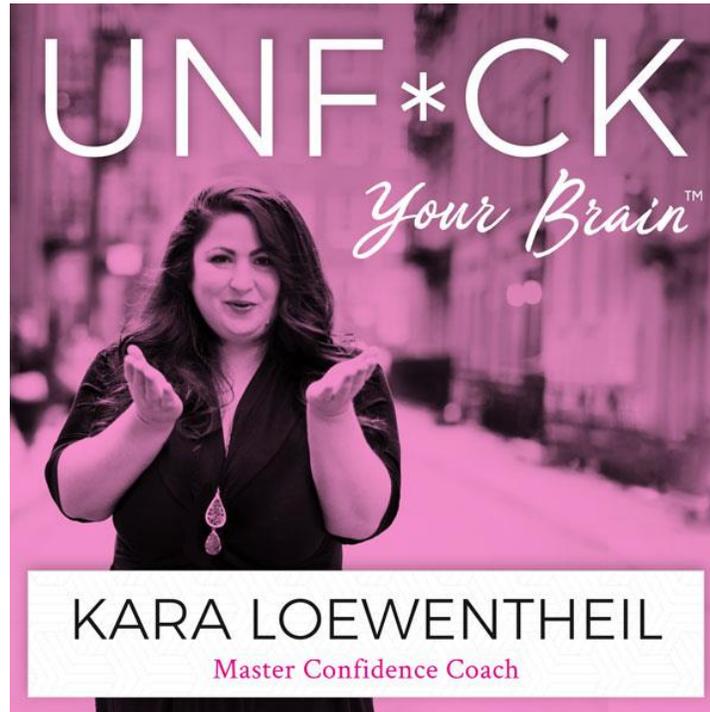


## UFYB 147: Listener Q&A Vol. 17



### **Full Episode Transcript**

**With Your Host**

**Kara Loewentheil**

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Welcome to *Unf\*ck Your Brain*, the only podcast that teaches you how to use psychology, feminism, and coaching, to rewire your brain and get what you want in life. And now here's your host, Harvard Law School grad, feminist rockstar, and Master Coach, Kara Loewentheil.

Hello, my chickens. I hope that you all are doing amazing and managing your minds and thinking about thought work and your lives. Today, we're going to answer some questions.

So, here is the thing, it's totally normal when you are learning thought work to have questions. I get a lot of questions that start with this kind of disclaimer, right, or self-undermining of like, well, this is probably a stupid question, or I feel really dumb asking this, but, dot, dot, dot, right. This is a thing that women are socialized to do to somehow feel stupid or think that we're dumb just because we don't immediately understand every ramification of something.

But, thought work is like learning a whole new language and approach to the world. It is completely normal to have questions. It's completely normal to need help and coaching. I mean, when you think about it, these kinds of teachings and concepts, many of them were developed and taught through teacher student relationships long before there was a podcast or anything like a podcast, right. So, I do my very best to teach and explain everything really clearly and directly on the podcast, but it's a one-way conversation, right. It's like reading a book. It's not a back and forth.

And so, if you have questions about how two of my teachings interact with each other, like they seem to contradict you, or how do these work together, or you have questions about just not fully understanding something that I taught, or you have questions about how a concept applies to your own life, all of that is totally normal. It does not mean that you are stupid or missing something or anything like that. It's just a normal part of learning something new.

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So at the very least, if you have questions about this work, I want you to stop telling yourself that it means you don't understand it, or you're stupid, or you should already get it because that's just not true, right. It's a totally normal brain process.

In fact, I really love when I have students in The Clutch who ask a lot of questions about what I'm teaching or how the concepts interact, right. They are always apologizing or putting disclaimers on it. I'm like, "No, this is exactly what I want you to do. I want you to challenge the ideas and really turn them around in your brain. That's how I know that you are really interrogating them."

I was a total nightmare to train because I had so many questions. But now, because my teacher and myself, both, my teacher was very patient with me, and I was willing to really dig into the questions and think about them myself. I talked about them with my coaching friends, because I really engaged with everything and made sure I completely understood and believed it, which I couldn't do on my own. I needed to engage with my teacher, engage with other coaching friends, learn more. That's why I'm such a proponent of this work because I know that I challenged it from all sides, and it held up. So, there is nothing wrong with having questions and it's a good thing. Critical thinking is a good thing.

