



*Welcome to*  
**BODY BLAME**  
**Reclaim your Life**  
**from Obesity and**  
**Emotional Eating.**  
**Successfully**  
**defeat both with a**  
**restricted**  
**protocol from**  
**EMDR Therapy.**

*Carolyn Milner ©2020*  
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## **Disclaimer**

This course is designed to be educational and address the emotional eating prevalent among the majority of adults. This course is not suitable for children or anyone under the age of 18. By engaging in this course, you are attesting to being over 18 and should the material destabilise your mental health, you are accepting the responsibility to inform Carolyn and seek professional help outside of this course. This course is not suitable nor recommended for people either diagnosed with anorexia nervosa, or with a weight below normal and a BMI less than 18.5.

## **Confidentiality**

Email that is not encrypted can be accessed while it is stored on your or my computer or in its visible state as it transitions across the Internet to the recipient. Emails are also easily forwarded to third parties, sometimes inadvertently. If you use a workplace email system, it is likely that administrative, management or technical staff have access to the account. Similar concerns may be relevant if a family email account is used for communication.

Web-based free email accounts such as Gmail are prone to being searched by the email provider (data mining) and using information to deliver targeted advertising, often in collaboration with third parties.

Using the internet, with zoom, emails, and websites, information is not as secure as if you were in my office, with soundproofed walls and no access by others, with information under lock and key. However I will endeavour to maintain security of your information by using the encrypted means available.

If we use **group meetings**, as we may be identifying the emotions that underlie our emotional eating, personal information may be disclosed. It is imperative that anything revealed, whether individually by yourself or others, including to and by me, should be treated with respect and should be confidential and not shared outside of the group without express permission.

## **Legalities**

**All personal information gathered by a psychologist during the provision of a psychological service will remain confidential except when:**

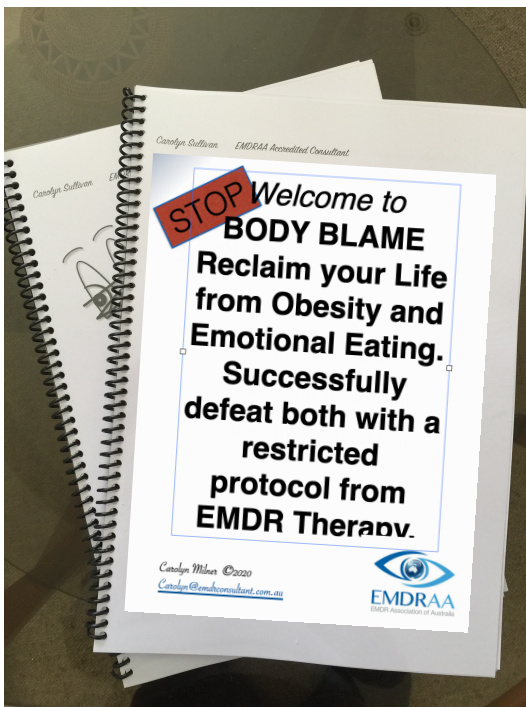
- 1. it is subpoenaed by a court, or disclosure is otherwise required or authorised by law; or**
- 2. failure to disclose the information would in the reasonable belief of a psychologist place you or another person at serious risk to life, health or safety.**

**Even though this is an educational course, please be aware that should you tell me something that I have a legal obligation under the Registered Health Practitioners' legislation, that I must comply with said laws, and legislation concerning psychologists refers to anything they do being a psychological service.**

