

The Diet Dilemma:  
Health Coaching techniques for  
weight management!

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# The Problem

- Overweight & obesity has doubled in the past 20 years
- Associated health problems: Diabetes, IGT, CHD, HT, Metabolic Syndrome, renal failure, sleep apnoea, GORD, depression...

# The 'fix it' method

- Weight loss 'experts'
- Education
- Health Promotion
- Research

# Case 1

- Allan, TG 3.8, obese, GORD
- 6 beers per night & more on the weekend
- Told to "cut out beer" & follow diet given
- Response: "can't give up beer, I like it too much", "I don't like to be told what to do"

# Assess the behaviour

- A 'creature of habit'
- Chills a six pack of beer each morning
- Extended 'happy hour' after work
- Late dinner with wife

# Flexibility = Positivity!

- Not the 'no beer diet'
- Consider the benefits of change
- Replace old habits with new habits
- Chill 2 beers each morning
- Support: ask wife to serve dinner earlier

# A clearer vision for the future

- More energy, waking earlier, less bloated
- Lower TG's, 4kg weight loss
- Happy GP & wife!
- Saving money!
- Reduced beer on w/end; 'ETOH free' days
- Started walking after work

# Case study:2

- Cathy: 51 years, 'weight watcher' for years, obese, low self esteem
- Binges on chocolate after work when alone to relieve stress
- "I am useless, I can't break the habit of bingeing on chocolate"



# Breaking through barriers: One problem, many solutions

- Give neighbors left over chocolate
- Avoid confectionary isle when shopping
- Shopping list with low GI snack ideas
- Choose a low GI snack after work
- '20 minute distraction' if craving persists  
e.g. walk, phone call, shower, washing
- "Do what works and do it more often"

# Relapse: the reality check

- Low GI snack worked, liked fruit smoothie!
- Phoned a friend once, for distraction
- Relapsed once: stress from work led to buying chocolate when at petrol station.
- Part of learning; trial & error, not failure
- More solutions: swim or walk after work
- Buy petrol with right amount of money

# Case study: 3

- Trish, 65 years, recent heart attack, 'yo-yo dieter', depression, obese
- Frequently travels around Australia with her dog. Likes singing
- Negative self talk "My diet is bad", "I will always be big" , "I am worthless & alone"
- Told to stop coffee (consuming 20 cups coffee with sugar daily)

# Turning your 'ANT's' into 'PETS'!

- "You are not bad, you just need direction"
- "You are not by yourself, you are with yourself"
- "You can have coffee, just not so much"
- Walk to café, treat yourself to 1 'real' coffee each day. Not to keep instant coffee in the house.
- Choose a +ve word to replace worthless

# The Power of 'PETS'!

- First time in 25 years, has 'kicked the coffee addiction'. Threw out instant coffee
- "You said I could have coffee, not can't"
- Meets a friend at local café
- Rejoined local choir group
- New word: 'worthwhile'

# Case Study: 4

- Michelle: mother of 4 children
- "Sick of dieting, nothing is working"
- Domestic duties all day to "distract self from eating"
- Eats breakfast, occasional lunch, picks all afternoon on "anything bad".
- 3 year old twins starting to become restless at meals and mid meals

# Mood and Food

- Large breakfast = stuffed = “fat”
- Nothing until 3pm = starving = “anxious”
- Binge on biscuits = stuffed = “fat”
- No appetite @ dinner = bloated = “guilty”

# Role Modeling

## The way to a mother's heart!

- Set an example for children
- Reduces 'fussy eating'
- Meal times = family bonding



# Family rules....

- Mum to eat at the table with children
- Fill up own water bottle
- Domestic duties between meals
- 'Mum time' when twins asleep
- Not to stock pantry with 'sometimes foods'
- 'Sometimes foods' = enjoy with family
- Eat same healthy mid meals as children

# One small step for woman.....

- New discovery: 'in tune' with hunger
- More energy, less anxious, 6kg wt loss!
- Not thinking about food every minute
- New diet: "The 5 food groups"!
- Well behaved twins!
- No failure: relapse = new strategies

“It’s much more important to know what sort of patient has a disease than what sort of disease a patient has”

William Osler  
(Canadian Physician 1849-1919)

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