The Potential Role of Mindful Eating
A Treatment Model for Addressing the Obesity Epidemic

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Expanding Treatment for Obesity

- Overweight and obesity is one of the major global health challenges of the 21st century.

- Critical need exists to expand treatment development efforts beyond traditional education and diet-based programs.

- Modest effect sizes, high rates of attrition, and low levels of compliance with most participants quickly regaining weight.

- Long term lack of success due, in part, to an incomplete understanding of the critical psychosocial factors that lead to disordered eating behaviors and weight gain.
• Though nutrition and diet education may be important and necessary, it rarely by itself leads to long-term behavior change.

• Media, Physicians, Corporations, Families, Peers:
  • Negative messages and teasing about eating, weight, body
    • Feelings of guilt and body dissatisfaction that can lead to depression, anxiety, hopelessness
      • Unhealthy weight control behaviors (diet pills, binge eating, purging)
Research shows that dieting is not a sustainable strategy for weight loss or for promoting a healthy lifestyle.

- Inability to target psych factors involved in eating behavior is the current ‘blind spot’ of obesity tx efforts.

- Reducing overeating tendencies is increasingly being recommended.

- Identify protective factors to help people with feeling good in their bodies and healthier balanced ways of addressing eating and weight loss.

- Mindful Eating is a way of training attention to increase nonjudgmental awareness of internal experience and automatic patterns related to eating, emotional regulation, and self-acceptance.
Mindful Eating Skills:

- Strengthening intention to eat and live in a healthful way, rather than simply endorsing a particular rigid diet.
- Goal is to get people back in touch with their ‘inner dietician’ or ‘inner wisdom’.
  - Acknowledging that there is no right or wrong way to eat and there are no right or wrong foods.
  - Balance and moderation.
  - Acknowledging responses to food (likes, dislikes, or neutral) without judgment. Accepting that eating experiences are unique.
Mindful Eating Plate

www.choosemyplate.gov

Eat, Drink & Be Mindful by Susan Albers
• Key targets include being aware of psychological processes such as the physical, cognitive, and emotional triggers to eat.

  • **Physical**: regaining the ability to recognize or respond to internal cues of hunger, taste, satiety, and fullness. **Targets Self Regulation**

  • **Cognitive**: telling ourselves what are “good” vs. “bad” foods; feelings of guilt, depression. When to eat, how to eat…. **Targets body dissatisfaction.**

  • **Emotional**: eating when sad, angry, bored (heart hunger). **Targets emotional binge eating.**
What is the MEAL program?

- Mindful Eating and Living (MEAL) - developed by UNM Integrative Medicine in 2006
- Six week program - obese adult women

Some of the key program points include:

- learning how to apply mindfulness toward food choices
- developing a greater awareness toward hunger and satiety clues from the body
- understanding how stress impacts food choices
- Each class includes mindful eating exercises to specifically apply what is learned to a direct experience of mindful eating
Pilot study of MEAL

- Data from 10 obese individuals (7 women) were collected at three time points: baseline, 6- and 12 week follow-up
  - Baseline BMI = 37 kg/m² (SD = 6.2)
  - Baseline weight = 178 pounds (SD ± 54.3; range = 115-308)
  - Mean age was 44 years (SD = 8.7)
Pilot study of MEAL

- Significant changes in preliminary data on key variables:
  - mindfulness
  - mean weight loss of 4 kg ($p < 0.01$)
  - mean BMI loss of 1.3 kg ($p < 0.01$)
  - eating behaviors: cognitive restraint ($p = 0.05$); eating disinhibition ($p = 0.02$); hunger ($p = 0.09$) (*trend)
  - binge eating ($p = 0.001$)
  - psychological distress: depression ($p = 0.05$); negative affect ($p = 0.03$); perceived stress ($p = 0.02$)
  - C-reactive protein ($p = 0.04$)
  - PAI-1 at 6 weeks ($p = 0.01$)
Current Mindful Eating Research

- Early phase clinical research study to adapt and pilot a family-based mindful eating intervention for overweight adolescents.

- First treatment effort to integrate mindfulness techniques with family-based factors for overweight adolescents.

- Integration of these components will provide a richer picture of relevancy; broadening the content of what can be addressed within weight loss interventions.

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Figure 1. Conceptual Model of a Family Systems-Based Mindful Eating Intervention

Note: Oval represents the family system as environment.
Note: Bullet points represent examples of intervention content within each phase.
Further Resources


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