

HOUSEKEEPING

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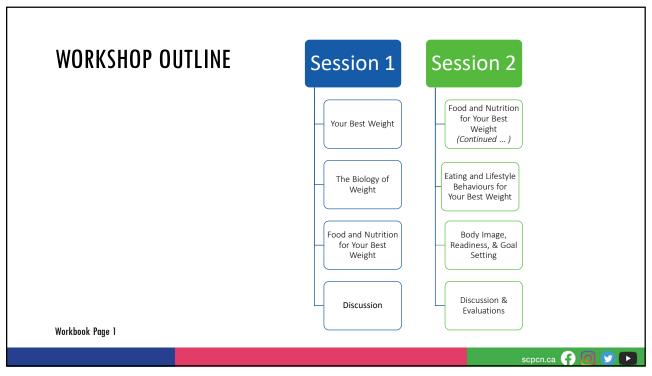
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PARTICIPANT WORKBOOK PAUSE & REFLECT QUESTIONS

- 1. Materials you have been provided for this workshop:
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 - AHS 'Eating Well for Weight and Health' resource.
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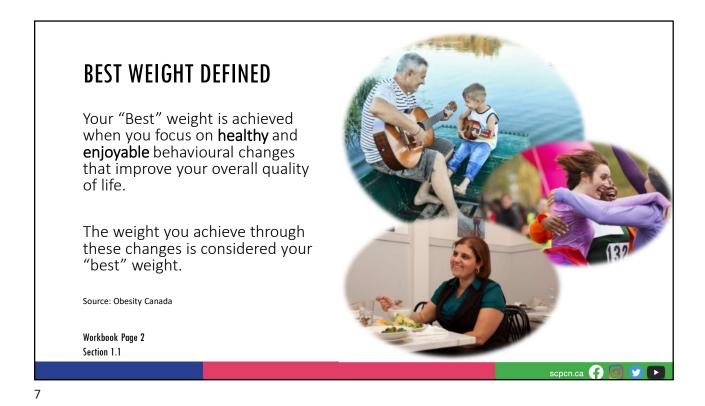


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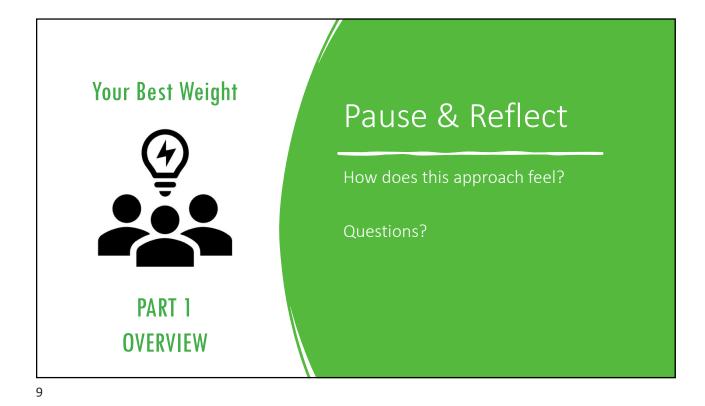


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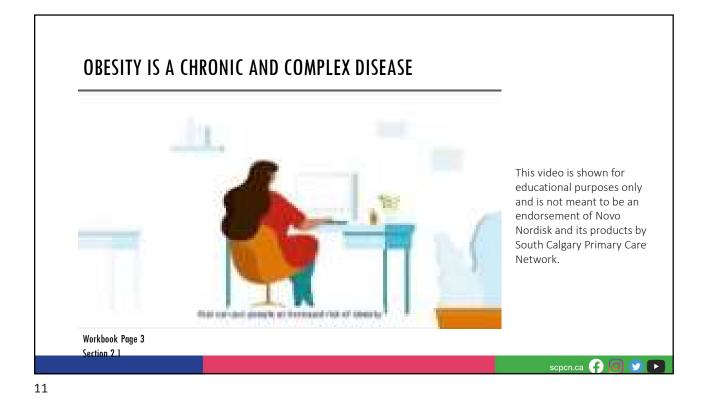


Genetics Gender Chronic Disease Medications Past weight history Eating Mobility Food behaviours (Metabolism and choices hormonal cues change.) Age Sleep Ethnicity Socio-economic Exercise Stress or status Race Factors that Affect Weight

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WHAT WE HAVE LEARNED FROM RESEARCH UP TO THIS POINT

- 1. Obesity is highly genetic.
 - ➤ Over 70-80% of our BMI is determined by our genes.
- 2. Our body defends itself against weight loss and promotes weight re-gain.
 - ➤ 80% of people who lose 5% of their weight regain it within 5 years.
 - In most studies that look at diet and exercise, any weight that is lost is regained within 4-7
 - > When a significant amount of weight is lost, hormonal cues change so that we feel an increased level of hunger and decreased satiety (fullness).
- "Diets" do not work in the long run.

Workbook Page 3 Section 2.1





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CHRONIC DIETING IMPACTS OUR WEIGHT AND HEALTH

What happens when we are always "dieting?"

