

HOW TO RUN A MINDFUL EATING WORKSHOP

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Content of Workshop

- The language of mindfulness
- A review of the evidence
- Mindful eating principles
- Skills of mindful eating
 - Making Mindful Choices
 - Mindful Shopping
 - Mindful Preparation
 - Hunger / Satiety
 - Emotional Eating

MINDFUL EATING

**“When You wake up in the morning, Pooh,”
said Piglet at last, “what’s the first thing you say
To Yourself?” “What’s for breakfast?” said Pooh.**

“What do *you* say, Piglet?”

**“I say, I wonder what’s going to happen exciting
today?” said Piglet.**

Pooh nodded thoughtfully.

“It’s the same thing,” he said.

-A. A. Milne, Winnie-the-Pooh



SOME BASIC ASSUMPTIONS...

- Most (WL) Diets Don't Work Over the Long Term
- Diets Can Disrupt Normal Eating – contribute to binge eating, overeating, chaotic eating
- Dieting Ignores Internal Signals of Hunger and Satiety
- Dieting Can Cause Food and Weight Obsessions and Lead to Disordered Eating and Eating Disorders

Diets are dangerous!

- Dieting → bad breath, fatigue, headaches/cramps, constipation, insomnia, osteoporosis, depression, anxiety, eating disorders, OCD.
- Impact on heart, nervous system, etc. of yo-yo dieting.
- Diets disconnect us from our body and our life.



Disconnection...

“In our clinical practice we surveyed over 1,000 people with clinically diagnosed eating disorders. We found that people with anorexia nervosa report 90 to 100 percent of their waking time is spent thinking about food, weight and hunger; an additional amount of time is spent dreaming of food or having sleep disturbed by hunger. People with bulimia nervosa report spending about 70 to 90 percent of their total conscious time thinking about food and weight related issues. In addition, people with disordered eating may spend about 20 to 65 percent of their waking hours thinking about food. By comparison, women with normal eating habits will probably spend about 10 to 15 percent of waking time thinking about food, weight and hunger.

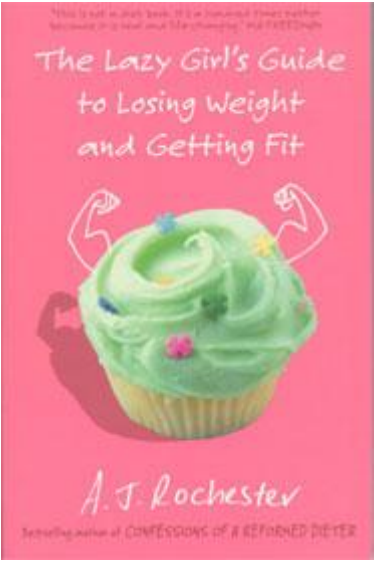
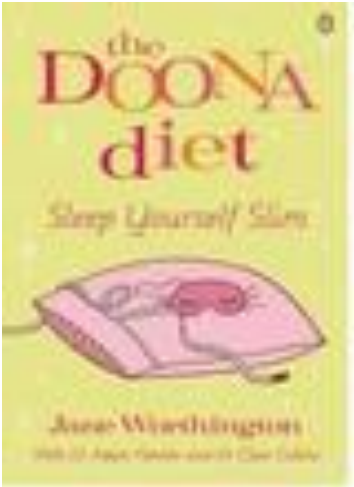
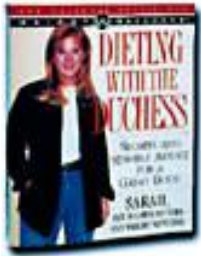
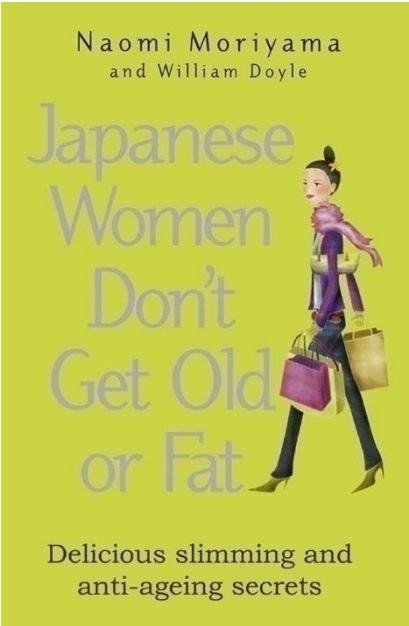
(Reiff & Lampson-Reiff, 1999)

Normal Eating

Eating and enjoying a wide variety of foods in a relaxed and flexible manner, and in a way that allows response to the body's internal signals of hunger and satiety.

Mindful Eating is a technique that helps people with disordered eating behaviour to eat 'normally'

Mindful Eating is NOT a diet!!!!!!



“Losing weight isn't a dichotomy where either you lose weight and you're successful, or you don't and you're a failure. Small losses can make a big difference.”

