship, you may feel that no matter what you say or do, your help falls short or even back fires. This is a common sentiment, especially for family members, and highlights the delicate line you may need to walk - where nothing you do seems right. This brochure is a guide to help you provide support in an effective way.

### What you may not know about weight problems?

What's the big deal - eat less and exercise more. You may have even been successful in doing this yourself, so why is it so hard for your loved one? The truth is that weight problems are often more complicated. Research shows that fat tissue is an active endocrine gland. Fat cells produce hormones that signal the brain, telling it the status of the body's energy (fat) storage. The body is designed to actively protect against weight loss. This seems counter-intuitive, but in fact the body easily holds onto weight, despite consequences such as the development of dia-

betes, high blood pressure, high cholesterol, or sleep apnea. Storing extra calories historically provided protection during periods of famine or war, but now becomes a problem with our current plentiful supply of high calorie foods and limited activity. It is also clear from both animal and human studies that there are individual biologic differences in the predisposition to store extra energy (excess calories) as fat --so some people really are at more risk to gain weight.

In addition, when one loses weight, the body aggressively DEFENDS AGAINST the decreased weight with a complex system of signals sent from various parts of the body-gastrointestinal tract, fat cells and muscle, to the brain to say—"Hold on to weight—at all costs". Signals stimulating appetite, craving for foods, lowering metabolism, increasing muscle efficiency (burn less calories), decreasing the will to be active are sent out in an effort to drive the weight back to the previous one (the perceived normal state). This is a normal physiologic response —appetite increases, certain foods become more appealing, hunger and/or the drive to eat looms large and can be overt or sub-consciously driven (finding yourself in the pantry after working out, half way through a bag of cookies, not realizing how you got there...).

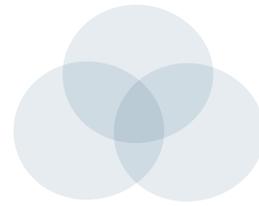


## Does stress really affect weight?

Weight loss and maintenance can also be especially hard for people who have anxiety, depression, or who are coping with other life stressors. In our society, we have learned to cope with stress by eating-- if we had a drink of alcohol every time we got upset about something, soon we would be quite dysfunctional. Eating (especially fat and sugar) sends signals to parts of our brain and produces a calming or rewarding effect. We are besieged by advertisements promoting eating and drinking to relax, have fun and unwind. Our children are socialized to have "happy meals"-- foods high in fat and sugar paired with a free toy. Additionally, stress often results in decreased or erratic sleep patterns. Sleeping less than 6 hours puts us at risk, resulting in signals to both stimulate appetite and decrease metabolism.

## What about other psychological issues?

Often there can be underlying psychological issues (past trauma -emotional, physical or sexual, parental neglect, criticism, etc.) that result in learning to cope with food or subconsciously find safety in being larger. When the coping mechanism of eating when stressed is removed, changes in mood, unveiling anger, anxiety or other suppressed emotional states may result. Others struggle with food addiction and describe feeling the incredible compulsion to eat certain foods, especially when that food is taken away. Science has demonstrated that there are genetic risks associated with addictions and it is not uncommon for some of our patients to describe coming from a family where a parent or sibling has an addiction to alcohol or drugs. Often counseling or medication can be helpful.



## What to expect when your loved one is in treatment here?

Despite the seeming set-up of our bodies to resist weight loss, many people do successfully lose weight. There is much to be gained health-wise from relatively small amounts (10-15%) of weight loss and much to be gained by establishing healthier eating patterns and improved fitness. Because of the complexity of weight and eating issues, we work collaboratively with patients to address these issues along a number of parameters - medical, nutrition, exercise, psychology and behavior. There is no one right approach or one right type of diet - we may begin with one approach and then switch based on what we believe might be healthier and better able to follow. For example, we might suggest adding a snack to an eating plan where previously there was not one, or suggest that dessert be added or other food items be included. These types of alterations in plan are useful parts of treatment, so accept that week to week your loved one may be doing something that looks different.

You are welcome to jointly participate in some treatment here, with your friend/family member's permission. You can attend the nutrition/behavior groups; and if you participate in meal planning/cooking for the household, then you may decide to meet jointly with the nutritionist to help plan meals together. If appropriate, you could also ask for a joint meeting with Dr. Rubino and/or one of the therapists.