- Metabolism slows down.
- With each diet, it becomes more difficult to lose weight and keep it off.
- Our body is in a chronic state of stress.
- It can lead to nutrient deficiencies and sometimes an eating disorder.
- It wreaks havoc on our emotional health and self-confidence.
- It can result in strained relationships and does not provide an opportunity for healthy role modeling.

Workbook Page 3 Section 2.1





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FOCUS ON BEHAVIOUR CHANGE, NOT WEIGHT

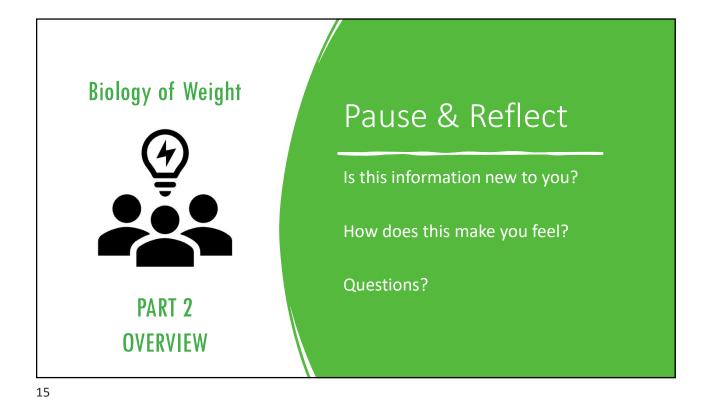
"The biggest change you can make to improve your health is by focusing on healthy behaviour changes rather than trying to control your weight through restrictive dieting or extreme exercising."

THIS APPROACH WILL NATURALLY TAKE YOU TO YOUR BEST WEIGHT.

Workbook Page 3





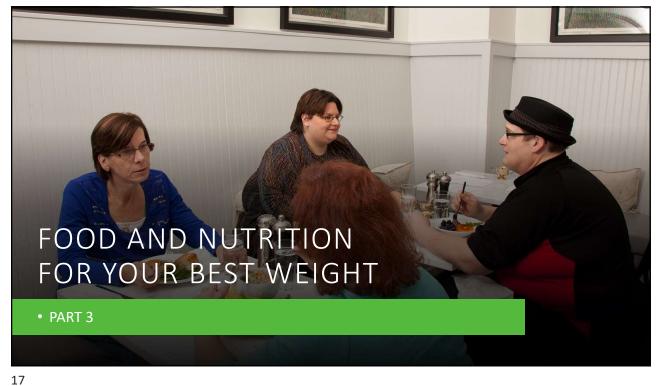


5 MINUTE BREAK

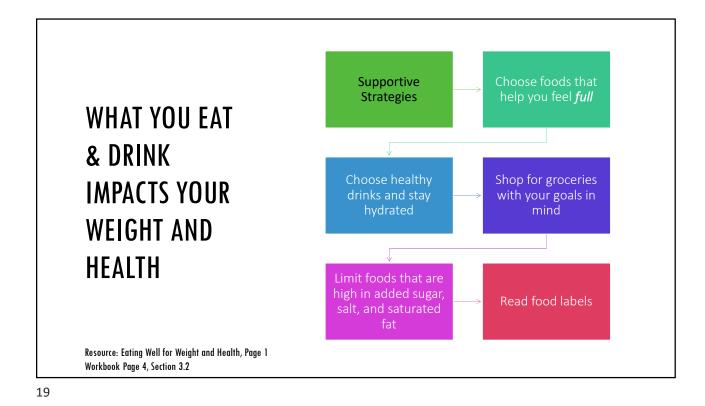
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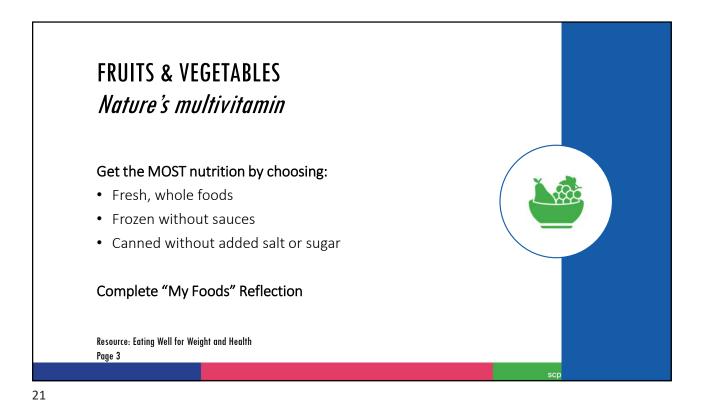


Eating well for weight and health

What?