***--Kelly D. Brownell
Yale Center for Eating and
Weight Disorders***

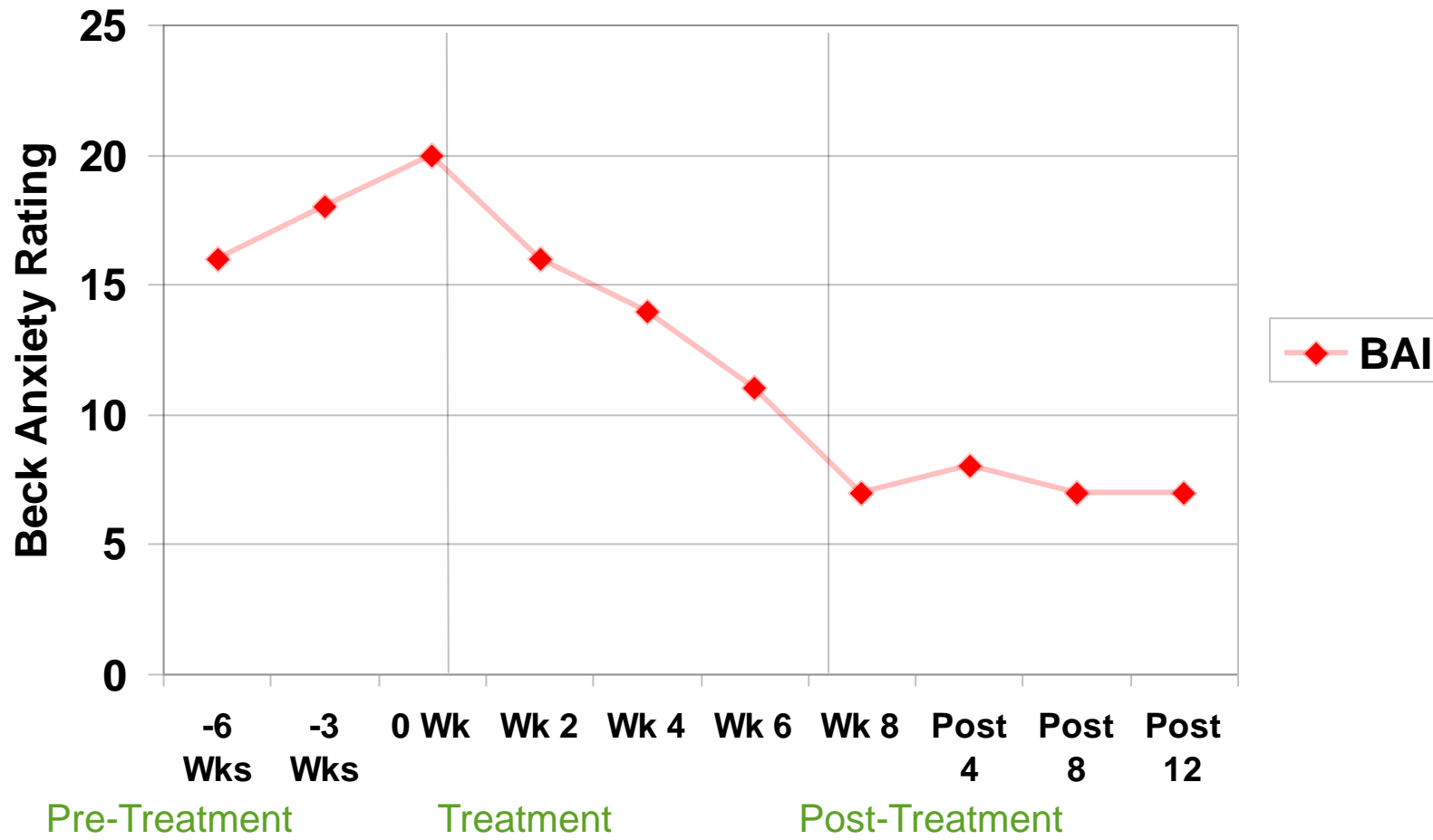


“ Mindfulness ... moment to moment non-judgmental awareness cultivated by paying attention.”

Jon Kabat-Zinn

- Introduced to Western Society in the 1970's.
- Practiced by individuals and groups in either short daily practice or intensive meditation retreats (weekend – months).
- **Jon Kabat-Zinn – *Mindfulness Based Stress Reduction (1979)***
- ***Full Catastrophe Living (1990)***
- ***U. Of Massachusetts Medical Centre***
- ***Relieve Stress, pain and chronic illness***

Mindfulness Meditation and Treatment of Anxiety Disorders



Kabat-Zinn, Massion, Kristeller et al. (1992). Am. J. Psychiatry

Mechanism of Mindful Meditation

- Focus on an object, often repetitive, and often uses the breath to train attention and disengage ruminative thinking (quietening the 'monkey mind')
- A physically awake state
- Quiet detached noting of other thoughts, experiences, sounds, feelings, etc., as they arise
- A gentle return to the original point of focus whenever attention has wandered
- Mindfulness increases awareness of, and a shift in response to, other aspects of functioning, such as pain, anxiety, relation to others, eating, etc.

A LITTLE PRACTICE....

Three Minute Breathing Space

Principles of Mindfulness

- Non-judging
- Patience
- Beginners Mind / Sense of Exploration
- Trust
- Non-Striving
- Acceptance
- Letting Go

Setting up a Mindfulness Practice

- Different Exercises / ways of practising mindfulness:
 - Breathing
 - Body Awareness / Body Scan
 - Tapes
 - Doing the dishes/chores
 - Shower/cleaning teeth
 - Walking / Exercising
 - Driving (not with eyes closed!)
 - Eating

A LITTLE PRACTICE

Mindfully Eating a Chocolate

Mindful Eating is:

- Being aware of the positive and nurturing opportunities of food preparation and consumption.
- Choosing to eat food that is both pleasing to you and nourishing to your body by using all your senses to explore, savour and taste.
- Acknowledging responses to food without judgement.
- Learning to be aware of physical hunger and satiety cues to guide decisions to start or stop eating.
- (TCME)

ME is ONE aspect of...

- MMEG (for binge eating) (Crafti)
- MBSR (Kabat-Zinn)
- MB-EAT (Kristeller)
- MBCT (Williams and Teasedale)
 - Raisin Exercise
- DBT (Linehan)
- ACT

WHERE'S THE EVIDENCE?

