Episode 234 – Dr. Tasha Ford: Emotional Eating Part 1

[00:00:08] Welcome to inSocialWork. The podcast series of the University of Buffalo School of Social Work at www.inSocialWork.org. We're glad you could join us today. The purpose of inSocialWork is to engage practitioners and researchers in lifelong learning and promote research to practice and practice to research. We educate. We connect. We care. We're inSocialWork.

[00:00:38] Hi from Buffalo. I like to talk about the unique things about our town. So here is a post Valentine's Day shout out to Buffalo's beloved sponge candy. It's a kind of honeycomb of pure sugar covered in milk chocolate although I've found it in Detroit and Chicago. Nothing compares to the sponge candy you can score at just about any grocery store around here. But the real deal is the sponge available at our local shops like Parkside Candy Watson's controls and my personal favorite Mike's homemade candies. We live well here. I'm Peter Sobota. Many of us eat to live. But what about those of us who eat too manage stress or negative emotions? in the first of a two part podcast Our guest Dr. Tasha Ford describes her work with clients who engage in emotional eating. She begins by defining emotional eating and goes on to discuss how some people develop a unique food relationship. She explores the role of socialization in culture and the development of emotional eating and describes the narratives that clients develop about their relationship with food. That in turn influences their reliance on food to manage negative emotion and life experiences. Tasha Ford Ph.D. LISWS is a private practitioner who also has an appointment as a social work instructor at Bowling Green State University Firelands. Our guest was interviewed in January of 2018 by Carissa Uschold LCSW. who is with university counseling services here at the University at Buffalo.

[00:02:20] Hello everyone. My name is Carissa. I am a licensed clinical social worker at University at Buffalo. I work at counseling services and I serve as a suicide prevention coordinator and eating disorder treatment team coordinator or you be counseling and it is my pleasure today and honor to introduce Dr. Tasha Ford. Welcome Tasha.

[00:02:41] Hi. Thank you so much for having me.

[00:02:43] How are you doing today.

[00:02:45] I'm doing well how are you.

[00:02:47] It's great to have you with us. So we wanted to talk about your research today so I'm going to focus on some questions specific to that. Why emotional eating and food relationships as a research and practice interest as a social worker.

[00:03:02] Well for the majority of my career I did a lot of like in-home therapy as well as working in the medical aspect of social work. I met so many patients who were overweight who were really struggling with either controlling their eating or just getting their weight under control and being active. And I guess in my heart I just felt that they shouldn't have to struggle that way.

[00:03:31] Sure.

[00:03:31] And so I started to find myself a lot of times in our sessions spending a lot of time talking to them about well you know where did they learn about food and you know how to eat and its purpose. And as I entered into my doctoral program I already knew that that was exactly the area that I wanted to focus on not just because of professional experience but also personally. There were several people in my life whom I love dearly. Some who have passed on. That was directly related to their weight. So I guess that's where my passion stemmed from about that and thinking

that that was important you know in social work we're supposed to look at person and environment like OK this is an issue about you and what's happening in your world. So let's look at it.

[00:04:23] Sure. So sounds like a holistic approach and definitely multidisciplinary as well. So what does emotional eating as you define it for your own research and practice approach.

[00:04:33] From my perspective emotional eating is all about any instance where you find yourself feeling something be it positive or negative. And instead of really allowing yourself to feel that emotion and work through it that food becomes a part of how you pretty much assess that situation and how you appraise what's going on and how you cope with it. And so the approach that I've always taken when thinking about emotional eating is Are people aware of what they feel and what their feelings mean and how that's influencing their food choices. You know subsequently and it even up to the point where it becomes cyclical behavior and just their own pathology.

[00:05:21] Sure and certainly this is in relation to overeating and obesity. Do you feel like that's in the whole of eating disorder treatment as well.