Resource: Eating Well for Weight and Health, Page 1
Workbook Page 4, Section 3.2

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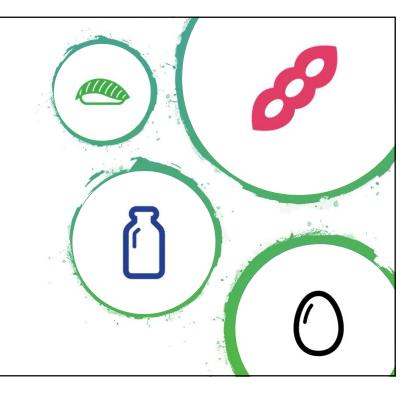


PROTEIN FOODS & DRINKS
Staying power

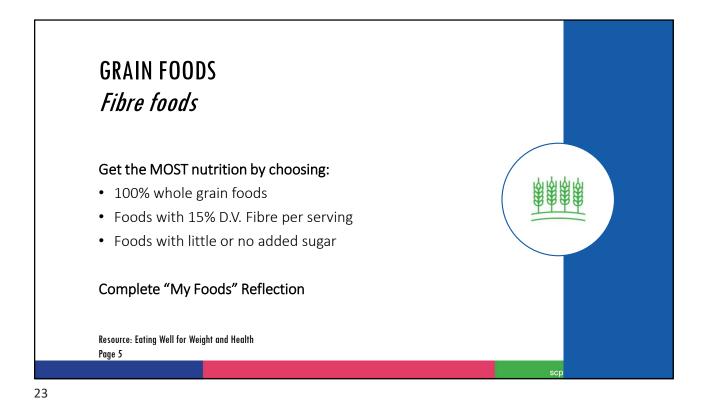
- Get the MOST nutrition by choosing:Plain, unseasoned and un-breaded products
- Lean cuts of pork and beef & skinless poultry
- Unflavored, low-fat dairy
- Eggs
- Fish
- Beans, lentils, and tofu

Complete "My Foods" Reflection

Resource: Eating Well for Weight and Health Page 4



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OILS & FATS
Unsaturated healthy fats

Get the MOST nutrition by choosing:

• Heart healthy oils

• Vinaigrette dressings

• Hummus or Greek yogurt-based dips

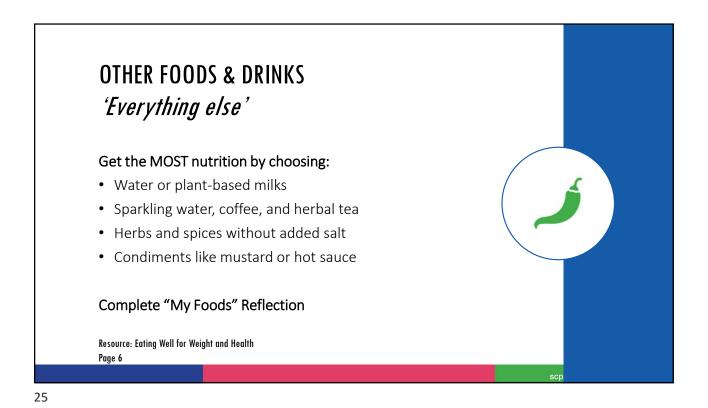
• Avocado and guacamole

• Nuts and seeds, raw or dry-roasted

Complete "My Foods" Reflection

Resource: Eating Well for Weight and Health
Page 5

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BREAKFAST Rice Krispy's and Oatmeal, blueberries, **EXAMPLES AT** almond milk 1% milk, walnuts **GLANCE** Whole grain toast, White toast with eggs, avocado, tomato butter & jam Greek yogurt, Coffee and a donut or strawberries, pumpkin seeds, granola pastry Information not in workbook. scpcn.ca 🚹 🧑 💟 🕞

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DIETARY PATTERNS Research supported for health benefits independent of weight loss. 1. Portfolio Dietary Pattern 2. Mediterranean Dietary Pattern 3. DASH Dietary Pattern 4. Vegetarian Dietary Pattern 5. Low-Glycemic Index Dietary Pattern *Must be combined with a calorie reduction to result in weight loss. Brown J, Clarke C, Johnson Stoklossa C, Sievenpiper J. Canadian Adult Obesity Clinical Workbook Page 4 Practice Guidelines: Medical Nutrition Therapy in Obesity Management. Available Section 3.2

from: https://obesitycanada.ca/guidelines/nutrition. Accessed April 21, 2021.

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MACRONUTRIENT-BASED DIETARY APPROACHES Carbohydrate-restricted diets

- Defined as less than 130 grams carbohydrate/day
- Evidence of greater weight reduction in the short-term (6-12 months)
- No clinical difference in weight loss over 12 months when compared to other dietary approaches
- Typical weight loss achieved ranges between 1.5-9.0 lbs. (0.7-4.0 kg)

Considerations:

- Risk of nutrient deficiency; ketogenic diets pose the highest risk
- Long-term adherence is challenging
- Ketogenic diets are NOT recommended in pregnancy or those with kidney stones

Workbook Page 4 Section 3.2



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MACRONUTRIENT-BASED DIETARY APPROACHES