Kristeller, J. & Hallett, C. (1999), An exploratory study of a meditation-based intervention for binge eating disorder, *Journal of Health Psychology*, 4(3), 357-363

MB-EAT: Outline of Sessions

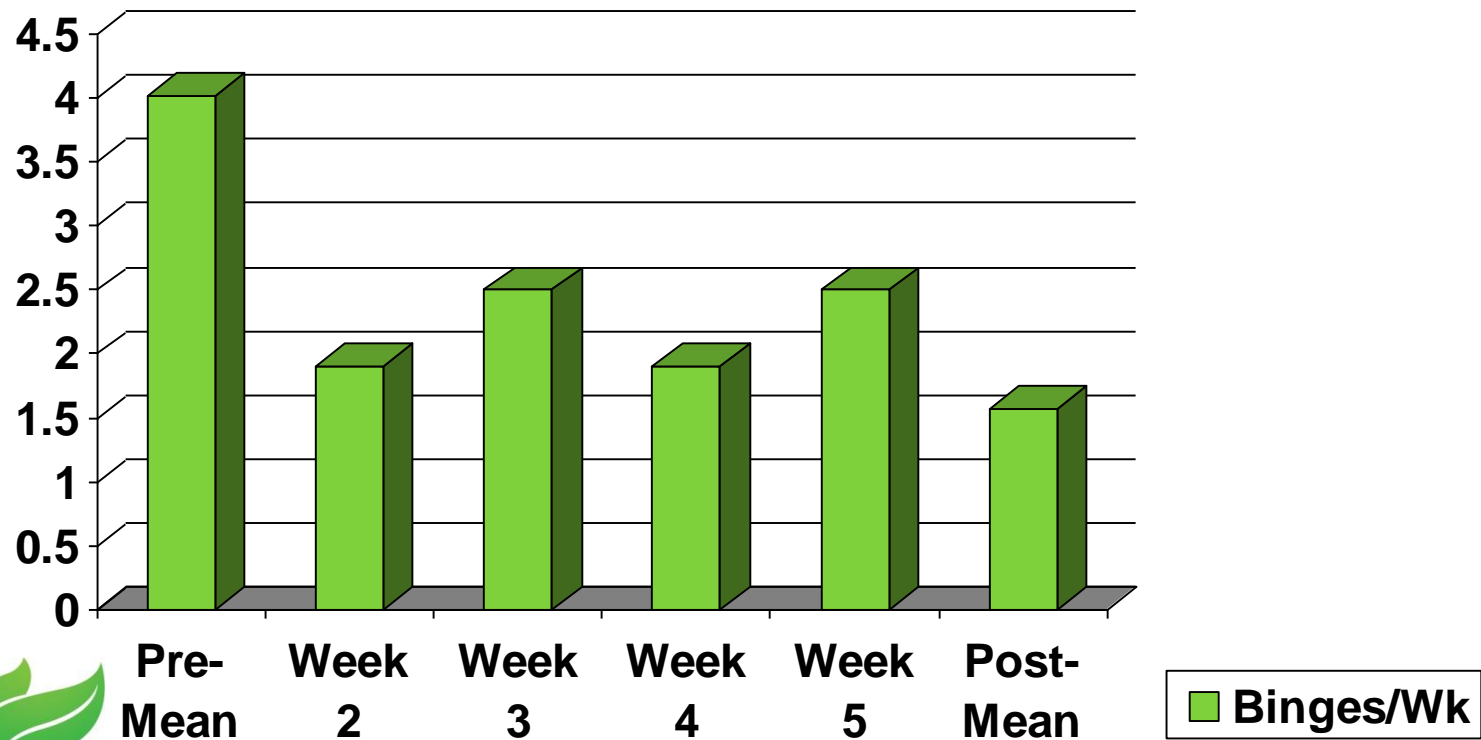
- 1) Introduction to mindfulness meditation. **Mindfully eating a raisin.**
- 2) Introduction to “mini-meditation”. **Mindfully eating cheese and crackers.**
- 3) Binge trigger meditation. **Mindfully eating sweet, high fat food.**
- 4) Hunger Signals meditation (physical vs. emotional hunger).
- 5) Taste-Specific Satiety Signals meditation. **Chips and cookies.**
- 6) Stomach Fullness Satiety meditation. **Pot luck meal.**
- 7) Forgiveness meditation.
- 8) Wisdom meditation.
- 9) Have others noticed?; where do you go from here?

Basic Elements of the Pilot Study

- **Participants:** 18 obese women who met DSM IV criteria for BED; avg. age ~ 42; avg. wt. = 242 lbs (110kg).
- **Design:** Single-group extended baseline design (3 week baseline and follow up period)
- **Intervention:** 6 week (7 session) mindfulness meditation based group treatment
- **Measures:** Binge Eating Scale, measures of depression and anxiety (BDI and BAI), behavioral measures, ratings of mindfulness, and awareness of hunger and satiety.

