

has grown more complicated. Now I marvel at using the word “relationship.” Doesn’t that hint at a level of disordered thinking? Shouldn’t food just be a source of sustenance and pleasure?

HAPPY MEALS

Eat your way to...happiness, more energy, better sex, glowier skin. Stories about “mood foods” have been around for as long as we’ve had mood swings. Studies have found links between eating a highly processed diet and depression. Conversely, consuming fish, vegetables and fruit has been tied to a lower probability of depression. That makes intuitive sense. Fresh, natural foods are packed with vitamins and omega-3 fatty acids, which have anti-inflammatories that protect your brain. Consider, too, that about 95 per cent of your body’s serotonin, the famous feel-good neurotransmitter, is produced in your gastrointestinal tract, so it’s directly related to the stuff you’re ingesting. This makes it easier

and eating only until 80 per cent full). Other factors include daily exercise, having a spiritual practice involving a larger community, and socialising.

The last piece is especially critical to the health puzzle. Many studies show social activity is a fine bedfellow to both longevity and well-being, including a large Gallup poll that found people’s “happiness-stress ratio” rises with each hour spent in the company of others, up to six or seven hours per day, when happiness peaks. That sounds like a more pleasant route to contentment than a prescription for a plate of Brussels sprouts.

More insidiously, when you eat strictly to live longer and leaner, you can develop unhealthy eating patterns, notes Dylan MacKay, an assistant professor in the department of community health services at the University of Manitoba in Canada. “Food isn’t just fuel, and we don’t consume it just to reduce our disease risk,” he says. “I have type 1 diabetes and a PhD in hu-

ponent. “We have this illusion that if we can just eat the ‘right’ things and have our bodies weigh the ‘right’ amount, we’ll be able to stave off sickness,” says Alexis Conason, a clinical psychologist in NYC. “There’s this cultural narrative that anyone can lift themselves up by their bootstraps and obtain good health, if they just try hard enough. In reality, so much of health is outside of our control—and that’s terrifying to us.” The result of these anxieties: “Most Americans have disordered patterns of eating.”

One way out, Conason says, is for women to “regain trust in our bodies. You have to relearn what you knew as a child, because our bodies have an inherent wisdom. We’ve stifled that with a lot of ‘shoulds’ around food.” When you restrict your food, research shows you have stronger and more frequent cravings, Conason says. Let go of the food-as-prescription mindset, says MacKay, and you stop setting yourself up for failure. “When you call things



“Food isn’t just [meant] to reduce our disease risk. That makes eating joyless and stressful”

for your neurons to talk to one another, and that makes you feel good.

Yet despite all this evidence, researchers still have trouble pinning down causal links. One confounding factor is that depressed people might be drawn to junk while happier folks might find it easier to eat healthier. What’s more, gathering research is a flawed process. Most of it is self-reported, and guess what? People lie.

BEYOND THE PLATE

Also, people don’t eat in a vacuum. Consider what we know about places where populations live much longer than average—Ikaria, Greece; a region of Sardinia, Italy; Okinawa, Japan. Researchers have found these people eat a diet of fresh foods and good fats, like olive oil. But they have also identified nine crucial behaviours that contribute to longevity, and only two of them involve food (consuming lots of beans

man nutritional sciences, so I know food has a powerful effect on health—but that still doesn’t make it medicine. Seeing food that way can turn eating into something joyless and stressful.”

Which, for increasing numbers of people, it is. The incidence of orthorexia nervosa, defined by dietary restrictions and obsessions based on the healthfulness of foods, has increased at such a pace that psychologists are considering it for inclusion as a separate eating-disorder diagnosis in the next edition of the *Diagnostic And Statistical Manual Of Mental Health*. That way of eating, which often includes bringing your own food everywhere and devoting large amounts of mental real estate to what you allow to pass your lips, can hinder your social life.

ASIDE OF MORALITY

That line between “eating healthy” and orthorexia also has a moral com-

ponent. “We have this illusion that if we can just eat the ‘right’ things and have our bodies weigh the ‘right’ amount, we’ll be able to stave off sickness,” says Alexis Conason, a clinical psychologist in NYC. “There’s this cultural narrative that anyone can lift themselves up by their bootstraps and obtain good health, if they just try hard enough. In reality, so much of health is outside of our control—and that’s terrifying to us.” The result of these anxieties: “Most Americans have disordered patterns of eating.”

One way out, Conason says, is for women to “regain trust in our bodies. You have to relearn what you knew as a child, because our bodies have an inherent wisdom. We’ve stifled that with a lot of ‘shoulds’ around food.” When you restrict your food, research shows you have stronger and more frequent cravings, Conason says. Let go of the food-as-prescription mindset, says MacKay, and you stop setting yourself up for failure. “When you call things medicines, people expect a fast cure or a huge effect,” he explains.

If there’s a clear message from these nutritional clouds, it’s that there has never been one magic food plan. Hence our lurching from low-fat to high-fat, from one antioxidant to the next. Maybe, experts say, we should embrace the idea of “prescribing” a diet that’s personal: For one person it might be intermittent fasting—eating meals within a timed window, which research is finding may have benefits like brain health, longevity and weight control; someone else might be more comfortable on a Mediterranean plan teeming with olive oil and nuts. How can you determine the right choice? Go for the plan that sates you while you’re eating and then releases your mind to go elsewhere once you’re done. In essence, the plan that you consume, rather than the plan that consumes you. ■