So in The Clutch, we have a private podcast every week where I answer these kinds of questions, right, what does this mean, I didn't really understand this teaching, or how does this teaching and this teaching seem, like, I don't understand how they work together, or they seem like they conflict, or okay, but what about if we applied this teaching to this kind of scenario, that doesn't seem right, how do we handle that, or you teach this and then this is my personal situation and I'm having some issues figuring out how to apply it there. So, we do that every week in The Clutch and the private podcast.

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But, I think it's always useful to hear those kinds of questions answered. I know it's one of people's favorite parts of The Clutch. And so, I wanted to give you guys a little taste of that today. So I just want to be clear, the ones I'm going to answer on this podcast are not questions from Clutch members.

I also get a lot of emails from people who are not in The Clutch, obviously, podcast listeners, asking questions. I wish I could answer them all. It's just not possible or feasible. But, I've picked a few that I think are really interesting or are powerful or educational, and I'm going to answer them for you today on this public listener Q & A.

And if you like this kind of format and you really like having... I think some people learn really well from more abstract teaching. And then some people learn really well from hearing specific people's questions and examples. And so, of course we do both. But if you like today's episode, and you find this really helpful then definitely, you should come check out The Clutch because we have a podcast every week just like this, but only for questions from Clutch members.

So, the questions on today's episode are from the public non-Clutch members, listeners of the podcast. And then The Clutch, when we do it, it's only Clutch member questions, so that you get much more priority. All right let's take it away.

Alright, first question. "I am an NHS GP" - which I think is National Health Service general practitioner - "in the UK. I use thought work during my consults and host a podcast applying this work to health. A forthcoming episode is about BMI. Discussing weight is considered a doodie of a doctor in the same way we advise reducing smoking or alcohol. I was very interested in your thoughts regarding body image and weight.

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Is it possible to advise weight loss without activating shame? Is advising weight loss the wrong approach altogether? I agree all shapes and sizes are beautiful because humans are beautiful and understand the impact poor body image can have. At the same time, the negative impact of excess weight on health is well documented. Is it possible to increase love for our bodies but also reduce our BMI? Not to be more beautiful or better, but to reduce risk of illness, out of self-love, not hate. If so, what is the cost and is it worth it? How can such a message be delivered with love, positivity, and hope?”

Okay, so here's the thing. The negative impact of excess weight on health is not well documented. In fact, what is well documented is the opposite, which is that except at the very extremes, weight does not have a negative impact on health. What can have an impact on some aspects of health is metabolic disregulation, which is often associated or correlated in the public mind and the medical mind with weight, but in fact, is not caused by weight.

Some people who have regular BMIs may have metabolic disregulation and some people with “obese” or even “morbidly obese” BMIs may not have metabolic disregulation. These things are sometimes correlated. They are not actually causally always related.

So as a doctor, I think it's your responsibility, especially since you're asking these questions, to really educate yourself about what the science really shows. There are a lot of resources online from health at any size, researchers and physicians and registered dietitians and all sorts of healthcare practitioners that actually dig into the science and what it shows.

In fact, for instance, the science shows that being “mildly” overweight - I'm going to get into all these different measurements in a minute - being “mildly” overweight is actually protective against death compared to being “normal” weight or certainly compared to being under weight.

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So, I don't agree with this premise that the negative impact of excess weight on health is well documented. In fact, I think that that is an inaccurate shortcut and that it is every practitioner's responsibility to actually learn about what kind of health impacts you're talking about and what actually cause them.

Most doctors get about half an hour of training on nutrition science, food, weight, et cetera. So, the fact that discussing weight is considered a doodie of a doctor is only because there is an inaccurate assumption and understanding of weight and health. Like now, doctors advise reducing smoking because we learned more about that. For many years, doctors did not advise reducing smoking because they didn't think there was anything wrong with it.