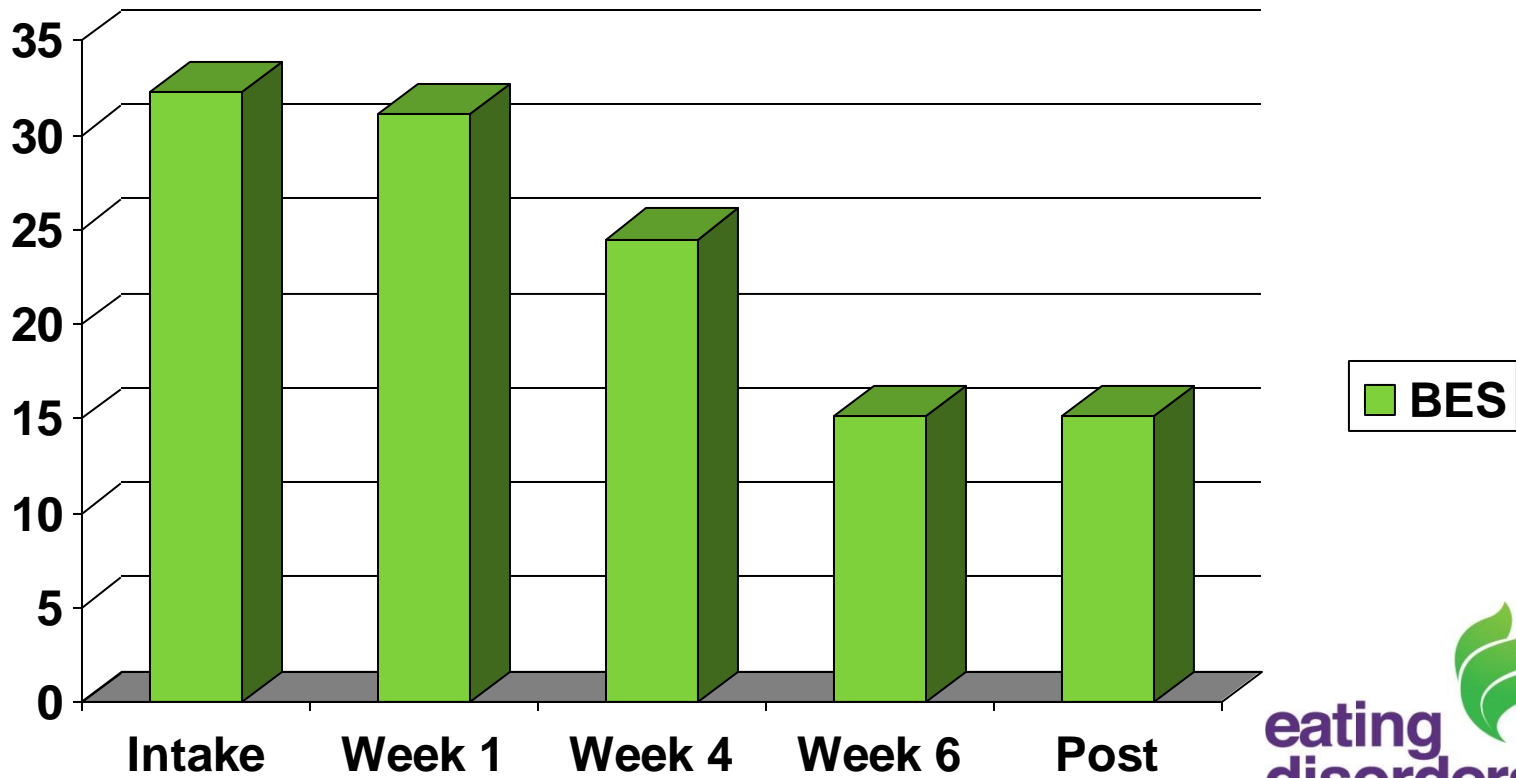
Number of Binges per Week

(n = 18, pre/post mean: t = 6.37**)



Changes in the Binge Eating Scale across Treatment

(n = 18, pre/post mean: t = 9.86**)



Summary of Pilot Study

- Binges decreased from 4/week to 1.5/week.
- Depression and anxiety decreased significantly.
- Decreases on the Binge Eating Scale correlated with using eating-related meditations ($r=.66$) but not use of general mindfulness meditation.
- Sense of control around food and enjoyment of food increased.