Protein-increased diets

- Protein may help with weight loss by promoting satiety and increases to muscle mass
- Recommended to include protein at every meal <u>and</u> snack
- Choose proteins low in saturated fat, i.e., <10% D.V. Saturated Fat
- Protein supplements are <u>not</u> necessary to reach daily intake recommendation.
- Suggested* daily protein intake amounts during active weight loss and maintenance to help preserve lean body mass:

Height	5′ 0″ to 5′5″	5'6" to 5'11"	6′0″ to 6′5″
Daily Protein Suggestion Per Meal/Snack Suggestion	60-105 grams 15-26 g 4x/day	65-130 grams 16-33 g 4x/day	130-145 grams 33-36 g 4x/day
Workbook Page 5 Section 3.2		e guidelines only and are not to be interpre modified protein diet, e.g., low protein diet	

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MACRONUTRIENT-BASED DIETARY APPROACHES

Protein sources in the diet

Food source	Portion size	Grams of protein (approximate)
Beef, poultry, pork, fish	75 grams <i>or</i> 2 ½ oz.	21
Cottage cheese, eggs, high protein milk and Greek yogurt	½-¾ cup <i>or</i> 2 eggs	15
Legumes, lentils, firm tofu, cheese	% cup <i>or</i> 50 g (1 ½ oz.)	12
Peanut butter, almond butter, hemp hearts, pumpkin seeds	2 Tbsp.	8
Cow/soy milk, regular yogurt	¾ to 1 cup	8
Grains Bread products, cereals, cooked pasta, cooked rice	ucts, cereals, cooked pasta, cooked rice 35 grams or ½ cup 4	
Fruit and vegetables Plant-based beverages (almond, cashew, coconut, rice)	½ cup <i>or</i> 1 fruit 250 mL <i>or</i> 1 cup	1
Salad dressing, oil, butter, margarine	1 tsp. to 1 Tbsp.	0
Chart not included in participant workbook		Source: Canadian Nutrient File, 2015.

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Section 3.2

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MACRONUTRIENT-BASED DIETARY APPROACHES

FAT-increased or decreased diets

- High fat intake is generally associated with higher weight status.
- Fat is the most calorie dense macronutrient in the diet.
- Very low-fat and high-fat diets are not recommended and have a low adherence rate.
- Include healthy fat foods in small amounts, e.g., 1-2 servings per meal or snack, throughout your day.

Workbook Page 5 Section 3.2

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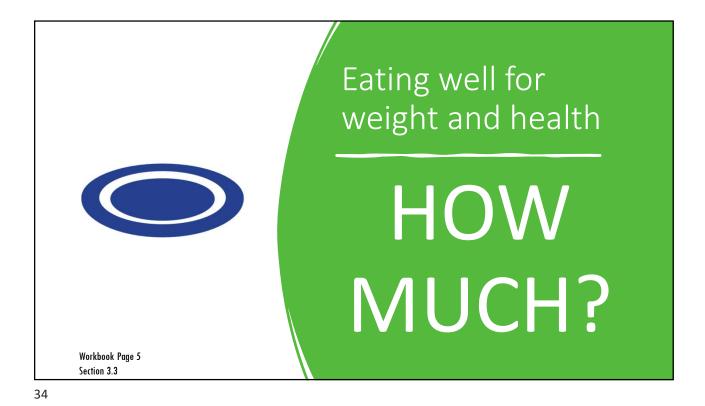




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RECOMMENDED CALORIE LEVEL FOR WEIGHT LOSS General Guideline 250-500 calorie reduction/day from baseline level Women • Minimum of 1200-1500 calories/day Men • Minimum of 1500-1800 calories/day *Intakes below these levels increase your risk of metabolic disturbance, nutrient deficiency, and disordered eating. Workbook Page 5 Section 3.3

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STRATEGIES TO SUPPORT ENERGY REDUCTION WITHOUT RESTRICTIVE DIETING

Target: 250-500 calories/day reduction from your baseline intake

- 1. Identify mindless and non-physical hunger eating times
- 2. Consider a meal replacement shake for 1 meal per day
- 3. Replace higher calorie foods with lower calorie, nutrient-dense versions
- 4. Reduce the intake of liquid calories, e.g., pop, juice, coffee creamer, alcohol
- 5. Use smaller plates and bowls or reduce portions by 20%
- 6. Eat in a designated area for all planned meals and snacks
- 7. Increase your intake of fruit, vegetables, and high fibre foods