Those things change. You have to make sure that you agree with the modern consensus in your field and there's an enormous amount of fat phobia and fat bias in the medical field that isn't scientifically supported.

So, number one, I would, since you seem to be someone who cares about this, I would do your own research and come to your own conclusions and really look at what you're talking about. If you run a metabolic panel on somebody and you can see that, say they're insulin resistant or whatever else is going on that might impact their health, some of which - it is possible to treat with diet, and some of which is not.

There's a lot of science now showing that diabetes is primarily or largely a genetic condition. A lot of researchers now believe that changes in eating or exercise may for some people delay the onset of it but are unlikely to completely prevent it if we're talking about Type 2 diabetes.

There's a lot of science and research out there for you to get acquainted with and really decide for yourself what is the true risk to health and what

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isn't. There's an enormous damage to health caused by weight stigma in the medical profession. Doctors prescribing weight loss, rather than listening to what's actually going on with the patient.

Fat people not seeking medical care because they know they're going to get shamed about weight loss. And I understand that you are asking if there's a way for you to do this without shaming, but I just want you to really recalibrate and think about what is the benefit of counseling someone to lose weight, which by the way, no diet has ever been shown to reliably and consistently produce sustained weight loss beyond 10% of a person's body weight in all but - in more than like, 5% of cases.

So, where doctors are constantly "prescribing" a practice that they don't have any good science to support being effective or possible, that's another problem. So I just want you to back way the fuck up with this question and not assume that the goal is to be able to counsel people to lose weight in a non-shameful way.

I agree that that's better than trying to counsel them to lose weight in a shaming way, like good for you for taking that first step. But if you really want to be an ally and you really want to understand the truth and the facts, go do some research on what the mainstream science actually shows about weight itself, not metabolic dysregulation, untreated Type 2 diabetes, insulin resistance or whatever other - hypertension, whatever other conditions may sometimes or often be associated or correlated with weight but are not actually caused by it.

And a lot of which is actually caused by medical neglect and stress caused by fat phobia, in the same way that a lot of scientists now argue that much of the health discrepancies between say, people of color and white people in America are caused by the systemic stress of living under conditions of racism.

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Similarly, a lot of the weight implications for people of size are caused by the impacts of systemic social oppression and fat bias, neglect by the medical establishment, and actually damage caused to the endocrine and hormonal system by yo-yo dieting and cycling your weight up and down and restriction, binging, et cetera, all of which comes from the diet industry.

So that's really the first question. Now, if you want to ask is it possible to change some of your eating or movement behaviors for health reasons while still loving yourself, yes. I think that that is possible. I think that it takes work to get there because we are so fucking indoctrinated by fat bias and fat phobia and body size negativity to an extent that we just don't even realize. We're not even conscious of the depths of it.

So, I think there's a lot of work to be done there, but yes, it can be done. Just like there are people who teach intuitive eating for people with Type 2 diabetes who do maybe want to change some of their eating patterns. You can learn how to change your practices, which may have an impact on your health without your weight changing at all.

For instance, your blood sugar levels can change for some people from changing their movement or their eating without their weight changing at all. Again, it's not about the weight. That's not actually the issue. So, I just think it's not the right way to phrase the question.

How can I tell people to lose weight without shaming them is the wrong question? How can I find out what if any actual health risks or problems this person is currently experiencing and how can I advise them on what kind of practices or approach would actually change the underlying issue if there is one? Not just assume that weight is a proxy for it and tell them to lose weight.

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Okay, I had a lot to say about that question. Next question. “What do you do when you’re choosing consistent thought patterns that produce feelings of happiness and joy but also seem morally wrong? I know you teach us that it doesn’t make sense to apply moral weight to thoughts, but in this situation, I can’t help but judge my own thoughts as wrong, as happy as they make me feel. These thoughts are centered around my ex-boyfriend who cheated on me two months ago.

Ever since he cheated on me, his life has gone downhill. He lost his job, several others cut him out of their lives, and people tell me he’s generally unhappy. On one hand, I don’t want to feel joy at someone else’s suffering no matter what they did, but my brain is also telling me, why would you change these thoughts? They’re making you so happy and they’re not really hurting anyone. Do you have any advice?”