[00:05:29] I believe that it is. I know it's been such a long time for school OK. But even when I think about as an undergraduate student and through my master's training everything about eating disorders and an unhealthy food relationships always related to anorexia or bulemia. Sure. And even back then again looking at my personal experiences as well seeing people that I love who struggled. I've always thought that there's more to it than that. You know it's it's not just people bingeing and purging or people who binge in the game it's like there's another piece that was always missing to me for us to look at. And so as time went on I really just started to understand you know that when you look at treating an eating disorder you have to look at the whole aspect of of that individual not just people who have that issue of trying to control what they take in so that they can watch their way but what about the people who who really have issues with their emotions and cannot find that level of control or stop gate to cope with what they're feeling and their their food intake. So it's been interesting you know over the years to see how different researchers or even just nurses and laypersons look at what emotional eating is and is not. Because every time I talk to people they're just like Yeah when I'm sad I eat well no I don't have an eating disorder because I don't throw up after I eat and I'm like it's so much more than that emotional eating has to stay a part of the dialogue when we're talking about eating disorders because I think there's still so much yet to uncover.

[00:07:23] Absolutely and I think that the approach of labeling eating concerns or body image concerns as you encompass all of that can really help to include obesity and over eating or emotional eating as well. Absolutely. So why is the food relationship so important when considering emotional well-being and what is the role of social workers in this particular arena.

[00:07:47] Well I think the food relationship is important because it's not like a lot of I guess I'm kind of curtailing off into another area here. But to me it's all relative. You think about food relationships and people who have certain types of addictions and food misuse issues. That food relationship isn't something that you can just cut off and that's a dialogue that I've had with people for years. They're like well why can't this patient just stop eating. And I said you know people have to learn how to pick healthier foods and how to pay attention to their moments of safety. You know that whole food relationship it's a song and dance. Every meal every snack. You know it's sometimes it's a new tune depending on what you're feeling. And so when you think about that food relationship we have to consider who taught us how to eat when to eat how much to eat. Even going back to some students and I were discussing this just this past semester about how some people are overweight because they were taught they have to finish their plate whatever's in front of you. You have to eat all of it when you think about people as they grow into adults will their food relationship is if it's on my plate. I have to eat it it's not about my full. Do I like it. Have I had enough. Whatever

that continuum of dialogue may be. So they continue to eat. So when they think about their relationship with their food it's I'm not eating because I'm necessarily hungry I'm eating this because I'm told I have to. It's learning what do I like what don't I like how does this make me feel when I eat it. Am I happy. Am I noticing you know some of those highs that people can tend to get when they eat carbs and sweets when you can pay attention to what you're feeling before during and after you eat. To me you can better shape what that relationship looks like. It's almost like to say you know what I'm upset right now. Let's let's go on the negative end of the spectrum. I'm upset right now. I need to eat something because that's my pattern. That's my pathology. So now that I've been honest about that. OK. I've attended to that emotion. I've I'm acknowledging it. Now what am I going to do about it. OK well if I have a piece of cake sitting in front of me or I have that nice box of carrots and celery that I chopped up ready to go. Which one am I going to choose. And so again it's that song and dance. The relationship is saving oh cake makes me feel so good. And that whipped cream icing and those fresh strawberries right. Certainly it's OK to eat cake because there's fresh strawberries and there's dairy from the whipped cream. You know you go through this whole dialogue and you look at the carrots and the celery and the like. And yeah that may make me feel better because I'll get the crunch I can get rid of some of this frustration. But emotionally it's not going to do the trick. But as people begin to understand until you can choose to step away from food to soothe your feelings making the healthier option well there is an emotional component that goes to that because then you can feel proud of yourself to say well maybe I missed the mark and I still used food to try and cope. But but I opted to eat something healthier versus the cake. So it's almost like setting yourself up to succeed and the more you succeed the better you can feel emotionally. To me as a social worker I am doing a disservice to any client whether they are thin overweight or obese. If I see that their food relationship is unhealthy and I do not address what emotions are driving how when and how much they eat. And for me that's where social work comes into it is being able to pay attention to that and teach people how to do things differently.