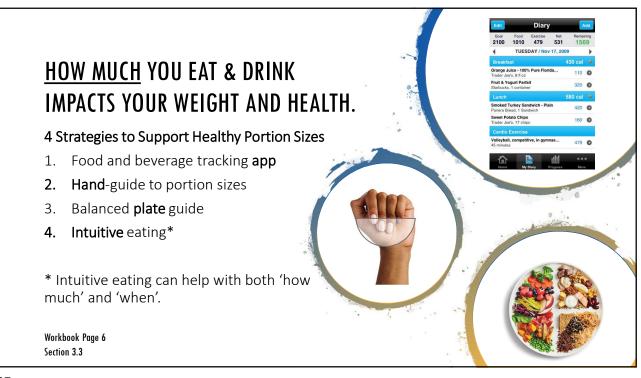
Workbook Page 5-6 Section 3.3

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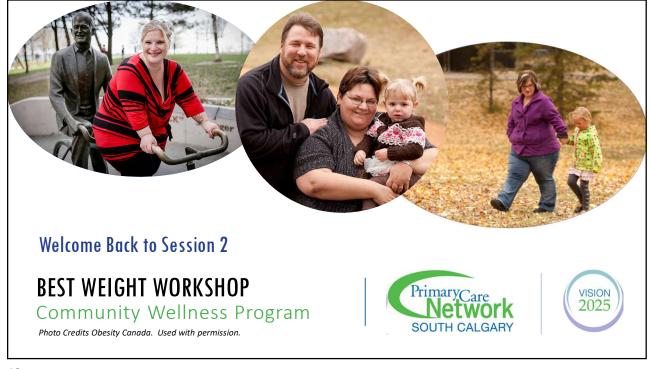


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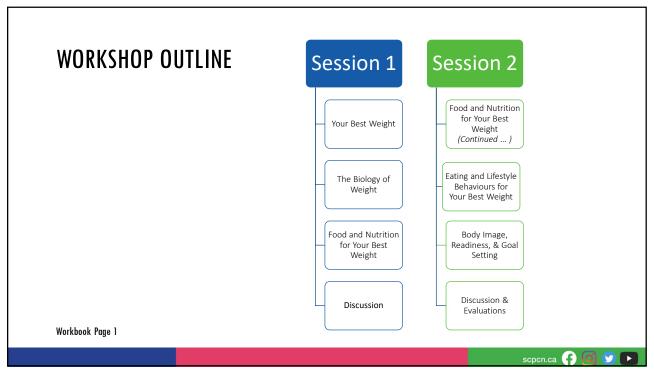
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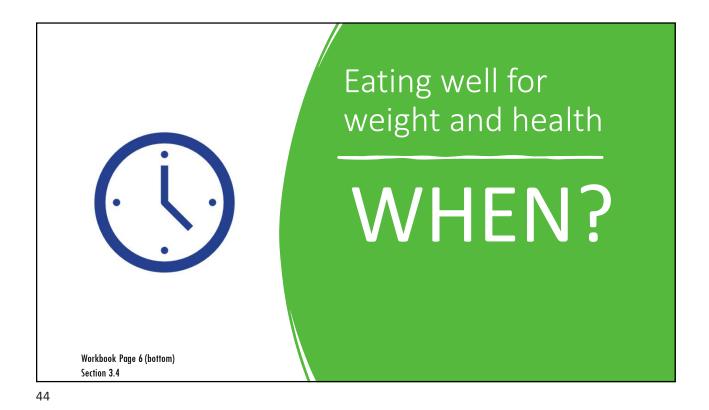


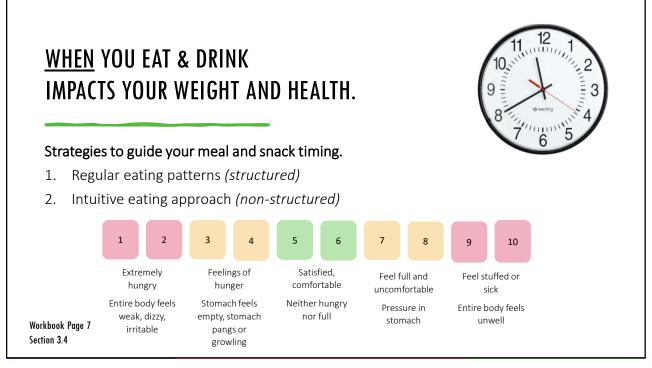
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EVIDENCE ON INTERMITTENT FASTING IN THE TREATMENT OF OBESITY

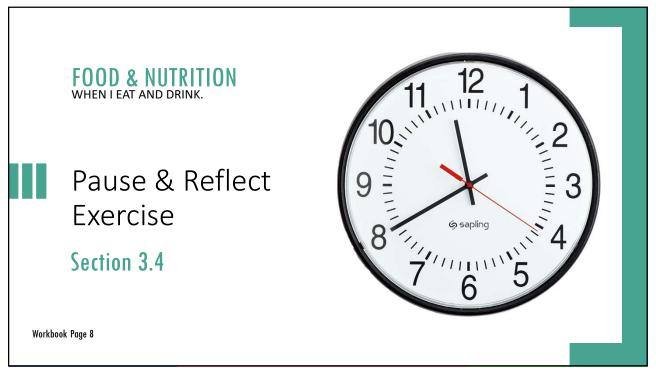
- There is no clear benefit of following one fasting schedule over another
- Emerging evidence indicates short term, small improvements in weight with calorie restriction
- When compared to continuous calorie restriction methods, there is **no** added advantage to intermittent fasting
- Long term trials are required as evidence is lacking to recommend the use of intermittent fasting as a treatment for weight loss and obesity

Intermittent fasting is NOT recommended in those with diabetes, eating or anxiety disorders, that are pregnant or lactating, or need to take food with medication.

