

FOOD *for* THOUGHT

SUMMER 2017

Bouncing Back from Body Shame



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About The Center for Mindful Eating:

Our Mission:

The mission of The Center for Mindful Eating, also known as TCME, is to help people achieve a balanced, respectful, healthy and joyful relationship with food and eating. By providing an easily accessible source of information and opportunities to interact – via the web and in other ways – we seek to train and encourage professionals, who can then foster this capacity in others.

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About this issue:

Thank you for reading our summer issue on how food, eating, and our body image can lead to the universal experience of shame. This ambitious edition of *Food for Thought* offers the reader a glimpse into the many causes of shame, the basis of shame resilience, and the emerging benefits of a mindful eating practice to counter this toxic emotion.

The trade article, intended for anyone working with clients experiencing shame, is *Body-Image Shame: Causes, Consequences, and Resilience* by Sandra Aamodt, Ph.D., board member of The Center for Mindful Eating and author of *Why Diets Make Us Fat: The Unintended Consequences of Our Obsession with Weight Loss*. Sandra explains, “For many people, a major source of shame is their bodies, and the shame manifests as failing to meet some standard of beauty or function.” This article explores the complex nature of shame and reviews the research linking shame with disordered eating.

The educational handout *Shame*, which we hope you will share with clients, was written by Caroline Baerten, The Center for Mindful Eating Vice

President, who is a mindfulness-based nutritionist/RD, qualified chef, and integrative psychotherapist. Caroline compassionately explains what shame is and how shame may be experienced. “The first thing we can acknowledge is that this hidden secret of ‘not being or doing enough’ is extremely energy consuming.” She offers three clear steps to overcome shame and build shame resilience.

To effectively treat patients who experience shame, professionals need to build their own shame resilience. The practical article *Breaking the “Should” Habit*, describes the advantages of noticing the word “should.” Megrette Fletcher, M.Ed., RD, CDE, co-founder of The Center for Mindful Eating and author of *The Core Concept of Mindful Eating*, demonstrates how the “should” habit has no regarding for what is present, but “it is the tendency to make judgments about what you ‘should’ feel or do.”

We hope you enjoy learning about the help that mindful eating can offer both professionals and clients in overcoming shame. The issue is completed by a six-step guided meditation, *Promoting Body Acceptance: Listening to My Body*, which we hope can become part of your mindfulness practice.

Rejoicing in Megrette

All of us at The Center for Mindful Eating are deeply grateful for Megrette Fletcher, our co-founder and 2013-2016 Board President. After many years of service, she will be stepping down from the board this summer.

Megrette has long been a cornerstone of The Center for Mindful Eating. Her thoughtfulness and integrity set a high standard for those of us who follow in her footsteps. We wish to celebrate her passion and vision for



mindful eating, her generosity with her teachings, and her accepting and welcoming attitude towards all new board members. We also wish to celebrate the way she has held The Center for Mindful Eating together for many, many years.

Megrette, all of us on the TCME Board thank you for being such an inspiration, for doing all that you do, and for being you. Your commitment, professionally and personally, as well as your wise mind-heart that you express so beautifully through your writings and webinars, has brought The Center for Mindful Eating to a whole new level. Thank you from all of us!

Megrette will join TCME’s Advisory Council to continue to share her love and wisdom for teaching mindful eating.



Body-Image Shame

Causes, Consequences & Resilience

People are social animals. Our interdependence allows us to accomplish big projects that would be impossible alone -- from raising children to building skyscrapers -- but it also has a dark side. Because being a valued member of the group is so important to our success, the experience of feeling excluded or inadequate can be devastating.

A central component of this experience is shame, which is the feeling of being so flawed that we do not deserve to belong or to connect with others. Feeling shame often reduces positive emotions and increases anger or anxiety. Shame occurs across all cultures, though its specific triggers may vary depending on socialization.

People who feel ashamed are powerfully motivated to hide, conceal their deficiencies, or escape. They often show appeasement behaviors, such as lowering their eyes and trying to take up less space. In a clinical setting, the desire



Sandra Aamodt

Ph.D.

to avoid or conceal sources of shame can make this emotion difficult to identify and address.

For many people, a major source of shame is their bodies, which they may experience as failing to meet some standard of beauty or function. Body-image shame in women may be driven by internalization of the thin ideal and by appearance comparison, especially to idealized figures, for example professional models. People with medical problems that affect appearance, such as burn victims and amputees, may also experience body-image shame.

Shame is distinct from the related self-conscious emotion of guilt. While guilt focuses on the wrongfulness of a particular action or thought, shame

involves a global sense of not being good enough. Guilt alone is not related to psychopathology, but shame is associated with depression, social anxiety, body dysmorphic disorder, drug abuse, and eating disorders (Tangney et al. 2007). In prospective studies, shame predicts the development of post-traumatic stress disorder and depression, as well as recurrence of depression (Andrews and Hunter 1997).

