Psychologist and weight control expert Dan Kirschenbaum ’71 on facing the challenges of biology and America’s ‘obesogenic culture.’

Interview by Karen McCally ’02 (PhD)

About 13 years ago, the World Health Organization declared that obesity had become a worldwide epidemic. Food is still relatively cheap and, in many places, incredibly abundant. The United States leads the trend. Our culture has become obesogenic. This is a relatively new term to describe environments that promote excessive weight gain.

In the United States, unhealthy eating has become normalized. Many people think of a cheeseburger, fries, and a big, sugary drink as a normal lunch, and from a nutritional standpoint, that’s a travesty.

The number one reason so many people fail in their efforts to lose weight is that they don’t understand what it takes and what they’re up against. It’s like going into battle without knowing anything about the enemy.

Moderation, though it’s the prevailing view, doesn’t work. My approach focuses very much on helping weight controllers become like athletes in training. Part of that includes eliminating fat from the diet in addition to introducing several other scientifically based principles to reduce appetite while retaining enjoyment of food.

The next steps are consistent exercise and self-monitoring. The latter is a cornerstone of cognitive-behavior therapy. Self-monitoring means writing down what you’re doing and evaluating it, leading to the development of a “healthy obsession.” It doesn’t take a lot of time to self-monitor, just a couple minutes a day once you get used to it.

When you’re considering buying books on weight loss or any other aspect of health, check out the references section to see if the authors have published research on the topic in peer-reviewed scientific journals. The authors of best-selling diet plans, such as the Zone Diet, the Carbohydrate Addicts Diet, the South Beach Diet, or the Atkins Diet, may seem like experts because they have doctoral degrees, but they have published little to nothing in scientific journals.

As a therapist and designer of weight loss programs for adolescents, I talk to kids a lot about the question, “Why do this?” They can’t really relate to the possibility of avoiding cancer in 50 years, but they do want to feel stronger and happier as well as look better in clothes. Immersion programs that feature cognitive-behavior therapy can help them believe they can do it.

The concept I convey is: Obesity is a disease. Treat it like a disease and not like a social affliction. Most people don’t make the kind of major changes required to lose weight permanently just by reading about diet and exercise. There are great sources of information, particularly on the web—Michelle Obama’s “Let’s Move” (www.letsmove.gov) or WebMD’s “Fit” (www.fit.webmd.com), for example. But information alone usually doesn’t produce lifestyle change.

Dan Kirschenbaum ’71

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Professor of Psychiatry & Behavioral Sciences, Northwestern University Medical School; Clinical Director and Vice President of Clinical Services, Wellspring; author of The Wellspring Weight Loss Plan (BenBella Books, 2011).
Thoughts on River Campus food, 1967–71: “It seemed pretty good to me. My mother was a terrible cook.”