



# IT'S THE THOUGHT THAT COUNTS

» *On the couch* | *By Dr Alice Boyes*

If you struggle with weight, cognitive psychology could be the answer you have been looking for. Clinical psychologist Dr Alice Boyes outlines a model that can help change your mind – for good

**{** Do you intend to make healthy food choices and try hard, but slip up? If you're stuck in this pattern, cognitive psychology has immense potential to help you change your behaviour and rebuild your self-esteem.

What makes cognitive psychology different from all the other healthy lifestyle advice you've heard before is that most of the best treatments used by expert clinical psychologists are based on this model. What's great about it is that it works with whatever healthy eating plan you've chosen for yourself, and whatever eating goals are personally important to you.

### The cognitive psychology model

To benefit from cognitive psychology, you need to first understand the basic model. This means realising that any kind of behaviour – for example, eating – is the end of a chain of events. You encounter a trigger > you have a thought > you make a decision > you act. And you either act in a way that's consistent with your healthy eating goals or you divert from them.

That initial trigger might be food-related, like passing a bakery window, it being lunchtime, or feeling physical sensations of hunger. On the other hand, it might be less obviously food-related, such as getting through an overly busy or stressful day, sitting down to watch television – if you tend

to eat while you watch TV – emotions such as feeling bored, lonely, angry, or anxious, or physical cues such as feeling tired or low in energy.

Cognitive psychology is mainly about the middle links in this chain – the thinking processes that occur in between experiencing a trigger and acting on it. Often, we don't even notice our thoughts. When I ask people what they were thinking before overeating, it's common for them to say something like: "There wasn't a lot of thinking going on". It takes practice to learn how to 'catch' your thoughts.

So, to understand and change your eating habits, you need to figure out what specific thoughts lead you to make choices that aren't consistent with your health goals. Once you know what these thoughts are, you can learn how to challenge them and replace them with alternative thoughts that will help you make better choices.

### Common dysfunctional thoughts

Since identifying your dysfunctional thoughts can be difficult, it's helpful to know that many fall into common types. The categories of thoughts below have been identified by world-leading clinical psychologist, Dr Judith Beck, in her book *The Beck Diet Solution*. This is the 'bible' of cognitive psychology when it comes to healthy

eating. It's vastly more psychologically sophisticated than any other text I've ever encountered regarding weight or eating. I highly recommend it, especially for people who have a long history of unsuccessful weight-loss attempts.

The following dysfunctional thoughts are just examples. Your exact thoughts might be different, but are likely to fall into these categories.

#### Justification

I've had a bad day, so it's OK for me to eat to feel better.

Somebody else made this food. It's delicious and I won't have the opportunity to eat it again any time soon, so I should eat as much of it as I can while it's available.

Everybody over-eats on holiday.

#### Exaggerated thinking

My cravings are so strong I can't resist them.

I have no willpower.

#### Negative fortune-telling

Even if I stick with my plan, I'm not going to lose weight.

Even if I make a good choice during this moment when it's difficult to stick to my healthy eating intentions, I'm never going to be able to keep it up.



**DR ALICE BOYES** runs interactive seminars on the psychology of healthy eating. For more information and bookings see [www.aliceboyes.com/fitness-life](http://www.aliceboyes.com/fitness-life).

Dr Boyes is a registered clinical psychologist. She treats depression, anxiety, relationship difficulties and eating disorders in Christchurch and via Skype phone. Her research is published in leading international journals. You can read her blog at [www.aliceboyes.com/blog](http://www.aliceboyes.com/blog).

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### Overly positive fortune-telling

I can eat this extra muffin, because I'll eat less later, or I'll make up for it tomorrow by skipping lunch or running for an hour.

I'll only eat a small handful of potato chips. (This is dysfunctional if you typically end up eating more than you intended.)

### All or nothing thinking

I didn't follow through on my healthy eating intentions at my last meal, so I may as well give up and eat whatever I want.

I've already eaten more than I intended, so I may as well eat keep eating and start again tomorrow.

If I can't lose at least 1kg a week, why bother?

If I'm never going to be the body shape I ideally want, I may as well be overweight.

### Self-deluding thoughts

What I eat doesn't count if no one sees me or if I only eat the edge pieces of the food.

It's not fair that I have to work so hard at controlling my weight when thin people can eat whatever they want. (This is dysfunctional because most people who are a healthy weight put some restrictions on their eating.)

There probably aren't that many calories in this massive slice of chocolate cake.

### Unhelpful rules

I can't waste food.

I can't say "No" when people offer me food.

### How to generate alternative, more helpful thoughts

Think about situations in which you commonly over-eat and try to guess what your dysfunctional thoughts are likely to be at that time. And, when you're considering making an eating choice that's not consistent with your healthy eating goals, ask yourself "what thoughts am I having?"

For each of your most common dysfunctional thoughts, write down an alternative thought that will help you make a better choice. For example, if your dysfunctional thought is "I've had a bad day, so it's ok for me to over-eat to feel better", you could replace it with "It's psychologically healthy for me to want to relax or give myself comfort when I've had a bad day. Eating is one way to soothe my emotions, but there are other ways to feel better that are healthier for me in the long term. I will choose to do X, Y, or Z instead".

### Other examples:

You could replace "My cravings are so strong, I can't resist them" with "My cravings are strong right now, but they ebb and flow, so if I don't give into them now, they will naturally be less strong later".

You could replace "I've already eaten more than I intended, so I may as well keep over-eating and start again tomorrow" with "Learning how to stop eating after I've already started over-eating is an important psychological skill that will help me maintain a healthy weight in the long term. I'm going to use this moment to practice it".

"I can eat this extra muffin because I'll eat less later" could be replaced with "My goal is to eat a healthy amount at each meal. It's a more enjoyable, more productive way to live than alternating between over-eating and dieting".

It's important to write each of your own dysfunctional thoughts on a piece of paper and list an alternative, more helpful thought below it. If you can, try writing down a couple of different ideas – if you don't write them down, you're unlikely to be able to remember them later. Then, when you're having a dysfunctional thought, remind yourself of an alternative.

### How do triggers fit in?

It's useful to think about what types of alternative coping you'll use in response to your triggers or dysfunctional thoughts. For example, if you feel lonely, what would be a better choice for managing that emotion? If your boss is overloading you with work, what would be a better way of solving that problem?

Ask yourself what your most common triggers are. Write these down, and for each one, write down three alternative coping strategies you could try. Understanding your triggers – or high-risk situations – for overeating, in addition to understanding your dysfunctional thoughts, will give you the best chance of noticing your pattern in time to use alternative coping.

If you're not getting ahead using these ideas, a psychologist can help you better understand your triggers, thoughts, and behaviour, which will make your efforts more likely to succeed. And if you want to help coming up with an alternative thought to replace a dysfunctional one, you're welcome to email me with your dysfunctional thought and I'll give you some suggestions – just visit [www.aliceboyes.com](http://www.aliceboyes.com). ◀◀