Gilbert (1998) divides shame into two types. External shame occurs when we perceive that we have failed to live up to expectations of people who are more powerful than ourselves. The primary anxiety is that our deficiencies will be revealed. Internal shame, which happens when we perceive that we have not lived up to our own standards, is often expressed through intense self-criticism or self-hatred. Among patients with eating disorders, external shame is more

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“Because shame is socially contagious, to effectively treat patients who are experiencing shame, clinicians need to build their own shame resilience.”

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associated with anorexia, and internal shame with bulimia (Troop et al. 2008).

Some people are more susceptible to shame than others. Shame-prone people tend to externalize blame, experience intense anger, and express it in ways that damage relationships (Tangney et al. 2007). The degree of shame-proneness around eating and body image is the best predictor of the severity of eating disorders (Burney and Irwin 2000). People who experience a lot of body-image shame are also vulnerable to depression and anxiety, and are less likely to exercise or engage in other healthy behaviors. In this way, body-image shame can start a vicious cycle in which lack of care for the body increases shame, which then makes self-care even harder.

Goss and Gilbert (2002) proposed that shame forms part of the cycle of actions and beliefs involved in the onset and maintenance of eating disorders. In particular, people may cope with shame

about their bodies by taking pride in their ability to control their weight and hunger, as well as their ability to resist external directives to eat. Losing control by bingeing or purging may then intensify the shame, leading to increased efforts at control.

Clinicians should be aware that successful treatment of eating-disorder symptoms does not necessarily resolve the underlying shame. Patients who are highly self-critical and shame-prone have relatively poor outcomes, even after they appear to have overcome disordered eating (Troop et al. 2008). Giving up their coping behaviors around food and weight may leave such patients more vulnerable to self-criticism and feelings of shame. Therapy, or talking with a supportive friend, can help by showing people that they are not alone in these feelings, as shame thrives on secrecy and isolation.

Shame resilience involves the ability to recognize shame and move through it constructively, resulting in increased connection rather than isolation. One effective way to develop shame resilience is by increasing self-compassion through

mindfulness meditation. As defined by Kristin Neff, self-compassion has three components: (1) offering warmth and acceptance to ourselves, (2) feeling that our suffering connects us to humanity rather than setting us apart, and (3) being mindful of our painful experiences in a way that neither exaggerates nor minimizes them.

A meta-analysis found that self-compassion is strongly associated with psychological health (MacBeth and Gumley 2012). People who are high in self-compassion have less body shame, body dissatisfaction, and weight concern. Among women with and without eating disorders, higher self-compassion is associated with less disordered eating behavior and less external shame, while low self-compassion mediates the relationship between shame and the drive for thinness (Ferreria et al. 2013). Self-compassion is more helpful than self-esteem for body shame because self-compassion is associated with less social comparison and is less contingent on appearance.

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Breaking the “Should” Habit



Megrette Fletcher

M.Ed., RD, CDE

“When an experience is pleasant, what ‘should’ I do?”

“If eating is unpleasant, what ‘should’ I do?”

“Every time I eat, I already feel full. ‘Should’ I stop?”

Most people assume that the goal of mindful eating is to enjoy each bite of food. This assumption can lead you far away from the true intent of mindful eating. The purpose of Mindful Eating is to become present when eating, nonjudgmentally, and to use your observations to guide your food and eating choices in a way that is compassionate for you and all living beings.

It is a lovely wish to have only pleasant, delicious meals, but returning to the here and now, how would that even be possible? The desire to enjoy every bite you eat is unrealistic. Worse, it is potentially very destructive, because the enjoyment you get from eating is a complex experience that can’t be limited only to taste. Choosing to eat *only* foods that tantalized your tongue would likely cause you to miss the delight that comes from choosing foods that nourish the body and help it function well.

When people tell themselves what they “should” experience or do, they can obscure choice, making it hard to find enjoyment. The “should” habit is the tendency to make judgments about what you “should” feel or do. For example, I “should” enjoy my meals more. I “should”



stop eating. I “should” start eating. I “should” do one-hundred million things. The “should” habit is exhausting. What’s worse, the “should” habit is draining away your motivation. All the “shoulds” you tell yourself are creating a mental and emotional web of shame that will trap you into being self-critical. “Should” also promotes the feeling of isolation, or thinking you are “the ONLY one” who isn’t doing whatever it is you “should” be doing. The “should” habit can be an unconscious way of blaming yourself. The outcome of all these “shoulds” may lead you to experience shame, which is a belief that at your core, you are unworthy of love and support. Feeling shame is a scary, lonely and harmful experience that mindfulness and mindful eating can help you free yourself from.