This is such an interesting question. So, here’s what I would say. There’s a reason that I’m constantly talking about deciding whether or not to keep a thought based on the result you’re getting. Not just how it makes you feel. We always want to look at the result.

So, you have a thought that creates a feeling that motivates an action that produces a result. For instance, let’s say you set a goal for yourself, something you really want to achieve. It’s really uncomfortable, requires you to grow and evolve and it’s uncomfortable. When you start feeling that discomfort, you might come up with a thought like, “It’s okay if I don’t do it. It’s not a big deal. It’s fine.”

And you might feel relief. That might feel good. But are you going to get the result you want? The result you wanted was to stretch and evolve and grow and go after this goal, even though it feels bad sometimes when you do that, even though we have negative emotion when we do that sometimes.

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And so, coming up with this new thought that lets yourself off the hook, it might feel good, but you won't get the result you want. So that's what I would be curious about with you. You're already judging yourself, which is not helpful, and it makes you argue with yourself to keep the thought.

So, number one, the work is always to practice not judging yourself. It's just a thought. It's not any kind of person you are. It's just a thought. But then get curious and look at well, okay, so I feel happy when I think this, and then what do I do when I feel that way? What result do I get?

Because I think it's interesting. I think if I imagine your model, I bet your action is that you look for other opportunities to hear that his life is going poorly, you discuss it with other people, maybe you look at his social media, and then what result do you get? You're not moving on from him. You're not separating from him. You're actually continuing to be emotionally enmeshed with him.

So, then you would have to decide like, is that a result that I want? Even if it feels good in the moment. It's just like, watching 12 hours of Netflix can feel good in the moment, but do I like the result I get? Sometimes I want to do that. Sure, and I'm not going to shame myself about it. But if I did that every day, I wouldn't get anything else done in my life that I do want to do, even though it would feel good. I would keep getting that hit of dopamine and entertainment and I'd just watch that all day.

So that's what I would say about this kind of question. It's a great question. But that's why we don't stop at the feeling line. We want to go all the way through to the results. Not just how do I feel, but how do I act when I feel this way? And am I getting a result that I like? And I would say generally, you're going to find probably not with that kind of thought.

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Okay, here's the next question. "Hi Kara, I have a question about if there are circumstances in which thought work doesn't apply. I understand that your thoughts cause your feelings, but what happens when your feelings come first without any thought attached? For instance, if your hormones are out of whack and you find yourself crying for no reason, or you haven't slept enough and you're just generally moody, or you're experiencing depression, which causes feelings of heaviness without necessarily needing a thought to create said heaviness."

Okay, so this comes up a lot. I teach at length about this in The Clutch and coach on it there. This is a very common question. I don't think there are circumstances where thought work doesn't apply, and I don't think that feelings happen without thoughts. I do believe you may have - it's sort of funny.

We'll say like, well, what about hormones? I mean, when your brain thinks a thought that produces dopamine, that's a hormone that produces a feeling, right? So, hormones and feelings are not 100% - they're not completely unrelated, different things.

But I think there are feelings that are created by thoughts and then yes, there may be hormonal fluctuations that are created by other systems in your body, other biological systems. But I don't think that they generally cause feelings in the sense of let's look at your question about hormones. Let's talk about PMS. Comes up a lot, we talk about this a lot in The Clutch.

What usually happens is that let's say you find yourself crying. There usually is a thought. You may not be conscious of it or aware of it. That is a big distinction. There probably is a thought that made you cry. Now I think sometimes what happens with hormones or being cranky when you're hungry, whatever, is not that you become this totally different person. It's

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that whatever your tendencies or thoughts were before, you're just more reactive to them.

So, if I think about it that way, it's like I used to be super reactive to my own thoughts. I believed them really hard and if they were painful, they were super painful. And now, at my crankiest, because I'm hungry or haven't slept or whatever, I'm still only 10% as emotionally volatile as I used to be.