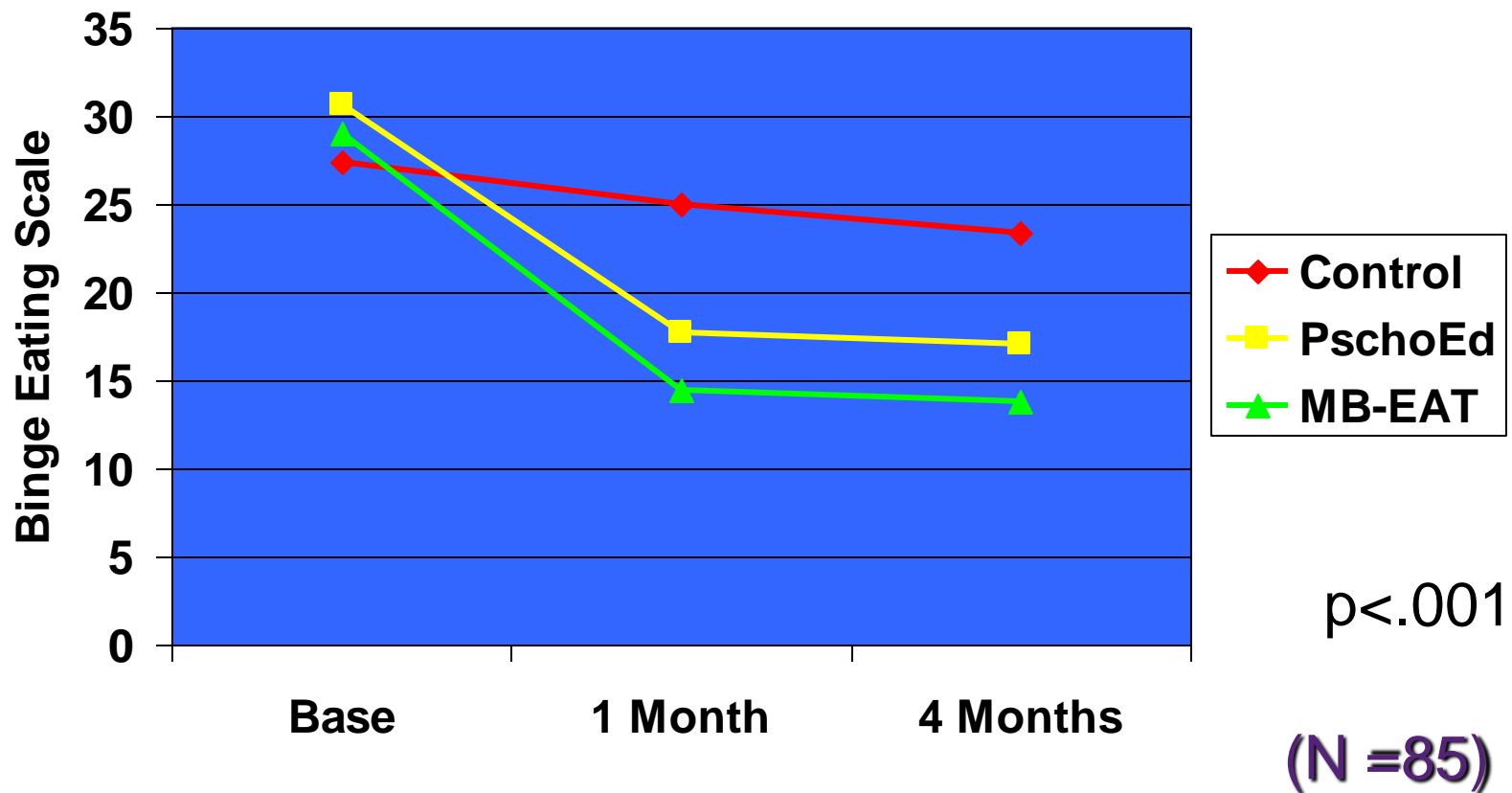
NIH Trial

- (Kristeller, Quillian-Wolver & Sheets, 2005)
- NCCAM-funded randomized clinical trial with 3 groups: **Meditation-based; Psycho-educational; Waiting List.**
- Two-site design (ISU and Duke).
- 9 week manualized intervention
- 1 and 4 month followups
- More extensive measures including process measures and change in biological markers of self-regulation (lipid and metabolic profiles)

Sample

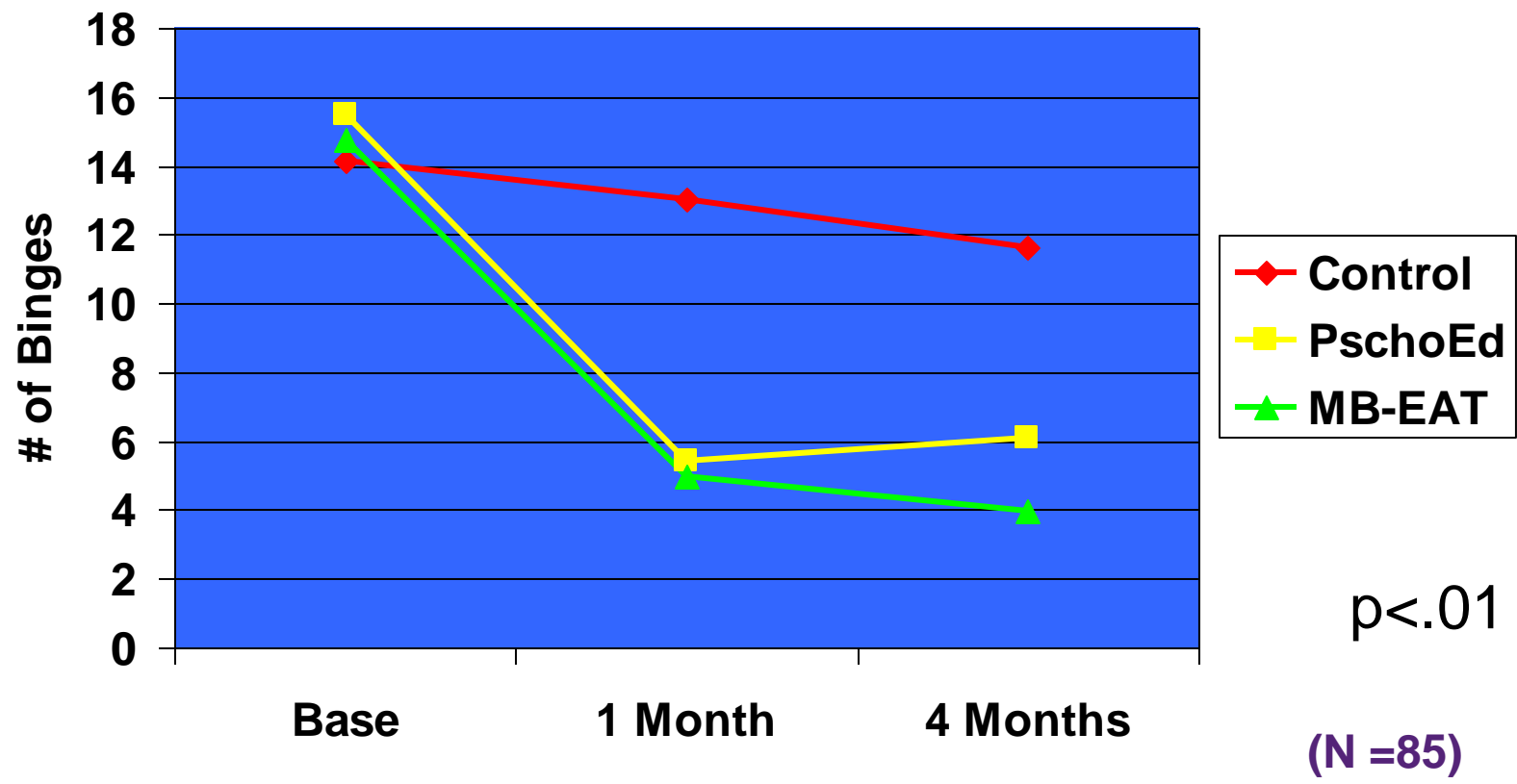
- Sample size: N = 150 evaluated on all baseline measures; 14% men.
- Approximately 14% African-American recruitment
- Average age = 47.5; Avg. Wt. = 240 lbs (110kg).; Avg. BMI = 39.