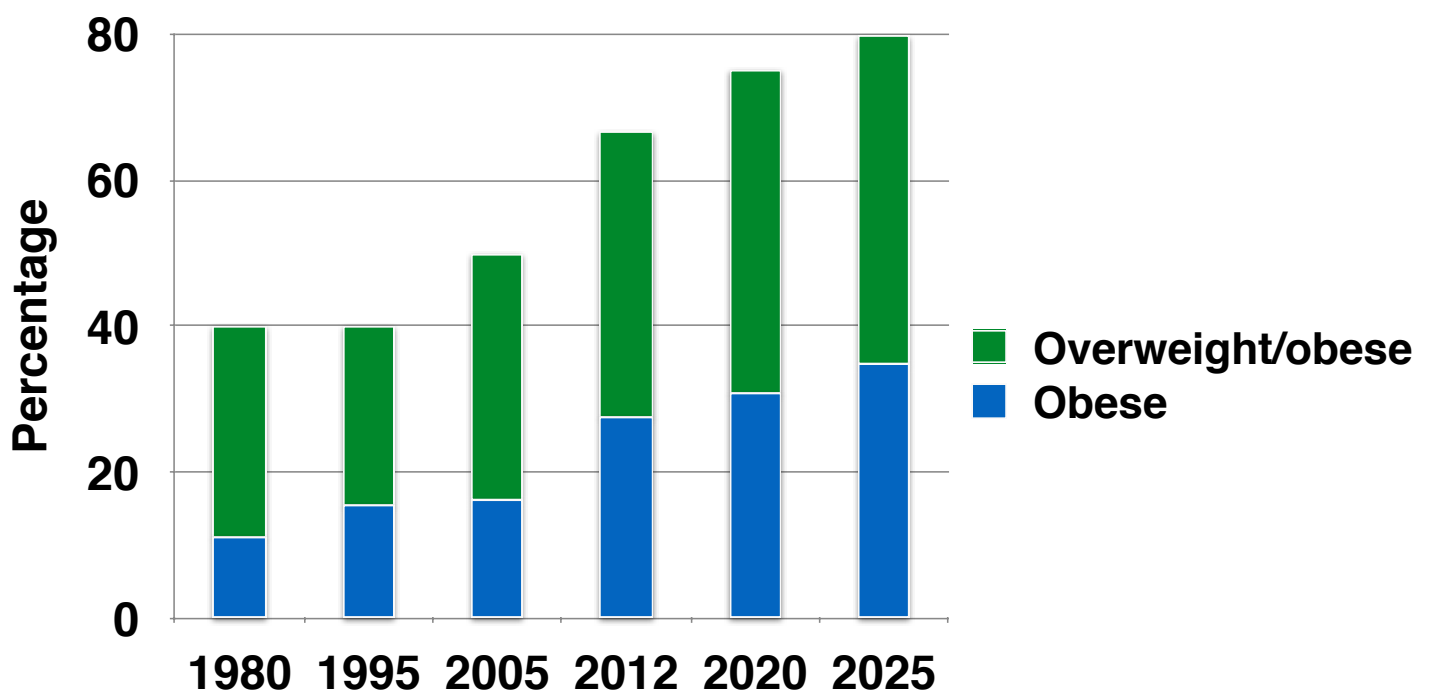
# WORKBOOK

## Module 1

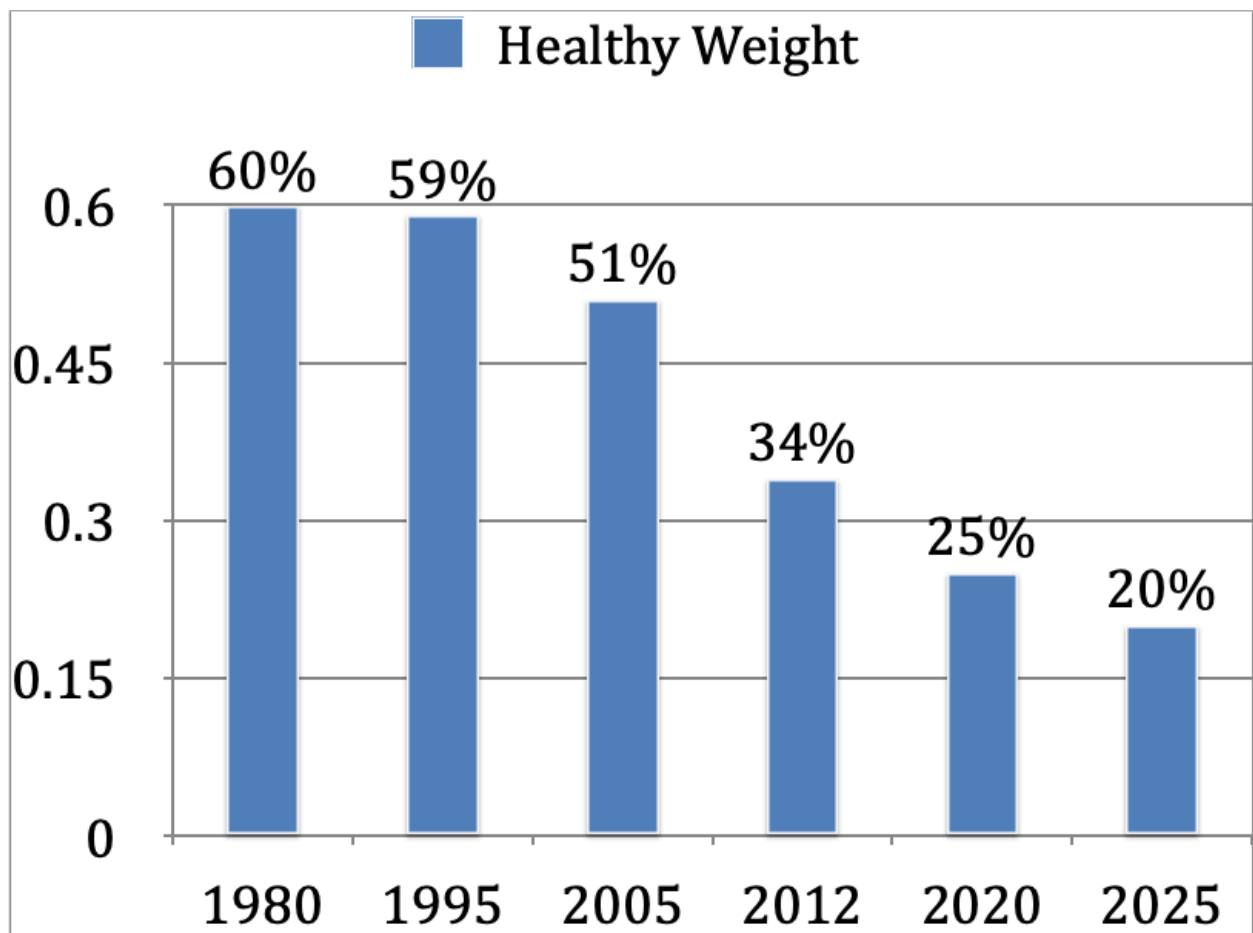
- a. **Defining the problem. A beginning.**
- b. **Stabilisation (Breathing, SUDS?).**
- c. **Aims.**
- d. **Emotional Eating as an addiction.**
- e. **Measurements.**
- f. **The Sugar Conspiracy.**
- g. **Stabilisation (Breathing, deliberately raising, lowering SUDS).**



## Overweight/obesity statistics in Australia



In 1980, around 60% of Australian adults had a healthy weight. By 2012, and again in 2018, this had reversed with two thirds of adults in Australia found to be overweight or obese, (12.5 million people), an increase from 63.4% in 2014-15. This follows an increase from 40.6% in 1995 to 49% in 2005. The trend is continuing, with 75% predicted to be fat by 2020. 80% in 2025.



### Emotional Regulation Technique 1

Scan your body. Note the SUDS out of a score of 10. 0 for relaxed and 10 for most distressed. SUDS = \_\_\_\_ ?

Deep slow gentle abdominal breathing.

Close your eyes. Put your right hand on your abdomen, your left hand on your chest. Compare your hands to see which moves first, which moves more. When your breathing becomes more natural, you will notice the hand on your chest stays relatively still, and the one on your tummy moves first and further.