How to Break the “Should” Habit

Once you notice you’re practicing the “should” habit, pause for a moment and acknowledge that the familiar habit of trying to motivate yourself with “should” has returned. Ask yourself if

using the word “should” is motivating or draining in this situation. If, for example, using the word “should” helps you clarify a need, desire or action, terrific! Take the next steps to meet your needs. However, if you find using the word “should” depletes your motivation and erodes your confidence, then add a level of self-compassion into this awareness. An example of self-compassion might sound like, “Telling myself what I ‘should do’ isn’t helping. I have a choice and *not beating myself up with a bunch of ‘shoulds’* is a choice that will help this situation.” Recognizing the “should” habit will help gently retrain the mind to become aware of the many choices that are available when eating.

Megrette Fletcher, cofounder of The Center for Mindful Eating and past president, is a registered dietitian and certified diabetes educator. She is a public speaker and author of many books including her most recent publication: The Core Concepts of Mindful Eating: Professional Edition. To learn more about Megrette, visit www.megrette.com.

TCME Sponsorship Opportunities

The Center for Mindful Eating is now offering sponsorship opportunities! Businesses, including publishing houses, treatment centers, individuals and others, are invited to consider a sponsorship package to help support the creation and distribution of materials, resources, and programs. This will help build mindful eating skills and awareness around the world.

- Over 85,000 website visitors annually
- Over 4,000 quarterly readers of our Food for Thought e-magazine
- Nearly 14,000 contacts who receive our monthly Mindful Bytes e-newsletter
- Monthly webinars that offer introductory, intermediate and advanced information on mindful eating for individuals and professionals
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We welcome sponsors who are aligned with our purpose, principles and position statements. We are proud to offer potential sponsors a presence on our website, our Food for Thought newsletters, monthly emails, and social media announcements. Become a sponsor of one of our monthly mindful eating webinars. We're also offering bundled memberships as a special bonus with all sponsorship levels.

The Center for Mindful Eating is a US-based, 501(c)3 non-profit organization dedicated to providing education, resources, and networking opportunities for students, individuals and professionals seeking to deepen their understanding and practice of mindful eating, both personally and professionally.

To learn more, see: <https://www.thecenterformindfuleating.org/Sponsorship>



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Have you visited our Continuing Education Store? Our volunteer presenters are doing extra work to provide our members and professional audience the opportunity to earn CE/CPE at home. Our self-study courses, managed by International Seminars Group — also known as ISG, (<http://www.internationalseminarsgroup.com>) — are approved by the American Psychological Association (APA) to sponsor continuing education for psychologists. ISG is also a Continuing Professional Education (CPE) Accredited Provider with the Commission on Dietetic Registration (CDR).

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Gilbert's compassion-focused therapy increases self-compassion and reduces internal and external shame, self-criticism, depression, and anxiety. It has proven effective in the treatment of eating disorders, especially bulimia (Gale et al. 2014). Increasing self-compassion alone can also reduce body shame. In a randomized controlled trial, three weeks of listening to a guided self-compassion meditation decreased body shame, body dissatisfaction, and the dependence of self-esteem on appearance (Albertson et al. 2015). These improvements were maintained three months later.

Because shame is socially contagious, to effectively treat patients who are experiencing shame, clinicians need to build their own shame resilience.

Otherwise, they risk evoking more shame in their patients. In addition to self-compassion, a key element of shame resilience is empathy (Brown 2006), which involves avoiding judgment, recognizing emotions and other perspectives, and communicating this understanding to the patient. Acknowledging shame in a compassionate way helps to build shame resilience for therapists and patients alike.

Sandra Aamodt, Ph.D., TCME board member and author of Why Diets Make Us Fat: The Unintended Consequences of Our Obsession with Weight Loss. Write her at sandra.aamodt@gmail.com.

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Shame

“Breaking the silence and challenging taboo thoughts about eating are essential parts of the healing process.”



Caroline Baerten

MA, RD

We can never touch the depths of our vulnerability when we have feelings of shame.

Eating certain foods secretly, and quickly when nobody is around might be a pattern that has existed for many years. Maybe you even don't like the experience of eating in this way (few do), but our minds perceive this fast eating as if we have not eaten anything “forbidden.” Often, these eating habits become a conditioned pattern, with underlying feelings of shame -- and the anxiety of being discovered -- present all the time.

The first thing that we can acknowledge is that this hidden secret of “not being or doing enough” is extremely energy consuming. Becoming aware of the ways that shame plays out in our own experience is the first step toward learning to treat ourselves more gently.

What types of awareness are helpful?