Treatment Effects on Binge Eating Scale

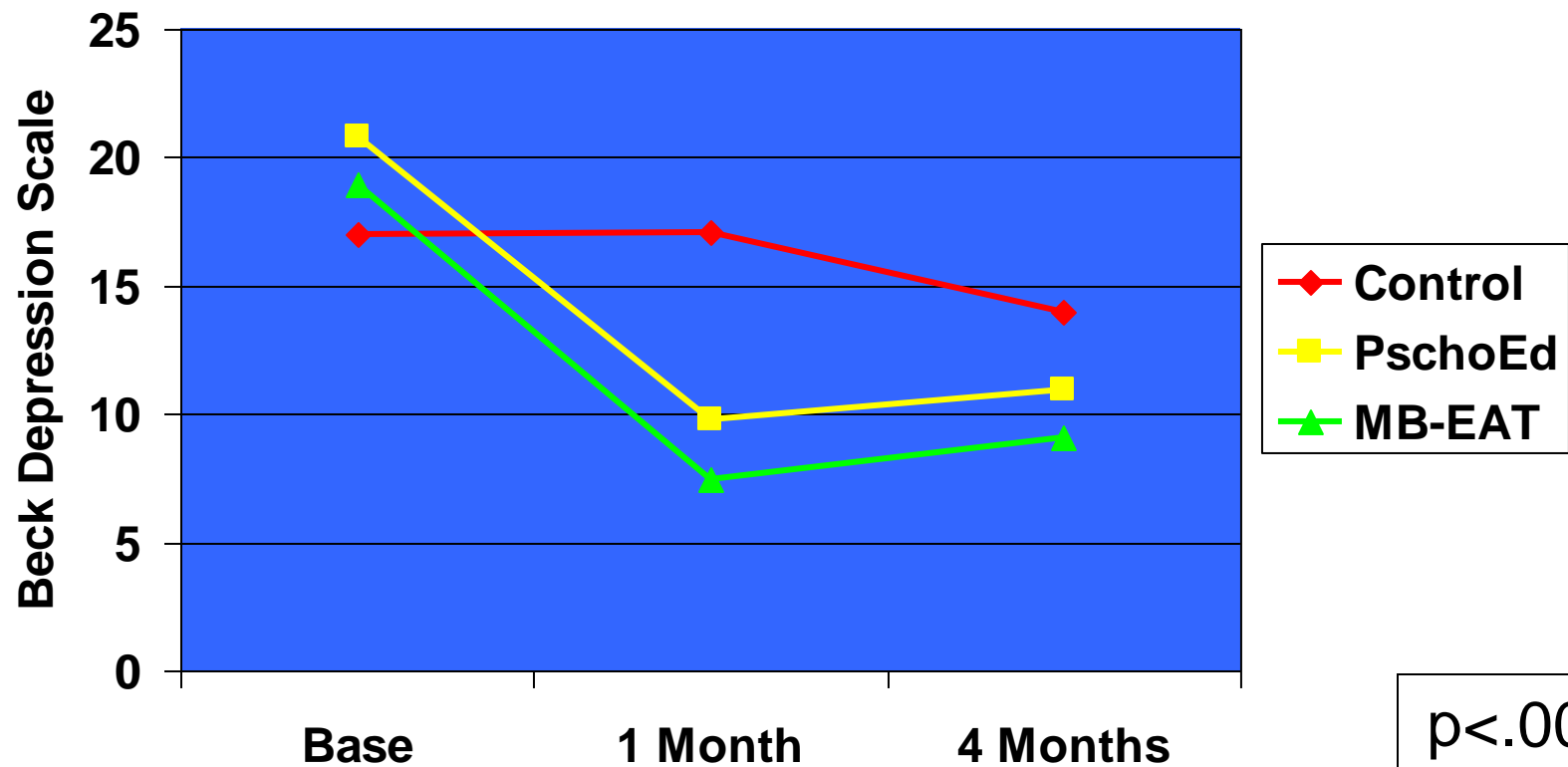




Changes in Number of Binges Previous Month

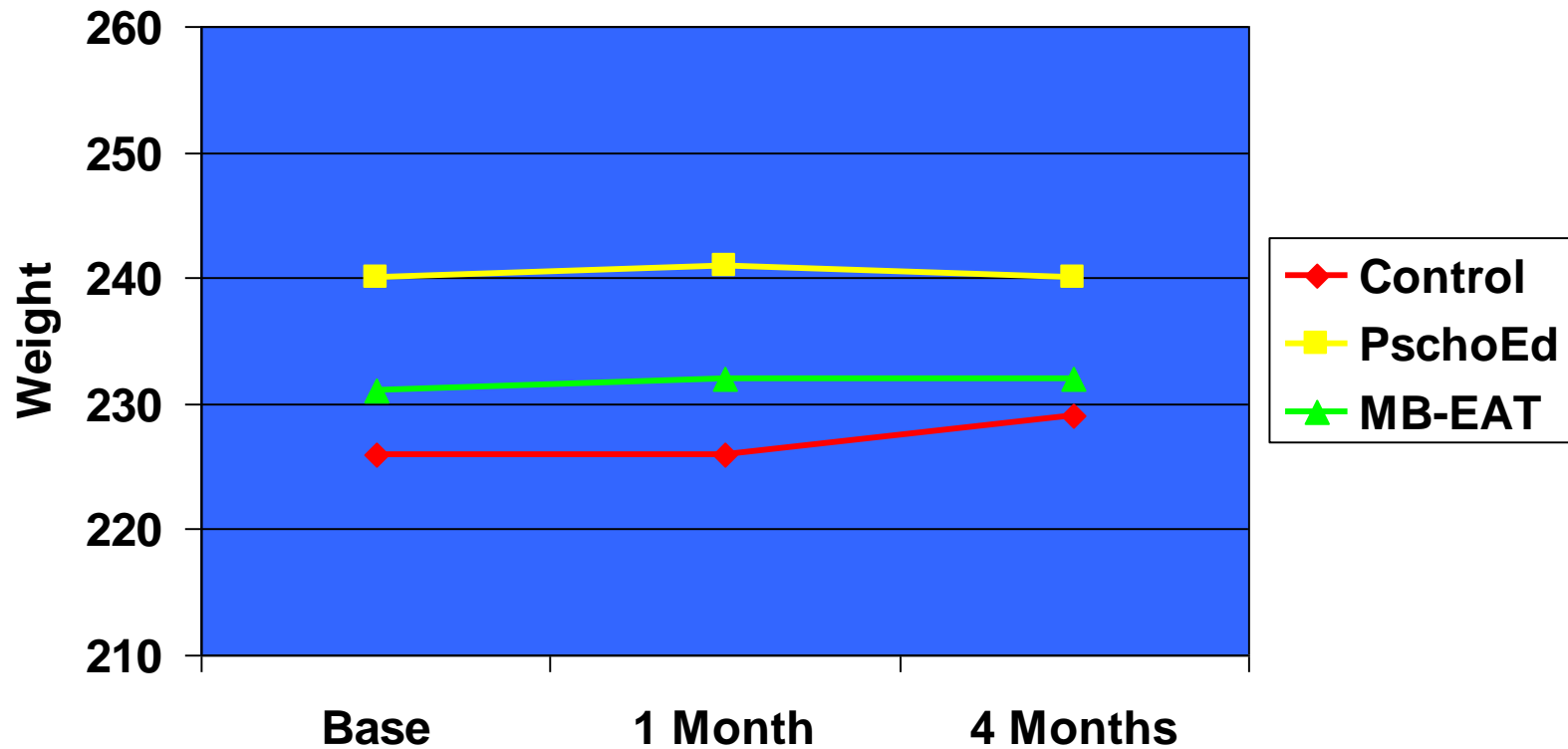


Treatment Effects on Beck Depression Scale



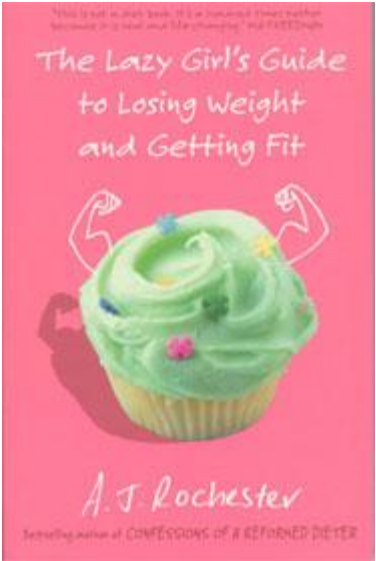
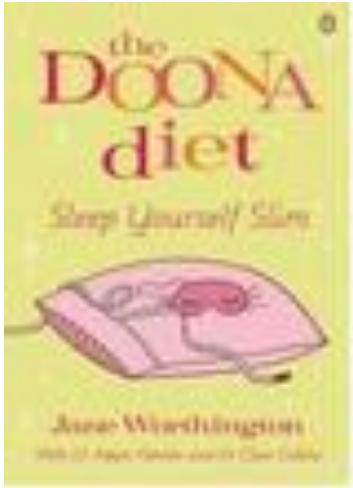
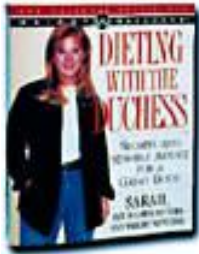
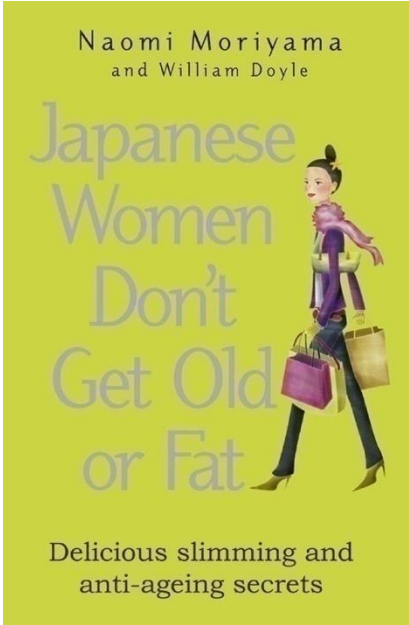
(N = 85)

Treatment Effects on Weight



(N =85)

Mindful Eating is NOT a diet!!!!!!



Relationship Between Practice and Improvement in Relation to Eating

(n = 31-34)



	Change in:			
Type of Practice	BES	Less Disinhibition	Less Hunger	Weight
General Mindfulness	-.28	-.17	-.26	-.20
Eating Meditation	-.26	-.34+	-.20	-.28
Mini-Meditations	-.51**	-.28	-.19	-.33+
Combined Index	-.52**	-.38*	-.34+	-.41*

Change in # of Days Binging and Change in HbA1Cs and Fasting Lev (n = 43-50)

	Change in:			
	HBA1C	Fasting Glucose	Fasting Insulin	Fasting Insulin Sensitivity
Change in # of Binge Days	.33*	.28**	.36**	.35**
Change in Weight (M=.07 lbs.; range: -15 to +45)	.05	.10	.22	.20
Change in # of Binge Days, Controlling for Wt.	.31*	.27*	.31*	.34*

Conclusion

“ The women found it surprising and paradoxical that giving up a degree of conscious control over their eating led to increased control.

It seems likely that meditation contributed to becoming detached and non-critical toward the self, an aspect of Mindfulness that appears important to the success of the intervention”

Linda Bacon's Study (2005)

- HAES treatment vs. traditional dieting treatment
- HAES group maintained weight over 2 years.
- Diet group lost 5.2% after 24 week program, regained after 2 years.
- HAES initially increased total cholesterol, then sig. reduction in both HDL and LDL.
- Diet group, no significant change in cholesterol.