So, I think those things can impact our emotional regulation skills, like our ability to kind of manage our mind to coach ourselves or just kind of how it impacts our reactivity, we'll react to that thought more intensely. So maybe a thought that just makes you a little sad normally will make you cry when your hormones are in a certain place.

But it's not that there wasn't a thought or that it's something that you would never think about when you weren't having those hormones. It's just increasing the sensitivity in a negative way kind of, of your emotional receptors. Your reactivity is more intense. That's what I think is going on with things like PMS.

Talking about depression is such an interesting example too because yes, some people do have depression that is made better or solved with medication. So, there is some way of intervening sometimes on the brain chemicals directly.

But number one, there's often a lot of thoughts involved. And there's for sure studies showing that doing thought work or in the psychiatric community, be more likely to test something to CBT or DBT. Cognitive Behavioral Therapy or Dialectical Behavioral Therapy, or ACT, Acceptance and Commitment Therapy, all these different therapies that have some varying focus on cognitive strategies, emotional allowance. A lot of similar

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things that we work around in thought work, that those have a positive impact on anxiety, depression, personality disorders, et cetera.

So, I never find making it and/or helpful. I just think it's an "and." I do think there's always a thought involved. Yes, I also think sometimes you can't change a negative emotion even if you change your thought, either because you can't believe a new thought fully yet, or there's another thought you're not aware of, or maybe there is an imbalance that starts chemically that is causing the thought as opposed to the thought has a feeling.

It's not an "or." It's an "and." Even when that's true, it's like, when that stuff is true, thought work is all the more important. It's like we sort of want to think like, well, if sometimes I have feelings without thoughts, then that means that thought work doesn't apply to those, and I think it's the opposite.

If I'm emotionally volatile because I'm tired or hungry or have some hormonal thing going on, all the more reason that I need some thought work then to be like, this is okay, I am overreacting, I'm having an emotionally reactive experience, I can still love and accept myself, I see this is happening, I don't need to act on it. That's thought work.

And similarly, it's all the more important when you are predisposed to have anxiety or depression or something like that where your brain is going to have a lot of negative thoughts, who needs it more than someone who would benefit from, in addition to whatever kind of psychiatric or medication support they want, would benefit from being able to practice the kinds of thoughts that help you get through those periods.

Like it won't always feel like this, my brain is lying to me when it tells me that I am worthless or life is hopeless or whatever else. So I don't think it's

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useful to think of it as like it's this or that. It's "and." A lot of your feelings are caused by thoughts that you can find and trace them to.

And maybe some sometimes aren't, and so what? In that case, using thought work to accept and work with those and then think a new thought, even if you can't find the thought or there wasn't one, think a new thought on purpose that will change the feeling. It's just not an "or." It's an "and."

Everybody needs thought work. People who don't have hormonal dysregulation, people who don't have psychiatric mental illness, people who don't benefit and who do benefit from medication. Everybody. Everybody needs thought work. There's multiple tools to use, some of which are hormone regulating, some of which are brain chemical regulating, some of which are serotonin regulating or whatever else. And then thought work is also a tool.

So, I really encourage you not to think about it as it's this or that. There's always a role for thought work no matter what you're feeling to help you have compassion for yourself, accept what's happening, use your other tools or get whatever other help you need, not judge yourself, not shame yourself, believe that there's a point and hope to working on it.

Thought work is always helpful for all of that, so it's always going to be a useful tool. It's not the only tool you always need. Sometimes you need other tools too, but I think it's always a useful tool.

Alright, that seems like that perfect place to end that. So, hope you've enjoyed this little peek into the weekly Clutch private podcast experience, and I'll talk to you guys next week.

If you're loving what you're learning in the podcast, you have got to come check out The Clutch. The Clutch is my feminist coaching community for all

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things Unfuck Your Brain. It's where you can get individual help applying all these concepts I teach to your own life and learning how to do thought work to blow your own mind.

It's where you can learn new coaching tools not shared on the podcast that will change your life even more. It's where you can hang out and connect over all things thought work with other podcast chickens just like you and me. It's my favorite place on earth and it will change everything, I guarantee it.

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