

THE "BIGGEST LOSER" MAY BE YOUR EMPLOYEES

Rethinking How We Address Weight in the Workplace

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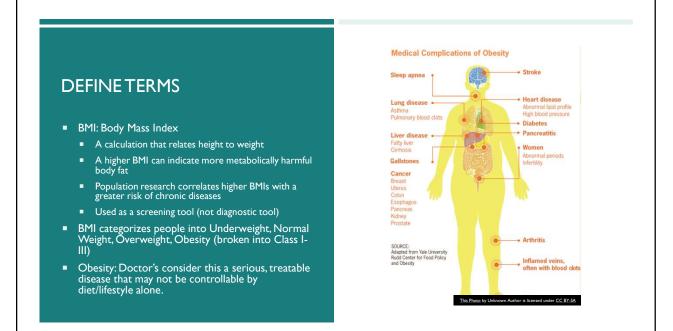
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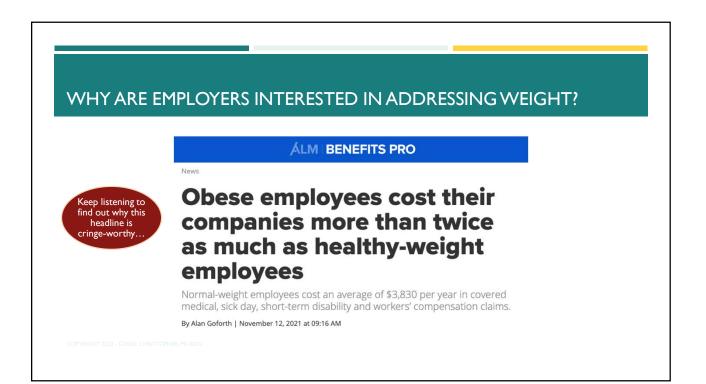


CHECKING IN...

What is your "gut reaction" when you hear Biggest Loser?

Thumbs up? Thumbs down? Thumbs neutral?





THE BIGGEST LOSER

WHAT ARE WE TALKING ABOUT HERE?

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THE BIGGEST LOSER WORKPLACE WELLNESS COMPETITIONS

- Based on the hit TV show that ran on NBC from 2004-2017 where contestants competed for a cash prize based on the greatest weight loss percentage.
- In the workplace:
 - Weekly weigh-ins over a period of time.
 - The person(s) who loses the most weight (or greatest percentage of weight lost) wins rewards.



BENEFITS OF BIGGEST LOSER COMPETITIONS





Employees love them!

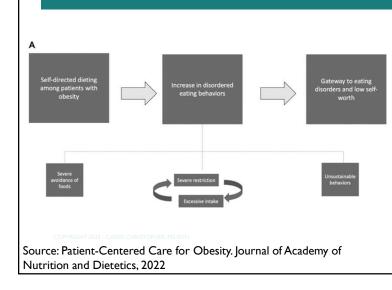
Employee engagement and retention Accountability and motivation Team building – everyone is ordering salads for lunch together





Addresses a major issue that individuals and workplaces are concerned about

DRAWBACKS OF BIGGEST LOSER: SELF-DIRECTED DIETING CAN LEAD TO EATING DISORDERS



How I Won the Biggest Loser Weight Loss Challenge at Work

28 Hours before the final weigh in

O Medium

The morning before the final weigh in, I weighed 125, which was almost two pounds more than I weighed the week before. I ran for 30 minutes, then took a body rinse and got ready for work. I knew I needed to get do to between 121–122 to win the challenge. I had estimated that my bigge competitor was going to lose 2–2.5 pounds from the week prior based o her trends. How the heck was I going to lose four pounds or more in 24 hours??

I had decided that the only way was going to be to do a fast. I drank a TG of water, green tea, and two cups of dandelion root tea throughout the d I pee'd so much that day. All the water weight from having been on my period was finally being flushed out. Because I worked out twice in the 12 hours and was fasting, I knew I needed to hydrate. As soon as I got he

619	Large amounts of weight loss quickly may not be healthy	Can lose water, muscle Restriction results in nutrient deficiencies
<u>Ťľ†</u>	Long-term behavior change is unlikely	What happens after the prizes are given out and the competition ends? All or Nothing Thinking



CHECKING

- What benefits and drawbacks do you see to participating in the Biggest Loser? (Either individually or for your organization)
- Introduce yourself and share with the people around you.



