

EXPLANATIONS FOR THE SUCCESS AND FAILURE OF DIETING

DiETING is caused by a person's dissatisfaction with their body, such as its size, shape, or weight. According to recent statistics, most dieters are women, and 87% of women have dieted at some time in their lives. The three basic forms of dieting are trying to eat less than usual, refraining from eating certain types of food, and avoiding eating for long periods of time. Dieting can sometimes be successful. However, studies suggest that usually it is not.

Explaining successful dieting

The **restraint theory of dieting** was proposed by **Herman & Mack (1975)** and later expanded on by **Herman & Polivy (1984)**. It is also sometimes called **restrained eating theory**. Restrained eating aims to reduce food intake, and several studies have found that restrained eaters *can* consume fewer calories than unrestrained eaters (i.e. non-dieters) through the use of calorie-controlled diets, cognitive behavioural therapy, or healthy eating. Studies have shown that there can be substantial weight changes in the first few months of a diet when restrained eating occurs.



Several factors seem to increase the chances of a diet being successful. These include:

- A belief that the *causes* of obesity are psychological rather than genetic or hormonal
- Being motivated to lose weight (in order to boost self-esteem)
- Being highly dissatisfied with one's body shape before dieting

- Experiencing a key life event such as divorce, illness, or a significant birthday

These factors indicate that it is not only what people *do* (i.e. restrain their eating) but what they *think* that predicts successful dieting.

An alternative explanation for successful dieting has been proposed by **Redden (2008)**. He believes that the key to successful dieting lies in the attention we pay to what we eat. Redden says that people like some experiences *less* when they repeat them. When it comes to dieting, this fact makes sticking to a particular diet difficult. This is because we find ourselves thinking 'Oh no, not another salad'. According to Redden, we should focus on the *details* of the diet (e.g. tomato, apple, lettuce) because by focussing on the details of each meal we will get bored less easily and will therefore be better able to maintain the diet.



Not another salad...

Redden tested this idea by giving 135 people 22 jelly beans each, one at a time. Each time a person received a jelly bean, information was shown on a screen. One group saw 'general information' (e.g. Bean Number 7), whilst another group saw specific flavour details for each bean (e.g. Bean Number 7 cherry flavour). Redden found that participants got bored with eating the jelly beans more quickly if they were given general information rather than specific information, and also reported enjoying the task more when specific information was given.

Explaining unsuccessful dieting

Restrained eating theory has also been used to explain unsuccessful dieting and why dieting can actually lead to overeating and weight gain rather than weight loss. This was shown in an experiment conducted by

Herman & Mack (1975). Participants were divided into dieters and non-dieters and each was initially given either a *high calorie food* (e.g. a milk shake) or a *low calorie food* (e.g. crackers). Then, each participant was told that she would be taking part in a taste preference test on their own.

The taste preference test took place for a fixed period of time, and involved being given various foods to taste. The foods included biscuits, snacks, and ice cream, all of which had different taste qualities such as salty, sweet, and so on. Although the participants did not know it, the researchers measured how much they ate during the taste preference test. The researchers found that dieters ate *less* than the non-dieters after they had been given a *low calorie food*. However, the dieters ate *more* than the non-dieters after they had been given a *high calorie food*.

These results show that although dieters may sometimes eat less than non-dieters, restrained eating can actually be associated with eating *more* than non-dieters at other times. Thus, giving the dieters a high calorie 'pre-load' caused them to become *disinhibited* when given the opportunity to eat more. This finding has been replicated many times, and is highly reliable. Herman & Polivy (1984) call this disinhibition of restraint the '**what the hell effect**', and it has also been used to explain why people also find it difficult to give up smoking or alcohol.



What the hell!

According to Herman and Polivy, then, many diets fail because restraint not only precedes over-eating, but it actually *causes* it. In other words, the overeating shown by many dieters is actually caused by their attempts to diet: attempting not to eat can, paradoxically, increase the probability of overeating!

There are several other reasons as to why dieting leads to overeating. For example, dieters in a poor mood may overeat to temporarily heighten their mood and mask their negative feelings. Another reason is called

'motivational collapse'. This says that dieters give up their diets simply because they can no longer be bothered since the diet takes too much effort.

A third reason is what **Herman & Polivy (1984)** call **the boundary model**. This says that dieters set a cognitive 'diet boundary' and try to eat within this self-imposed limit. However, occasionally they may go over this boundary by eating something they are not allowed, such as chocolate. Once this has happened they continue to binge until they are full (i.e. beyond the maximum level imposed as part of their diet).

Perhaps the most intriguing reason comes from **the theory of ironic processes of mental control**. This was proposed by **Wegner (1994)** who showed that if we attempt to *suppress* or *deny* a thought, we frequently experience the opposite effect, and the thought becomes more prominent. In effect, Wegner is saying that the more we try *not* to think about something the more we think about it.



Don't think about chocolate

Dieters try not to think about eating certain foods and try to suppress their thoughts about chocolate and the like. The more they try to deny these thoughts, the more preoccupied they become with them. As a result, something that is forbidden becomes desired and the desire is fulfilled by eating.

However, there are many unanswered questions in this area of research. For example, dieting does *not* inevitably lead to overeating, and some dieters *can* achieve their goals. Also, if attempting not to eat something results in us eating it, then how are vegetarians able to not eat meat? Dieting is therefore a much more complex behaviour than most people think.

We should also note that there appear to be *cultural differences* in dieting. Research suggests that some cultural groups find it harder to diet successfully because of a natural inclination to obesity. For example, Asian adults are more prone to obesity than Europeans, and Asian children and adolescents have a greater central fat mass compared with Europeans and other ethnic groups.

Finally, most of the research into dieting involves women. There is, therefore, an inherent *gender bias* in this area. This is a bias that needs to be overcome, because being overweight may have *more* of a detrimental effect to men's health. This is because men tend to carry excess weight on their abdomens, which is linked to more health problems. Women, by contrast, tend to carry excess weight on their bottoms and thighs.



In need of a diet?