## What does their diet/weight loss plan mean to you?

It probably means some temporary changes in the way meal times occur in the house and in dining out. While wanting to be supportive of his/her effort, these changes may at times, feel like a loss to you. You may feel like you are being restricted because of his/her weight problem. Anytime someone makes a significant behavior change, the impact is felt by those around them. Other changes you might notice include less time spent with you/family around meal times; more time spent in exercising can mean less time at home, a change in foods that are around the house, etc. As you probably suspect some of these temporary changes may lead to permanent changes in how meals are eaten and time spent in different activities versus dining out and/or activities around food. Some patients find new ways of socializing or decide to go out less often or permanently stop drinking.

Sometime it also feels like your partner/friend is changing in other ways - they may seem more self-focused, less giving, less available. The truth is it takes a lot of energy to lose weight, new skills are being learned, and learning to cope in food-filled environment can be challenging. Try to understand that change for everyone involved is a process and takes time to settle into and become comfortable.

## What can I do to help?

Everyone is different when it comes to what changes are needed for weight loss and weight maintenance - what supports and helps one person, can be annoying and unhelpful to another. Here are some general guidelines:

- Ask your loved one - how you can support them during this process; give them a chance to think rather than answer you right away. Listen carefully to what they say they need - support can take many forms including action steps, verbal support as well as overlooking and not saying anything. We have provided a checklist below that might give you or them some ideas.
- We tend to give others the support we would want in a similar situation. What is supportive to you may not be supportive to your loved one. This reflects inherent differences in people and not a rejection of you or your ideas.
- Ask them if there are some tasks that you could undertake to lessen their exposure to potential trigger foods - examples might be doing the grocery shopping; coming up with non-food ways to celebrate and/or relax; keeping snacks put away in places that won't trigger; eating favorite treats out of the home, and not routinely offering foods such as dessert or snacks.
- Generally speaking asking about weekly weight loss is not helpful - we approach weight loss with broader health implications - impacting energy, mobility, healthier eating patterns, self-confidence, health measures, and clothes size. This broad perspective implies that changes are going on in areas more globally than simply number of pounds on the scale. Ask more globally -- "What areas are you working on changing? or What are you feeling good about?"
- Try not to pull your children into discussions about your loved one's eating and weight loss. Our experience tells us that children often absorb tensions and messages about food and eating which can later come out in unhealthy eating patterns for them. Often, a matter of fact explanation from your loved one about what he/she is doing is all that is needed.

· There will be times during weight loss/maintenance when your loved one will feel frustrated and demoralized - they will wonder whether they will be able to reach their goal and then whether they will maintain it. These feelings are normal - your willingness to support them during critical times can make an important contribution -- simply acknowledging their struggle and communicating your belief in them will go a long way.

· It is not uncommon for family members who struggle with their own weight, to be in a different place - in fact, it is unusual for family members to be ready and open to working on their weight at the same time. If the timing is different for you, acknowledge this and discuss how you can support each other.

· You may feel that nothing will make a difference and wonder whether you are supporting a process that your loved one is destined to fail. Know that weight problems are chronic conditions requiring ongoing attention and repeated interventions. This is no different than any other chronic disease (e.g. diabetes, hypertension.) This means that keeping connected with the Center or some other anchoring mechanism (e.g. Weight Watchers, fitness trainer, etc.) acknowledges that this is a life-long process.

## How would you like to be supported by your family/support person?

(Check the most important)

- A caring and understanding attitude
- Non-judgment
- Be protective when others don't understand or undermine my efforts
- Companionship - do things together; have fun
- Empathy
- Patience - progress can be slow
- Active encouragement, especially in the face of setbacks; "you can do it"
- Keep in touch - phone, email, notes
- Acknowledge and validate; avoid approval and criticism
- Willing to listen/willing to talk (no lectures)
- Spend time with me
- Keep agreements (to help, to show up, to participate) This builds trust.
- Express positive feelings toward me
- Respect independence; affirm individuality
- Partnership, not authoritarian presence

The bottom line is that while making changes in one's weight can be challenging, learning to effectively support someone can make an enormous difference.

2/10

info@wtmgmt.com  
Tel. (703) 807-0037  
Fax (703) 807-0038  
www.wtmgmt.com

### Washington Center

for Weight Management & Research, Inc.

The Navy League Building  
2300 Wilson Blvd. Suite 230  
Arlington, VA 22201