Contd.

- Both groups lowered systolic blood pressure in year 1, by end of study only HAES group sustained improvement.
- HAES group increased physical activity by nearly 400%. Diet group initially increased but fell back to initial levels by 2year follow up.
- HAES group improved self esteem and levels of depression, diet group decreased self-esteem, depression levels returned to baseline.
- Drop out rates: HAES 8%, Diet group 42%.

Conclusion

- Although the HAES group did not lose weight on a statistically significant level, they did significantly improve their overall health, as measured by cholesterol levels, blood pressure, physical activity and self-esteem.

What is your favourite meal?

Turn to the
person next
to you:

What is
your
favourite
meal?

Why?

What
makes it so



Mindful Eating includes:

- Mindful shopping
- Mindful food preparation
- Mindful presentation of food
- Eating
- Enjoying a sense of fullness and energy
- Not thinking about food/eating!

SKILLS

Making Mindful Choices

- **Stop**

- **Breathe**

- **Reflect**
 - ✓ “Am I hungry?”
 - ✓ “Why this food?”
 - ✓ “Is this what I really need?”

- **Choose**

HOW DO YOU ADAPT THE WORKSHOP FOR RESTRICTIVE EATERS?

Discover Satisfaction



- Ask Yourself What You Really Want to Eat.
- Savor Your Food
- Eat When Gently Hungry Rather than Over Hungry
- Eat in a Pleasant Environment
- Check in and Stop When You're Satisfied

Mindful Shopping

- Don't shop hungry
- Have plenty of time
- Make a list, **but be flexible**
- Impulse buys – check in
 - Compassionately acknowledge cravings
 - Be alert to marketing strategies
 - www.foodpsychology.cornell.edu
- **Try new foods, don't 'habit' shop.**
- Buy more real or whole foods
 - Be mindful of processing and packaging
 - Buy local produce

Mindful Eating - portions

- Mindful Portions
 - Be mindful of bowl size
 - Arrangement of food
 - Bento boxes
 - distribute food in little baggies
 - Regularly check your level of satiety **HOW?**
 - Always leave some food in the kitchen!

Types of Hunger

- Taste Hunger – want to try new or favourite foods
- Practical Hunger – ‘It’s lunchtime’
 - Need to plan ahead
- Emotional hunger - **Have you ever done this?**
 - **How can you tell the difference between emotional hunger and biological hunger?**

Signs of hunger

- Mild gurgling or gnawing in the stomach
- Growling noises
- Light Headedness
- Difficulty Concentrating
- Uncomfortable stomach pain
- Irritability
- Feeling faint
- Headache
- Persistent thoughts about food

Any others?

How do you know when you're full?

- Pause in the middle of a meal or snack for a 'time-out'.
 - Do a taste check
 - Do a satiety check
- Use a rating scale until you get more Mindful.
- Increase awareness
 - Eat Without Distraction
 - Have a 'stopping' ritual [Any Examples?](#)
 - Practice saying 'no thankyou'

[Any other ideas?](#)

Emotional Hunger

is...



- ❑ Sudden. One minute you're not even thinking about food, the next minute you're starving. Your hunger goes from 0-8 within moments.
- ❑ Your cravings are for one certain type of food, such as pizza, ice cream, or chocolate. With emotional eating, you feel that you need to eat that particular food and that no substitute will do!

Emotional Hunger is...

- "above the neck." An emotionally based craving begins in the mouth and the mind. Your mouth wants to taste the pizza, chocolate, or ice cream.
- Urgent. Emotional hunger urges you to eat NOW! There is a desire to instantly ease emotional discomfort with food.

Emotional Hunger is...

- Paired with an upsetting emotion. Your husband yelled at you. Your child is in trouble at school. Emotional hunger occurs in conjunction with an upsetting or distressing situation.
- Often connected to automatic or absent-minded eating. You may not notice that you've just eaten a whole bag of chocolate almonds.

Emotional Hunger...

- Does not stop in response to fullness.
- Feels guilty about eating. The paradox of emotional overeating is that you eat to feel better, and then end up angry or distressed with yourself. Next, you promise to atone ("I'll exercise, skip a meal, etc.)

Physical Hunger is...

- gradual. Your stomach rumbles. One hour later, it growls. Physical hunger gives you steadily progressive clues that it's time to eat.
- open to different foods. With physical hunger, you may have food preferences, but they are flexible. You are open to alternate choices.

Physical Hunger is...

- based in the stomach. Physical hunger is recognizable by stomach sensations such as gnawing, rumbling, emptiness, and even pain in your stomach.
- patient. Physical hunger would prefer that you ate soon, but doesn't demand that you eat immediately unless you have allowed yourself to become over hungry.

Emotional Eating Triggers

- Boredom and Procrastination
- Bribery and Reward
- Excitement
- Depression
- Frustration, Anger, Stress
- Fatigue

NEED TO FIND BETTER ALTERNATIVES FOR
DEALING WITH THESE EMOTIONS

Coping With Emotional Eating

- Ask Yourself:
 - ✓ Am I physically hungry?
 - ✓ What emotion am I feeling?
 - ✓ What do I need to respond to this emotion?
 - ✓ How can I meet this need?
- ❖ Research indicates that individuals who respond to a negative situation with both positive thoughts and constructive action are able to avoid emotion-based eating 85% of the time.

CASE STUDY

- Barbara, 56 years old, Greek born.
- Home duties
- High Blood Pressure, High Cholesterol, impaired Glucose Tolerance, Binge Eating behaviour.
- BMI = 40+
- History of multiple diets (>6 per year)
- Skipped meals
- Binge > 4 times / week
- Husband , 2 married children and grandchildren
- **WHAT WOULD YOU DO?**

“Enjoy life to the fullest. Remember all of those women on the Titanic who waved off the desert cart.”

- Irma Bombeck -