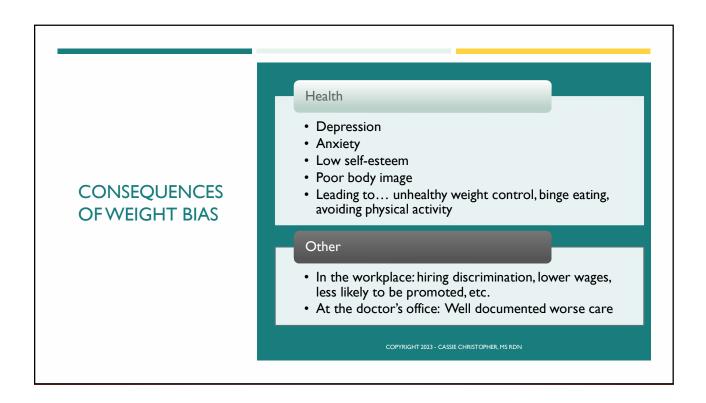
IMPACTS OF WEIGHT STIGMA

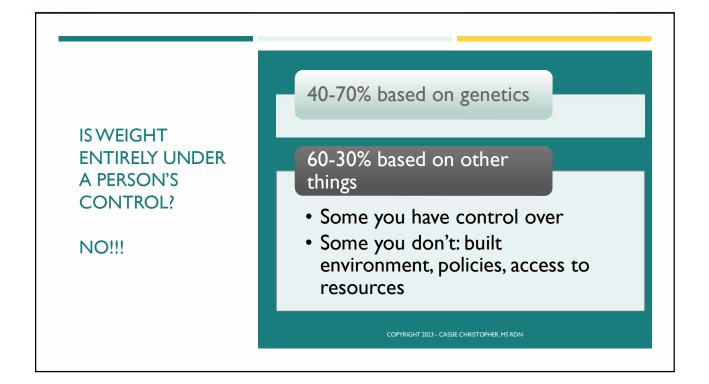
- Weight Stigma = discriminatory acts against people in larger bodies
- Weight Bias = negative ideologies
- Both are unbelievably harmful!

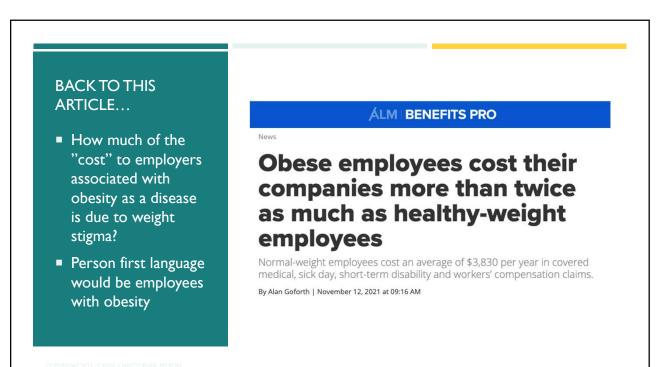
"Assumptions that obesity can be prevented by self-control, that individual non-compliance explains failure at weight-loss (vs. a thyroid condition, etc.), and that obesity is caused by emotional problems, are all examples of attitudes that contribute to negative bias.

...and if obesity is perceived to be a condition of personal choice, versus a serious health condition."

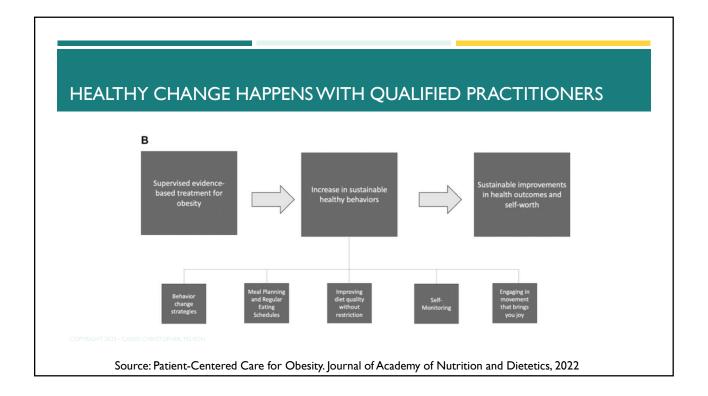
-Obesity Action Coalition, Understanding Obesity Stigma Brochure

