

## Deciding How to be a Healthier Eater

### What does it mean to be a healthy eater?

All you have to do is watch TV commercials or go online to see dozens of recommendations about how you should eat. Try this new product! Try this diet! It can be overwhelming. Many products are created to make us want to buy them and not with your health in mind. Everyone claims they have figured out the “the right way” to approach Food and Drink. We keep hearing about new recommendations, and many of them do not agree with each other.

But how do you know what way to eat will support your health the most? People ask their health care teams about this all the time. There is not a simple answer. As with most aspects of health, a lot depends on you as an individual. You have your own likes and dislikes. You might have access to some foods and beverages but not others, depending on where you live and how much money you have. You may eat a certain way based on your background or where you came from. What you eat also depends on who does the cooking, and how much you eat out.

The bottom line is, you are the one who has to decide what it means for you to eat healthy. There is a lot we know from nutrition research about what works best, and your care team can offer you support deciding how that information applies to you. You are the one who makes the final decisions though. This handout is designed to help you with some of those decisions.

### What questions should I ask about eating healthier?

When you are thinking about Food and Drink, it helps to start by asking one or two general questions about how nutrition fits into your life. Remember, it might be easiest to make just one small change at a time. Do what works best for you.

Here are some examples of questions for you to think about:

- Why should I eat healthier?
- How does eating influence my overall health? How does it help me reach my overall goals?
- What do I like about how I eat? What is going well?
- What are some examples of ways I eat that I would like to change?
- What is one simple change that I can make to improve my eating without having to put in a lot of additional time and effort?
- Who do I need to ask for help with my eating? What support do I need?

One helpful way to think this through more is to keep a food and drink, activity and symptom log for a few days and share it with your health care provider team. One can be found on the [Whole Health Library](#).

## Should I go on a specific diet?

Often, when people hear someone mention the word “diet” they think more about what they can’t eat and not about what they can eat. In fact, many dietitians say they avoid using the word diet, because people think of it as something negative or something that they will only do for a limited time. Healthy eating does not usually happen—at least, not for long—if people feel like they are making too many sacrifices. Ideally, a diet—or, some people will say, an ‘eating style’—should feel easy, and even enjoyable, to follow. The following are some approaches to eating you can consider. It is always helpful to check in with a dietitian to get more advice, if possible.

**The Mediterranean Diet.** You will learn of several eating styles if you read about nutrition research in the news or look at other Whole Health handouts related to Food and Drink. Some of these can have real health benefits. For example, there has been great research coming out about the Mediterranean Diet (Medi-Diet). The Medi-Diet involves eating like people do in countries around the Mediterranean Sea, like Italy, Spain, and France. This diet focuses on whole grains, fish, fruits, and vegetables, and perhaps most importantly, on eating without rushing in the company of friends and family. This diet has been found to lengthen a person’s lifespan, and to prevent a number of health problems, such as heart disease, Alzheimer’s, cancer, and type 2 diabetes.<sup>1</sup> Refer to the handout, “[How to Eat a Mediterranean Diet.](#)”

**Eating to Reduce Pain and Inflammation.** You may also hear about eating in a way to reduce inflammation. Inflammation is a state of emergency the body enters, usually to fight off infection or injury. It can involve swelling, increased immune system activity, pain, or redness somewhere. Inflammation can be helpful for getting rid of infections, but if we are always inflamed, that can lead to health problems.

Poor health habits, including unhealthy food choices, can cause inflammation, but we can also eat to decrease inflammation. Some ways to do this include reducing red meat and other sources of animal fat, eating more vegetables and fruits, minimizing processed foods (foods with lots of added chemicals), and eating spices that lower inflammation. For more information, reference the handout, “[The Anti-Inflammatory Lifestyle.](#)”

**Other Examples.** Other approaches to eating that you might consider include the Dietary Approaches to Stop Hypertension (DASH) diet, which can help with preventing heart disease and stroke. Visit <https://www.nhlbi.nih.gov/health/health-topics/topics/dash>. The American Diabetes Association also has a number of patient materials related to how to eat to prevent or manage diabetes. Visit their website at <http://www.diabetes.org/food-and-fitness/food/>. Vegetarian and vegan diets are also worth looking into. Explore different options with your dietitian and other members of your clinical team.

**Popular Diets.** When studies look at popular diets, like Atkins, South Beach, Weight Watchers, and so on, they find some benefits in some people with weight loss. The 20-30% of people who follow the diet will lose weight, but it is unlikely that most of them will keep it off, because people don’t usually stay with the diet over the long term.<sup>2</sup>



There are two key things to remember when you think about making major changes in how you eat.

1. The approach to eating that will work for you is the one you are willing to stick to. That means you should focus on a diet that you can follow, and, as much as possible, enjoy.
2. It often works best to take it one step at a time. You might want to start simple, with just changing one thing about how you eat. Wait until you are confident you can do that thing, and then change something else. Even small steps, like decreasing soft drinks, eating one more vegetable serving a day, or eating out fewer times each week, can make a difference. Sticking with small steps you know you can do works better than yo-yo dieting, where a person starts a diet, then stops, then starts another one, then stops.

Various websites compare different diets, including Healthline <http://www.healthline.com/health-slideshow/diet-reviews#1> and US News <http://health.usnews.com/best-diet/best-diets-overall>. For more information on specific diets, refer to the resource list at the end of this handout.