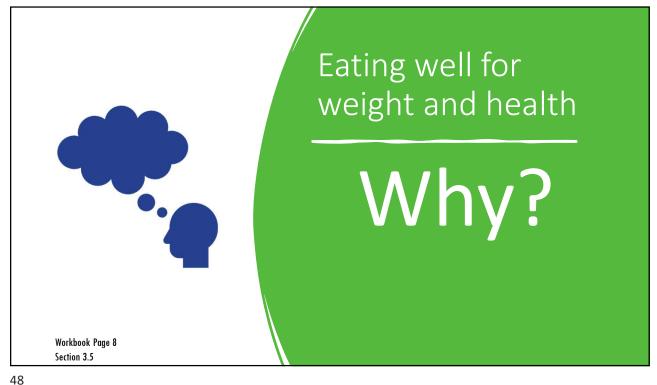
Information not included in workbook.



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FACTORS THAT INFLUENCE FOOD INTAKE

Factors that affect our intake are complex. Some of these include:

- Hunger, i.e., the physical need to eat
- Appetite, i.e., the desire to eat
- Our thoughts and beliefs , e.g., "I don't want to waste it."
- Emotions, e.g., overwhelm, frustration, boredom, happiness, celebration
- Environment, e.g., fast food, parties, family dinners, work, grocery store, TV ads

Workbook Page 8 Section 3.5



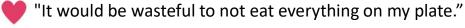


3 TYPES OF HUNGER ACTIVITY Which type of hunger is it?

"That cake is my favourite! I can't wait to try it."

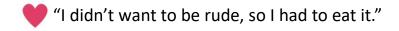






"My energy is running a bit low. I need to eat something."





"I am so overwhelmed. I need to take a break and eat something."







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Pause & Reflect

1. WHAT: our food choices & dietary pattern
2. HOW MUCH: energy intake and portion size
3. WHEN: timing of meals/snacks, noticing hunger and fullness cues
4. WHY: internal and external influences, 3 types of hunger
Choose one area that you will focus on to make a behavioural change.

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PHYSICAL ACTIVITY GUIDELINES

Weight Loss

150-420+ minutes per week e.g., 20-60 minutes per day

Weight Loss Maintenance

200-300+ minutes per week e.g., 28-42 minutes per day

Considerations for physical activity

- This level of physical activity may not be realistic for everyone.
- Those who successfully lose and maintain their weight have less sedentary time overall in their dayto-day life.
- Plan your activity into your week as if it were an appointment.
- Choose to engage in activities that you enjoy.
- Focus on movement as a way of taking care of yourself.

Boulé NG, Prud'homme D. Canadian Adult Obesity Clinical Practice Guidelines: Physical Activity in Obesity Management. Available from: https://obesitycanada.ca/guidelines/physicalactivity. Accessed April 21, 2021..

Workbook Page 9
Section 4.1

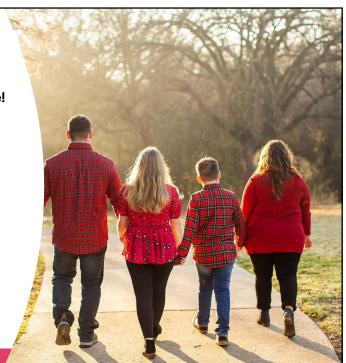
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HEALTH BENEFITS WITH WALKING

It's more than just weight loss and maintenance!

- 1. Increased heart and lung fitness
- 2. Reduced risk of heart disease and stroke
- 3. Improved management of high blood pressure and cholesterol, diabetes, joint and muscular pain or stiffness
- 4. Increased muscle strength and endurance
- 5. Increased self-confidence and body positivity

Workbook Page 9 Section 4.1



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LIFESTYLE BEHAVIOURS PLANNED PHYSICAL ACTIVITY



Pause & Reflect Exercise

Section 4.1



Workbook Page 10

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SLEEP AND WEIGHT

There are adverse health outcomes for those that sleep *less than* 5 hours or more than 9 hours.

- Some studies show a disruption in <u>appetite hormones</u> increased hunger and decreased satisfaction
- Increased <u>preferences</u> for high fat and sugary foods
- Increased <u>reward signaling</u> in the brain to crave high fat, high calorie foods
- Increased abdominal fat storage
- Poorer diet quality
- Decreased insulin sensitivity

Workbook Page 10 Section 4.2 Sleep. Harvard School of Public Health. Retrieved April 27, 2021 from https://www.hsph.harvard.edu/nutritionsource/sleep/

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STRATEGIES TO IMPROVE SLEEP

- Have a sleep routine and commit to it
- Include physical activity regularly
- Avoid heavy meals, snacks, and alcohol 2-3 hours before bed
- Limit caffeine
- Turn off electronics 1 hour before sleep
- Have a ritual to relax your body and mind before sleep
- If you wake in the middle of the night and can't get back to sleep, get up and do a quiet activity until you are tired enough to fall back asleep.