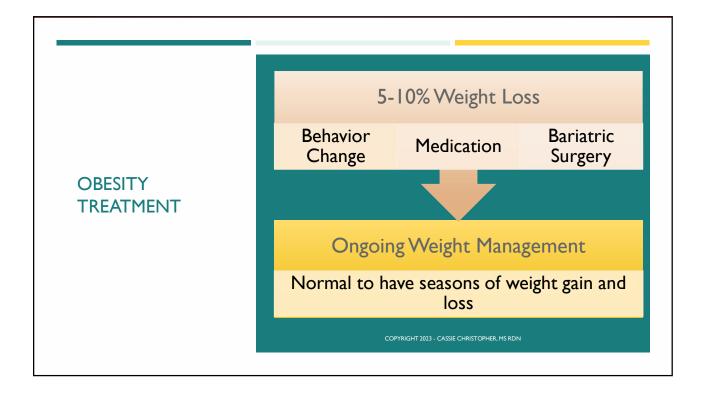












	85-95% of diets "fail"
	 Losing 5-10% means someone may still be classified as overweight or obese
	 Weight loss is not appropriate for underweight or people with active eating disorders.
THE PROBLEM	 Underweight BMI: refer to MD and RD for individual help
	Weight Loss Maintenance is HARD!!!
	Need 60-120 calories less
	 250+ minutes moderate physical activity a week
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WHAT ABOUT WEIGHT LOSS MEDICATIONS?

- Many workplaces are deciding if they should pay for weight loss medications
- Medications are approved by the FDA for weight loss when they support 5-10% weight lost in conjunction with diet and lifestyle change.
- Most medications suppress appetite, which comes back when medication stops

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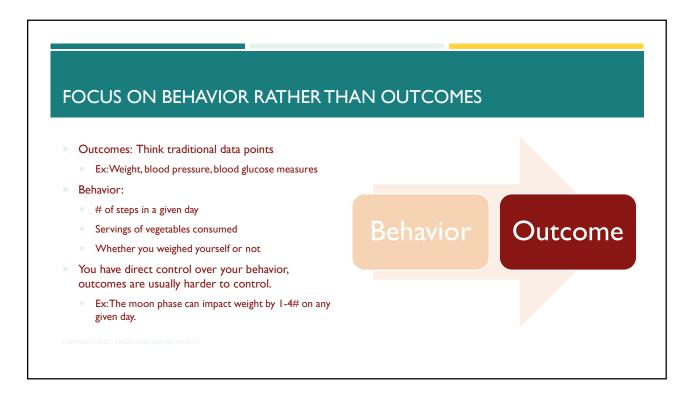


CHECKING

In your opinion, is it appropriate to address weight in worksite wellness programs?



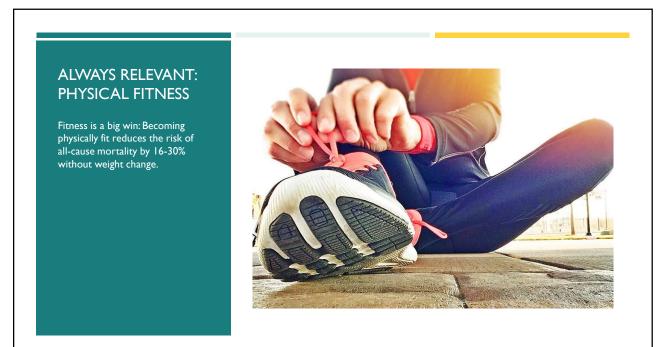




HOW TO DECIDE ON BEHAVIORS TO FOCUS ON

- Take a look at claims and prescription data what is driving the most cost to the organization?
- Ask employees what they are interested in.
 - Ex:Want stress management but not interested in an hour-long meditation
- Consider wellness program and business goals:
 - Talent retention
 - Engagement
 - HR-PR
- Determine what specific behaviors employees can include that will impact the outcomes:
 - Consult with healthcare professionals
 - Review education on government (CDC) and health organization websites (American Heart Association)