[00:12:14] Absolutely. Do you think that there is a disconnect with individuals who are engaging in emotional overeating. Is there a disconnect between understanding physical and emotional hunger cues.

[00:12:30] Oh absolutely absolutely. Why take the experiences of people that I've worked with over the years and think about that a lot of them have just told me it's just normal. If I feel something I eat they don't really take the time to think about what that emotion is and whether or not their body is truly telling them that they're hungry. And so I remember I was very new to the field. I had one client who was pretty much like socially and emotionally paralyzed due to her weight. And I remember telling her I said What can you do me a favor and just try this for the next week. Try not eating until your stomach growls. Right. And I said I want you to pay attention to what emotions you're feeling you know and kind of document all of those things but only eat when your stomach growls and she really struggled with that because she was so accustomed to just eating whenever she felt whatever was going on. But she did share some of what she learned was that she really ate a whole lot more than what her body really called for. And so that kind of started my own little trend toward you know advising people to maybe you know drink water before they eat especially if they had already eaten little things like that so that they can start to kind of get their mind and body connection going a little bit more so that they could be aware of whether or not there was a physiological hunger or if it was their emotions. And and in the instance of if it is just their emotions to be honest about that. You know I've I cracked the joke all the time even with myself. My feelings are hungry right now. And so that is just where I am patients tend to appreciate that little phrase because again it's it's not burying what's going on it's being honest about it so that you can deal with it and make a conscious informed decision about what to do next.

[00:14:41] Absolutely. How do you think patients or clients respond or react once they become more aware of the actual physical hunger or hunger cues.

[00:14:52] I found that some people are are more shocked and surprised because they a lot of times you know when you're an emotional eater sometimes you really don't think you eat that much right. You're like well I only had this or only had you know that bag of cheese popcorn and then I didn't have anything else. But then after they start to look at the amount of food that they were eating because sometimes a part of of teaching them to do things differently is really to log in pay attention to not only what they did eat but what they wanted to eat and what they chose to do instead. And so people like oh my gosh you know normally I would have had you know like a and then a bag of chips. And then an ice cream sandwich all between lunch and dinner and they're like wow I never realized that I ate that much. Some people are shocked in a way where they're like OK now I can figure out how to take a different road to do some things differently and some other people get into that shame cycle as whether you're a clinical social worker or you're doing the case management piece then you have to really pay attention to. OK well how do I help this person to understand that they have to forgive themselves because they're learning they're really learning how to live life differently and that takes a lot of work and effort and. And you're going to have ebbs and flows to it. But it's what you choose to do once you realize that something is off kilter that makes the difference so that's what I found is they're either really shocked and excited to to be able to recognize it and change it or their shame that comes along with it.

[00:16:41] What is the role of socialization and the development of food relationships and emotional eating.

[00:16:46] When you think about your nuclear family or the people that you know while growing up that you spend the bulk of your time with you start to think about it at least to be able to maybe carve out some sort of a pattern you start to look at. What did grandparents parents aunts and uncles. What did they teach me about eating. What did Holidays look like. How much food was on the plate were there lots of carbs as a part of our meals. How did people feel about vegetables. The old adage of all you fell down. Would you like a cookie. Oh. Why is that a cookie. Not a lot of them that patch it up it offer it Apple or or you know a hug something like that. It's. It's always How was I taught that food makes things better. And I think that culturally speaking looking at the span of life people show their love with food. They show that they care with food and it's an extension of my home to you. And so you just think about how important is food in the course of your life and who taught you that. And a lot of times people really struggle with that separation because if you say that eating when I'm sad or eating when I'm happy as a part of the celebration is abnormal or we do it too much. Sometimes people can take that as a personal affront to their culture and into who they are and where they come from. And so a part of that is saying it's not to say that eating is wrong. But why are you eating. And what are you eating. What's the level of importance. And I think that if we can start to socialize people to say that OK if for instance eating at a baby shower this is what we do. It's a part of how we do things. Have some foods there but not a smorgasbord. You know we're accustomed to these huge tables full of lots of food. And then we sit around and we converse and we laugh and we talk or we cry whatever the situation may be. But if we start to socialize our children and ourselves to say this is how much food we're going to have. But here are some activities that we're going to do as well to get us up and moving. It starts to teach us a different way of managing what we feel and what we think and how we engage with food every day.