Breathe in through your nose and out through your mouth. Count slowly 1,2,3,4. Slow down your breathing. Imagine you are inflating a balloon in your tummy as you breathe in and deflating it as you breathe out.

Take a little longer as you breathe out and pause at the end of each breath. If your mind is distracted, just notice the thought, and bring your attention back to you hands, back to your breathing. Let any thoughts turn into clouds and drift away.

Note your SUDS after a few more breaths/minutes. If SUDS greater than zero, identify where in your body you are feeling distress or tension. What shape, colour, temperature would that feeling of distress in your body have? As you breathe in let your mind focus on that part of your body. As you breathe out let the tension go. Note your SUDS after a few more breaths/minutes. If SUDS greater than zero, identify where in your body you are feeling a state of relaxation. What shape, colour, temperature would that feeling of relaxation in your body have? As you breathe in let your mind focus on that tense part of your body. As you breathe out let your mind focus on that relaxed part of your body. Let your mind swing like a pendulum between the two areas, between the two colours, two feelings, two shapes, two temperatures. Pendulate between them. Note SUDS = \_\_\_\_ If SUDS is still greater than zero, add in light stream, or a presence or whatever is needed to bring it to zero. When SUDS is 0, choose a word to describe how your body feels and associate it, using eye movements, touching wrist, an ideomotor touch of knuckle, a coloured paperclip. Practise: Raise SUDS by thinking about something distressing to take to SUDS of 3 then bring it back down.



# How big is the problem?

- ✓ Addiction is the continued repetition of a behaviour despite adverse consequences.
- ✓ Signs of an Addiction
  1. Impaired control over substances or behaviour
  2. Preoccupation with substance or behaviour
  3. Continued use despite consequences
  4. Denial ....
  5. Immediate gratification (short-term reward)
  6. Delayed deleterious effects (long-term costs)

<http://www.nhlbi.nih.gov/guidelines/obesity/BMI/bmi-m.htm>



# DEFINING YOUR PROBLEM

Tick the issues you see as a problem for you

- Overweight
- Obese
- Health issues
- Lack of control/willpower
- Anxiety
- Depression
- Other

# Measurements: Where are you on the cycle?

Date						
Can You your toes?	YES	YES	YES	YES	YES	YES
	NO	NO	NO	NO	NO	NO
Can you see your pubic hair?	YES	YES	YES	YES	YES	YES
	NO	NO	NO	NO	NO	NO
Waist						
Kilograms						
Height						
BMI						

Calculate BMI (body mass index). Divide your weight by your height squared. BMI = weight/ (height \* height)

BMI calculator:

[http://www.nhlbi.nih.gov/health/educational/lose\\_wt/BMI/bmicalc.htm](http://www.nhlbi.nih.gov/health/educational/lose_wt/BMI/bmicalc.htm).

# THE SUGAR CONSPIRACY

BY IAN LESLIE

In 1972, a British scientist sounded the alarm that sugar – and not fat – was the greatest danger to our health. But his findings were ridiculed and his reputation ruined. How did the world's top nutrition scientists get it so wrong for so long?