1. **Become aware of repetitive thoughts** that go through the mind when life becomes difficult. Often, they are lingering self-doubts, such as “I'm unlovable,” “I'm helpless,” “I'm inadequate,” “I'm a failure,” “I'm basically alone,” or “I don't belong.”
2. **Learning to identify the different manifestations of shame.** Sometimes shame shows itself as ‘the inner critic’



(or self-blamer) or ‘the pusher’ (for whom nothing is ever enough).

3. **Being mindful of shame in the body.** Downcast eyes, lowered head, and unstable posture are all natural expressions of shame. Other physical sensations that occur with shame include warmth, or heat and blushing.

How can we work with shame and build more shame resilience?

The first step is to keep shame from growing. Secrecy (taboos), silence, and judgment are three fuels that help shame grow exponentially. Breaking the silence and challenging taboo thoughts about eating are essential parts of the healing process.

The second step is to focus on our common humanity. Human beings are

born with the wish to be loved, and we need each other to survive. Therefore, we all seek approval and feel social shame when we perceive that we do not fit in. When you understand that we are all struggling with the same feelings and fears, you can connect with our common humanity.

The third step is allowing the discomfort to be present. It takes courage to expose your hidden stories to the light because it is much easier to hide in the dark. Mindfulness addresses each moment-to-moment experience with curiosity and openness, no matter if there are negative core beliefs or shameful experiences.

Additionally, bringing compassion and kindness to the situation can ease the suffering that results after self-criticism. Consciously breathing or softening into the tensed areas can increase your tolerance for these painful situations.

Finally, you can offer yourself words of care and kindness for being in a difficult situation. Talk to yourself as you would talk to someone you love, such as your child or partner. What would a very compassionate friend say to you in this situation? Compassionate and soothing gestures can support you in finding inner warmth as an antidote for the harsh and cold words of shame.

Caroline Baerten (Belgium) is a mindfulness-based nutritionist/RD, qualified chef and integrative psychotherapist. She specializes in work with disturbed eating behavior and nutrition ecology. She is a certified Mindful Eating, Conscious Living teacher (ME-CL) www.me-nu.org.

Promoting Body Acceptance: Listening to My Body



Megrette Fletcher

M.Ed., RD, CDE

The body can be flooded with unpleasant sensations and emotions that range from being tired, feeling “not right” and bloated, disgust, anger, and even hatred of the body. Practicing an acceptance and compassion meditation offers immediate relief from these temporary experiences. In addition, when practiced regularly, it can provide a road map for changing how you relate to yourself long term.

The time to practice this meditation is when you notice that you are being self-critical. The habit of being self-critical may make it hard to recognize when you are down on yourself.

Don't worry if you are in a place of “grumpiness.” This is your signal to check in with your words and your tone, and learn if there is a scolding voice in your head.

To begin this meditation, sit comfortably in a chair or in a formal meditation position. Begin by establishing an amount of time you wish to practice this meditation. If you are new to meditation, consider starting with five minutes and build over time to a longer 20- or 30-minute meditation. When starting to meditate, create a clear intention to practice self-compassion or to work on body acceptance. This intention will help ground you if you



become distracted by thoughts and emotions while you meditate.

1. Take five deep breaths to start the meditation. These breaths will help you center yourself and begin to calm your thoughts. After your five deep breaths, imagine you are safe, as you continue your meditation.

2. Breathe in and connect with your desire for body acceptance. Keep breathing in and out slowly, calmly. If you find this hard to do, reconnect with your intention to practice self-compassion. Acknowledge the courage it takes to sit across from your inner critic. If you are afraid or emotional, acknowledge that the mind imagines your inner critic will say

hurtful and painful words. You may recall verbal darts from your past that sounded like, “you're so disgusting,” “your body is gross,” and so on. If this happens, reconnect to the present moment by breathing in and out slowly.

3. Renew your desire to accept your body just the way it is, despite the verbal or mental darts the inner critic might throw at you. When you accept your body as it is, not as you want it to be, you are practicing acceptance and self-compassion.

4. If it is helpful, repeat a phase that is supportive, such as “I am learning to listen to my body.” or “I am learning to accept my body.”

5. Remain in the present moment, breathing in and out. With each breath, feel the air fill your body, then feel the air slowly release. You are in the present moment.

6. End the meditation by taking five deep breaths to calm your body and mind. Acknowledge the effort that this has taken by saying “I acknowledge the effort that I have made.” Open your heart to the reality that you are not alone and that many people are suffering with accepting their bodies by saying, “May this effort benefit myself and all the other people who are struggling to listen and compassionately accept their bodies.”

For more information on ways to counter shame by promoting self-compassion, visit <http://self-compassion.org/exercise-5-changing-critical-self-talk>.

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