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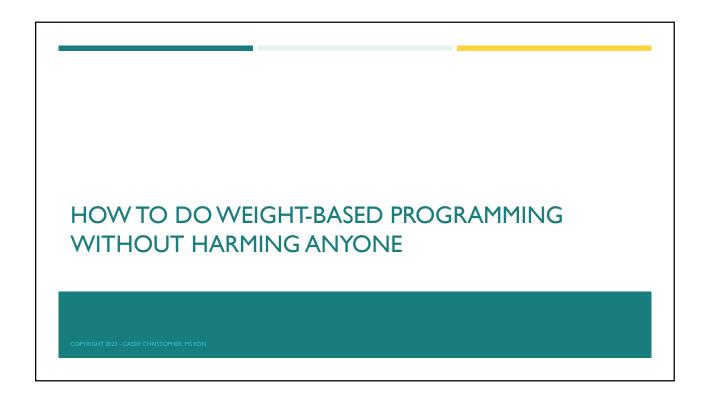
- You will only realize health spending ROI on your efforts if you create habit change.
- Think bigger than challenges, how can you work positive behaviors into the culture?:
 - Ex: Organization with the vision of "Safest and healthiest workforce"
 - Needs assessment/focus groups: discovered food security was a problem for employees
 - Organization decided to subsidize healthy onsite café meals including take home options

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2) FOCUS ON HABITS RATHER THAN CHALLENGES

- Help people connect to intrinsic motivators vs. extrinsic motivators for longer-term, self-motivated change
 - Extrinsic motivators: outside the employee for example rewards, money, time-limited things
 - Intrinsic motivators: inside the employee, connected to their values
 - Moving their body for fun, because they like to challenge themselves
 - Eating more fiber for regular bowel movements
 - Limiting added sugar for improved energy
 - In education, they've found providing extrinsic motivation early on, before a behavior is completed, may lead to ongoing motivation.
 - Idea: Early participation reward (extrinsic), then programming to help employees discover their intrinsic motivators

3) ADDRESS NUTRITION IN A WE	IGHT INCLUSIVE MANNER	
Health at Every Size		
Intuitive Eating	 Benefits: lower risk for eating disorders, weight maintenance (but not loss), improved nutrition 	
Mindful Eating	and fitness	



CHECKING IN...

What would you include in a weight management program?

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WHAT TO DO:

- Let employees opt-in themselves (versus being invited based on BMI, other factors) while also screening for underweight.
- 2. Optimally your initiative would be professionally led, at the very least professionally created.
 - Some credentials to look for: Registered Dietitian, Medical Doctor, additional training or certifications in weight management, Diabetes Prevention Program Training.
- 3. An evidence-based program that addresses weight bias and doesn't use moralizing language
 - Also important to address: self-compassion/self-talk, stress, sleep
 - 2. Behavior rather than outcomes focused
 - 3. Teach participants how to talk to their doctor about their weight in an empowering way
 - 4. Address body image and unrealistic cultural expectations



- NPR Life Kit Podcast series on weight (~20 min episodes, or read transcripts):
 - Boost Your Body Acceptance for Better Health, April 2019 : How to combat weight stigma, BMI science
 - The Biology of Weight Loss, May 2019: The science behind why losing weight is hard, and what to do about it
 - How to Approach Weight Loss Differently, Updated December 2022: How to set and work towards good goals
- Obesity Action Coalition Weight Bias Resources
- Cravings Busting Audio Guide (on my website)

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SOURCES

- HR Daily Advisor article on legal risk of Biggest Loser
- Patient-Centered Care for Obesity: How Health Care Providers Can Treat Obesity While Actively Addressing Weight Stigma and Eating Disorder Risk
- Benefits Pro Article on cost of obesity to employers
- How I Won The Biggest Loser Weight Loss Challenge at Work (Medium)
- No clear winner: effects of The Biggest Loser on the stigmatization of obese persons
- The effects of reality television on weight bias: an examination of The Biggest Loser