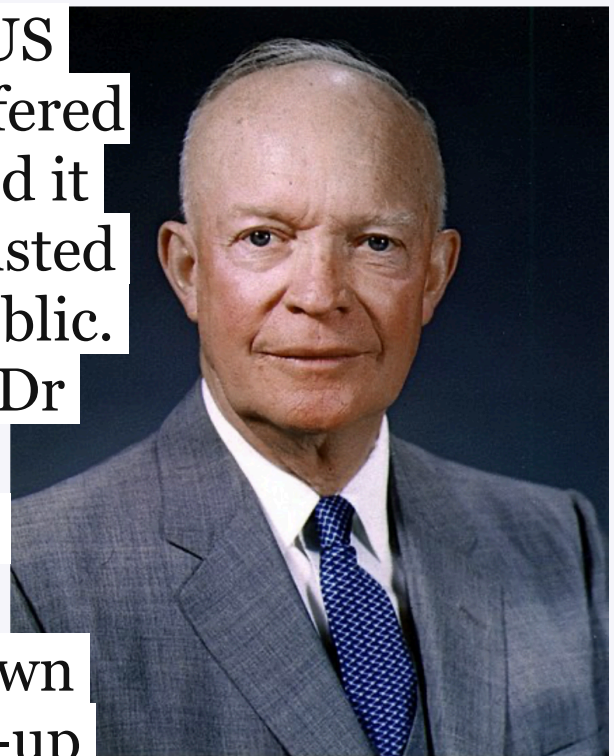


JOHN YUDKIN

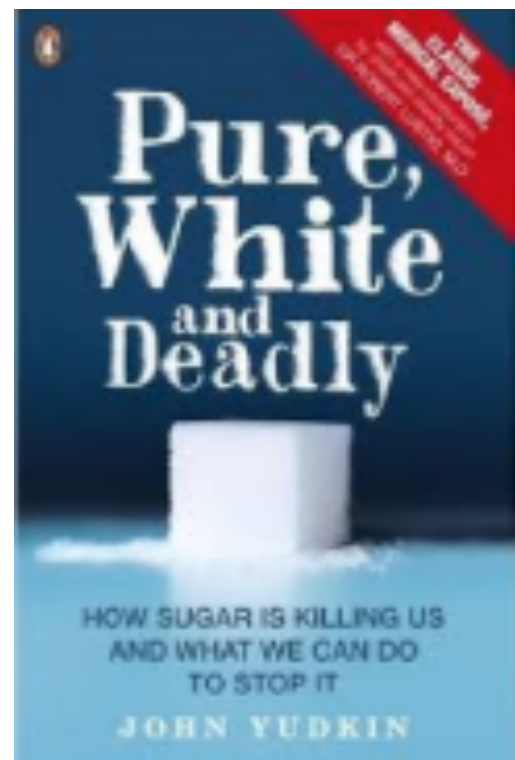
[http://www.theguardian.com/society/2016/apr/07/the-sugar-conspiracy-robert-lustig-john-yudkin?utm\\_source=esp&utm\\_medium=Email&utm\\_campaign=GU+Today+AUS+v1+-+AUS+morning+mail+callout&utm\\_term=165887&subid=16631203&CMP=ema\\_632](http://www.theguardian.com/society/2016/apr/07/the-sugar-conspiracy-robert-lustig-john-yudkin?utm_source=esp&utm_medium=Email&utm_campaign=GU+Today+AUS+v1+-+AUS+morning+mail+callout&utm_term=165887&subid=16631203&CMP=ema_632)

..... we need to go back almost to the beginning of modern nutrition science. On 23 September, 1955, US President Dwight Eisenhower suffered a heart attack. Rather than pretend it hadn't happened, Eisenhower insisted on making details of his illness public. The next day, his chief physician, Dr Paul Dudley White, gave a press conference at which he instructed Americans on how to avoid heart disease: stop smoking, and cut down on fat and cholesterol. In a follow-up article, White cited the research of a nutritionist at the University of Minnesota, Ancel Keys.

**Dwight D. Eisenhower**



When Yudkin was conducting his research into the effects of sugar, in the 1960s, a new nutritional orthodoxy was in the process of asserting itself. Its central tenet was that a healthy diet is a low-fat diet. Yudkin led a diminishing band of dissenters who believed that sugar, not fat, was the more likely cause of maladies such as obesity, heart disease and diabetes. But by the time he wrote his book, the commanding heights of the field had been seized by proponents of the fat hypothesis. Yudkin found himself fighting a rearguard action, and he was defeated.



The most prominent recommendation of both (US, UK) governments was to cut back on saturated fats and cholesterol (this was the first time that the public had been advised to eat less of something, rather than enough of everything). Consumers dutifully obeyed. We replaced steak and sausages with pasta and rice, butter with margarine and vegetable oils, eggs with muesli, and milk with low-fat milk or orange juice. But instead of becoming healthier, we grew fatter and sicker.