## What are some examples of healthy eating goals?

Some people prefer setting specific goals to completely changing how they eat. One thing you can talk with your health care team about is setting shared goals. A shared goal is one that you and your clinical team agree is important. Often these goals are described as SMART goals, because words describing the goal spell the word “SMART.” The words that make up “SMART” goals are:

- **Specific.** You need to talk about details to make a goal real. “I want to eat healthy” does not get you very far. “I will eat one additional serving of vegetables every day at lunchtime when I am at work” is a goal that is more specific.
- **Measurable.** Can you measure what you will be doing? “I will drink 2 more glasses of water a day” is a goal with the measure as a part of it.
- **Action-Oriented.** A goal should have you taking action, and it should be something you do yourself. Not “I will tell the person who makes my food to do that” or “I will think about that.” You should take action.
- **Realistic.** Goals that are not possible don’t help. It is great to be excited and make a lot of changes, if you truly can, but it is best to choose a goal that you feel confident you can always do, even if life gets busy or more challenging. Keep it real. That also means being patient with yourself. If a goal doesn’t work out, try again, and explore what was challenging.
- **Timed.** Set a time to start, and set a time when you will stop and check in with yourself about how it is going. For example, “I will start this next Monday at dinner and I will reassess at the end of the month when I see my dietitian.”

SMART goals start with “I will...” More detail is always helpful.

Here are some more examples:

- “Starting next Monday, I will eat one handful of mixed nuts (low-salt) each day. I will do this for 3 weeks. Then I will decide if I want to stop this or keep doing this, and I might add in another goal at that time.”
- “Starting on the first of next month, I will not have anything else to eat after 8 pm. Only water until I wake up the next morning. I will check in with the nurse at my clinic at the end of the month to see if that makes a difference with my nighttime heartburn.”
- “Starting tomorrow, I will drink water in place of one of the sodas I drink at work. After a month, we will see how my weight is doing and I will talk with my dietitian about next steps.”

Take some time to make some goals of your own, and share them with your clinical team. Here are some topics worth thinking about when you are trying to decide what goals to set, and you are welcome to add your own to the list:

- Daily amount you eat (total calories)
- Amount of animal fat and red meat you eat
- How much fat, carbohydrate, protein you eat
- Fruits and vegetables
- Eating processed foods (foods with lots of added chemicals, especially the ones you can't even pronounce)
- Foods that upset your stomach, change your bowel habits, or cause other symptoms
- Alcohol consumption
- Emotional eating
- Caffeine intake
- Fiber intake
- Getting enough vitamins and minerals
- Access to food
- Eating healthy even when money is tight

Focusing on *any* one of these areas can help you be a healthier eater, and you can keep adding on more healthy choices, depending on how it goes.

## How can a dietitian help me out?

Dietitians are up on the latest research on nutrition, and they can help you adjust your eating to help with different health problems you have, such as diabetes, high blood pressure, or inflammatory bowel disease. They can usually spend more time than your primary care provider is able to when it comes to teaching and giving you advice about everything from buying food, to cooking tips, to how to make healthier eating choices that make sense to you. You can set up a visit yourself, or ask your primary care clinic for assistance.





For you to consider:

There are many ways you can make your food and drink choices more healthy. The key is to do so in ways that work for you as an individual. That can mean making some very specific changes, choosing an overall eating style like the Mediterranean Diet, or setting a SMART goal. As you explore your options, ask these questions:

- How important is it to you to have support from other people as you try to figure out ways to eat more healthily? Who else can support you? Your family? Others?
- What information do you need in order to make healthier food choices?
- How will you know you have been successful with improving your eating patterns?

The information in this handout is general. **Please work with your health care team to use the information in the best way possible to promote your health and happiness.**

**For more information:**

ORGANIZATION	RESOURCES	WEBSITE
University of Wisconsin Integrative Health Program	A variety of Integrative Whole Health handouts on your surroundings	<a href="https://www.fammed.wisc.edu/integrative/resources/modules/">https://www.fammed.wisc.edu/integrative/resources/modules/</a>
Dietary Approaches to Stop Hypertension	What to eat to lower blood pressure and risk of heart disease	<a href="https://www.nhlbi.nih.gov/health/health-topics/topics/dash">https://www.nhlbi.nih.gov/health/health-topics/topics/dash</a>
American Diabetes Association	Information specific to preventing and managing diabetes through nutrition and other means	<a href="http://www.diabetes.org/food-and-fitness/food/">http://www.diabetes.org/food-and-fitness/food/</a>
Dietary Guidelines for Americans	Office of Disease Prevention and Health Promotion	<a href="https://health.gov/dietaryguidelines/">https://health.gov/dietaryguidelines/</a>

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## References

1. Gerber M, Hoffman R. The Mediterranean diet: health, science and society. *Br J Nutr.* Apr 2015;113 Suppl 2:S4-10. doi:10.1017/s0007114514003912
2. Atallah R, Fillion KB, Wakil SM, et al. Long-term effects of 4 popular diets on weight loss and cardiovascular risk factors: a systematic review of randomized controlled trials. *Circ Cardiovasc Qual Outcomes.* Nov 2014;7(6):815-27. doi:10.1161/circoutcomes.113.000723