[00:19:34] Absolutely and I think what I've found a lot of clients is in planning for let's say a baby shower or maybe getting together with family. There is a period of time that they're maybe not eating beforehand to prepare for the event. And certainly a lot of anxiety that occurs heading to the event because maybe they don't know what's there or they feel you know they have to eat everything in front of them because you know whether it's related to culture you know what it is for them the person prepare the food for me. So I have to eat it. And I have to eat it all.

[00:20:09] Absolutely. And you know and it's like how how do you start to change that narrative to let people know. OK. You were taught you have to clean your plate. You were taught that at a buffet. Gloria made all of this food and you know you have to try a little bit of everything you have to out of respect. Sure. How do you start to change that narrative to say it's OK if I only eat a little or it's OK if before I go if I eat my salad which I believe may be healthier for me because I can pretty much surmise what may be there. So that way I don't fill up on the things that I know later on could put me back into their shame cycle.

[00:21:00] I think also sometimes these events are triggering for people because maybe there's a lot of fear foods that are in place or being offered and you know they worry that this is something that will lead to over eating emotional eating or a binge cycle.

[00:21:17] Absolutely. And I think that's where people have to you know that whole thing learn to be comfortable with saying no. And I think that takes a lot of training though. So on our behalf social workers who are working with us with these people sometimes we have to kind of be ahead of the ball on this and say well you know holidays are coming up. What are your plans. Let's kind of role play how you're going to do this. How are you going to work this out. What's your dialogue going to be if you need an out. What will your out be so that you can leave the room or you know whatever it is that they need to do to be comfortable with preserving this new way of life that they're trying to build because it is not always easy when you come from a family who who believes food first because that's how I show you how I feel and you need to eat it. Turning from that can sometimes be very difficult especially when you're in a room full of people who who think differently than what you're trying to do now. So it's really teaching them how to not only change their own narrative but how to change their dialogue with other people so that they're comfortable in their new lifestyle.

[00:22:33] So it sounds like you're teaching a lot of self advocacy and resilience and sort of letting allowing them to feel empowered to speak up for themselves.

[00:22:44] Absolutely. I think in this quest for wellness and long life it hoping to not be sick as we age because of weight related issues. You know self efficacy is essential if you don't believe that you can. The journey is going to be even harder. And so I think it is critical to to educate people on what they're feeling about as much as they're comfortable putting on the table. I have this this activity that I did with patients and I literally withdraw our table setting and I would always say OK let's put everything on the table and we would just start to write different life issues in different areas of this place setting because I wanted to teach them if you put it out there and you look at it you can start to really size that thing down and break it down into manageable parts so that you can say OK this is how I deal with this. This is how I categorize this and you start to come a scaffold your ability to identify and manage issues so that you can experience more success. And to me that education is the is a part of everything. You know if you don't learn how to do it differently then you never will.

[00:24:15] Absolutely doctor Ford that sounds like an excellent intervention for sure.

[00:24:21] You have been listening to Dr. Tasha Ford discuss emotional eating and cultural competency in social work. Look for part two of this podcast soon.

[00:24:40] Hi I'm Nancy Smyth Professor and Dean of the University of Buffalo School of Social Work. Thanks for listening to our podcast. We look forward to your continued support of the series. For more information about who we are as a school our history or online and on the ground degree and continuing education programs we invite you to visit our website at www.SocialWork.buffalo.edu. And

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