Workbook Page 10 Section 4.2



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LIFESTYLE BEHAVIOURS



Pause & Reflect Exercise

Section 4.2



Workbook Page 10

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EFFECTS OF CHRONIC STRESS ON WEIGHT

Many pathways connect stress and obesity.

Weight stigma itself can induce a stressful state.

Workbook Page 11 Section 4.3

Executive functioning and self regulation interference

Behaviour changes

- Induces overeating
- Drives the consumption of foods high in calories, fat, and sugar
- Decreases physical activity
- Shortens sleep

Physiological changes

• Reward centers in the brain are increased

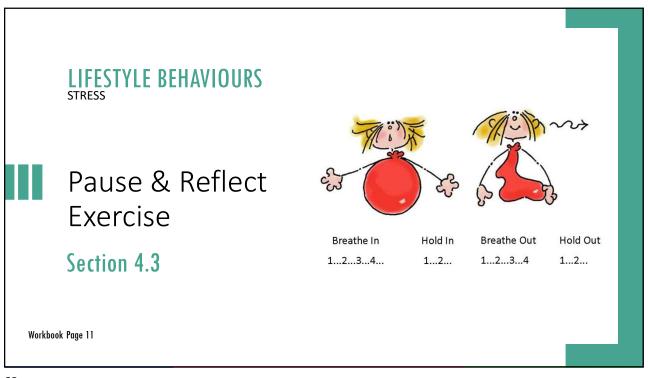
Hormonal changes

- Increases hunger and decreases satiety
- Promotes fat storage

A. Janet Tomiyama. Stress and Obesity. Annual Review of Psychology 2019 70:1, 703-718

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Lifestyle Behaviours



PART 4 OVERVIEW

Pause & Reflect

Summary of topics:

- 1. Planned Physical Activity
- 2. Sleep
- 3. Stress

Choose one area that you will focus on to make a behavioural change.

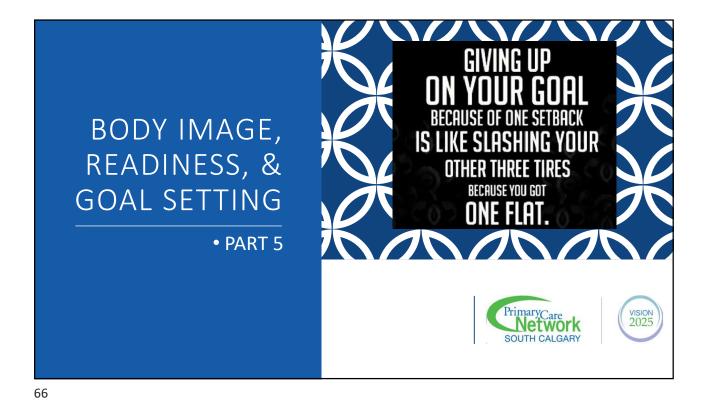
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5 MINUTE BREAK





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BODY IMAGE AND BEST WEIGHT

Body Image Is

A person's beliefs, thoughts, perceptions, feelings and actions about their body and appearance.

Having a very negative view of our body and physical appearance can:

- Have a significant impact on our quality of life.
- Keep disordered eating going. Workbook Page 12 Section 5.1

Body Respect Is

"My body deserves to ...:

- Be fed.
- Be treated with dignity.
- Be dressed comfortably and in a style that I like.
- Move comfortably and to the extent that is possible."







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CHALLENGING BODY DISSATISFACTION

- Consider the factors that have influenced your body image
- Consider what you like about your body
- Identify activities that help you feel good in your body
- Stop body comparisons
- Stop body checking
- Expand your areas of interest
- Practice mindful exercises
- Practice self-care
- Ask for help

Workbook Page 12 Section 5.1

"Improving your body image is not about changing your body, it's about making what is, less painful."

- Marcy Evans CEDRD





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Pause & Reflect Exercise

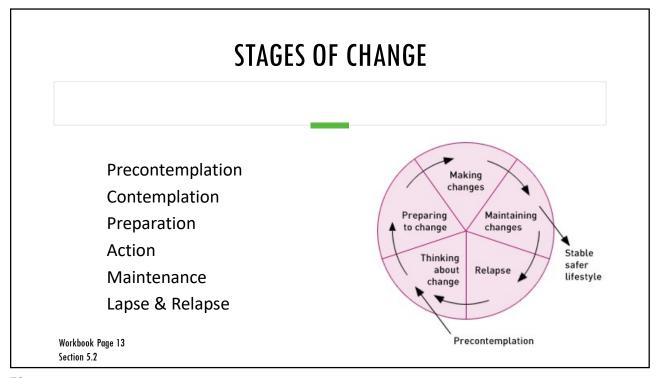
Section 5.1



Health is not a size & happiness is not a number in pounds.

Workbook Pages 12-13

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WEIGHING THE PROS & CONS OF CHANGE						
Decisional Balance Grid Exercise			No Change	Change		
Benefits of	No Change What are the benefits to not	Change What are the benefits if I	Benefits of	•	Less effort More free time Food and alcohol help me de-stress I can just be myself	Improved self- esteem and confidence Feel better More energy for work and life Better Mood
Costs of	what are the potential costs if I do not change?	what are the potential costs if I change?	Costs of		Health deteriorates Economic cost of health Can't play with	I can't eat whatever I want Exercise makes me uncomfortable

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Pause & Reflect Exercise

Section 5.2

Workbook Page 14



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HEALTH BENEFITS OF 5-10% WEIGHT LOSS

Modest weight loss results in significant health benefits!

- 1. Increased HDL-Cholesterol, lowering your risk of developing heart disease
- 2. Decreased triglycerides, lowering your risk of heart attack and stroke
- 3. Lower systolic and diastolic **blood pressure** by 5 mmHg
- 4. Lower A1c by 0.5%, this is similar to some **blood sugar** medications!
- 5. Significantly improve insulin resistance
- 6. Improve sleep apnea, sometimes enough to get off a c-pap machine
- 7. Decreased production of **inflammatory substances**, lowering your risk of strokes and heart attacks.

Workbook Page 14 Section 5.3

Nadia B. Pietrzykowska. Benefits of 5-10 Percent Weight-Loss. Retrieved April 30, 2021from https://www.obesityaction.org/community/article-library/benefits-of-5-10-percent-weight-loss/





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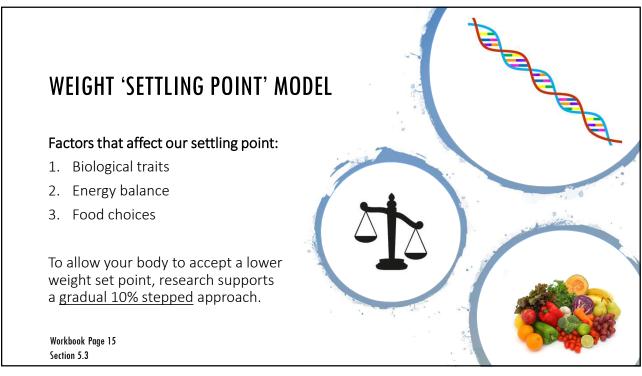
WEIGHT PLATEAUS

- 1. Weight plateaus are normal and should be expected
 - Metabolic adaptation occurs weight loss lowers the number of calories the body burns
 - Endocrine changes occur weight loss changes circulating hormones which increases hunger and decreases satiety (fullness)
- 2. There are <u>no</u> behavioural strategies that can combat these changes
- 3. These changes are considered a significant contributor to long-term weight loss and weight maintenance.

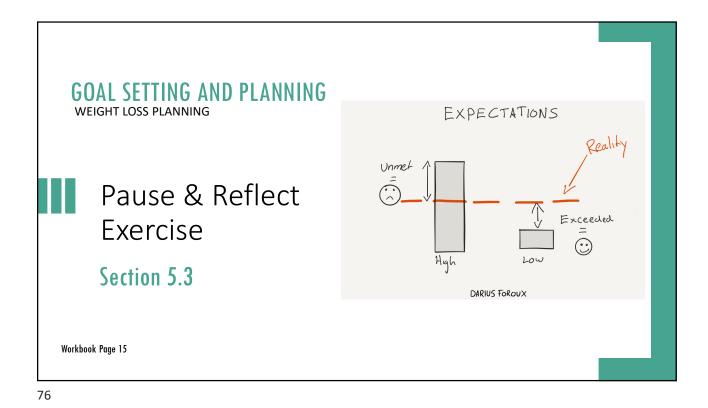
Workbook Page 14-15 Section 5.3



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BALANCING WANTS AND NEEDS 80% of the Time 20% of the Time **Honour Your Wants Honour Your Needs** Unhealthy food choices • Healthy food choices Intentionally overeat Healthy portion control Buying foods that catch Buying foods on your grocery Best Weight your eye Wants Deviating from your meal Sticking to your planned plan meals and snacks Going out to eat or Home prepared meals ordering in Planned exercise Skipping an exercise day to Going to bed on-time 80 / 20 meet up with a friend Taking time for self-care Staying up late to watch a **Approach** movie Workbook Page 15 Putting someone else 1st Section 5.4

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TOP TIPS FOR SUSTAINABLE BEHAVIOUR CHANGE

- 1. The closer your dietary changes are to your baseline intake, the greater the success rate of short and long-term adherence.
- 2. Self-monitoring is a strong predictor of dietary change and weight outcome due to an increased awareness of food intake.
- 3. Long-term and frequent contacts between you and a health professional
- 4. Lapses are normal and should be expected
- 5. Learn from lapses and create a plan for how to deal with them is an important step to prevent a relapse from occurring

Workbook Page 16 Section 5.5



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