# MINDFULNESS

#### FOR DIETITIANS

WHERE SCIENCE AND SPIRITUALITY
MEET





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#### DISCLOSURES:

Teacher with the Open Heart Project
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#### THE CENTER FOR MINDFUL EATING

TCME is a non-profit international organization





Our mission is to provide quality mindful eating resources for professional development and public education

TCME offers professional development webinars, a quarterly newsletter, educational handouts, guided meditations, and networking opportunities

Learn about membership at https://www.thecenterformindfuleating.org/membership-sign-up



#### LEARNING OBJECTIVES

After completing this continuing education course, nutrition professionals should be able to:

- 1. Provide a simple definition of meditation, including what it is and what it isn't.
- 2. Describe the personal benefits of a meditation practice.
- 3. Describe the professional benefits of a meditation practice for dietitians.
- 4. Describe the benefits of meditation to nutrition therapy clients.

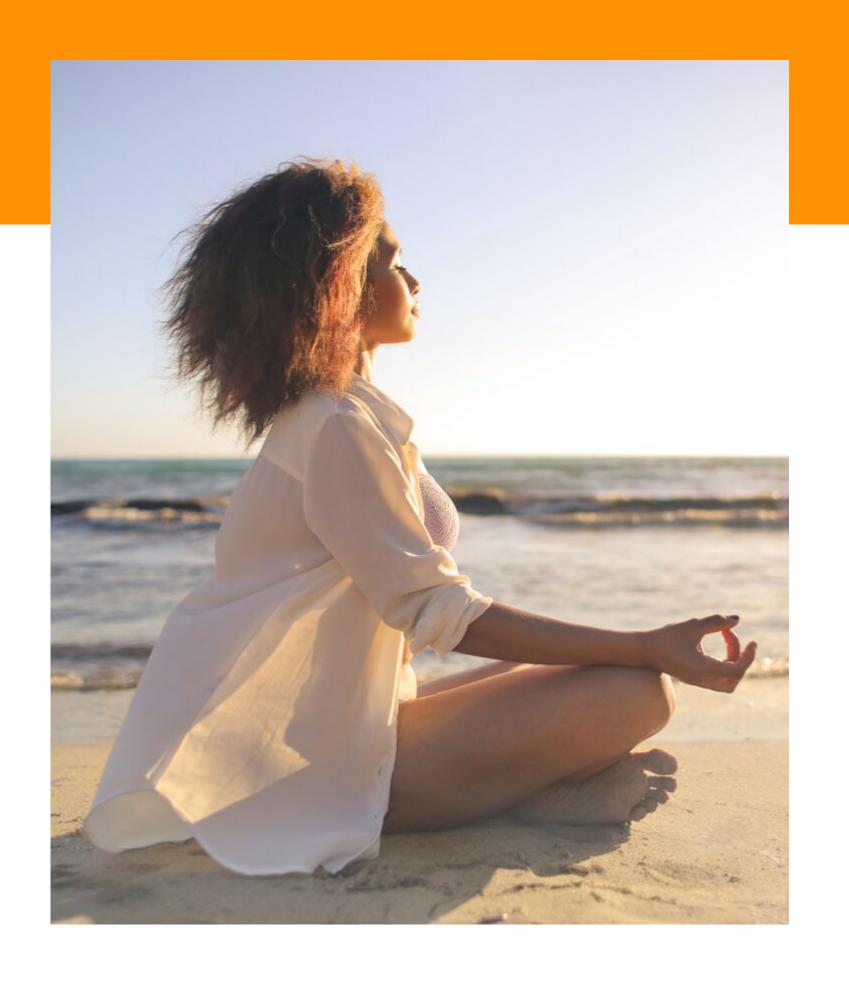


#### OUR PLAN

- What meditation is and isn't
- The science of meditation
- Why is meditation important for RDs?\*
  - -- Personally
  - -- Professionally
  - -- For our clients
- Practice together
- Q&A

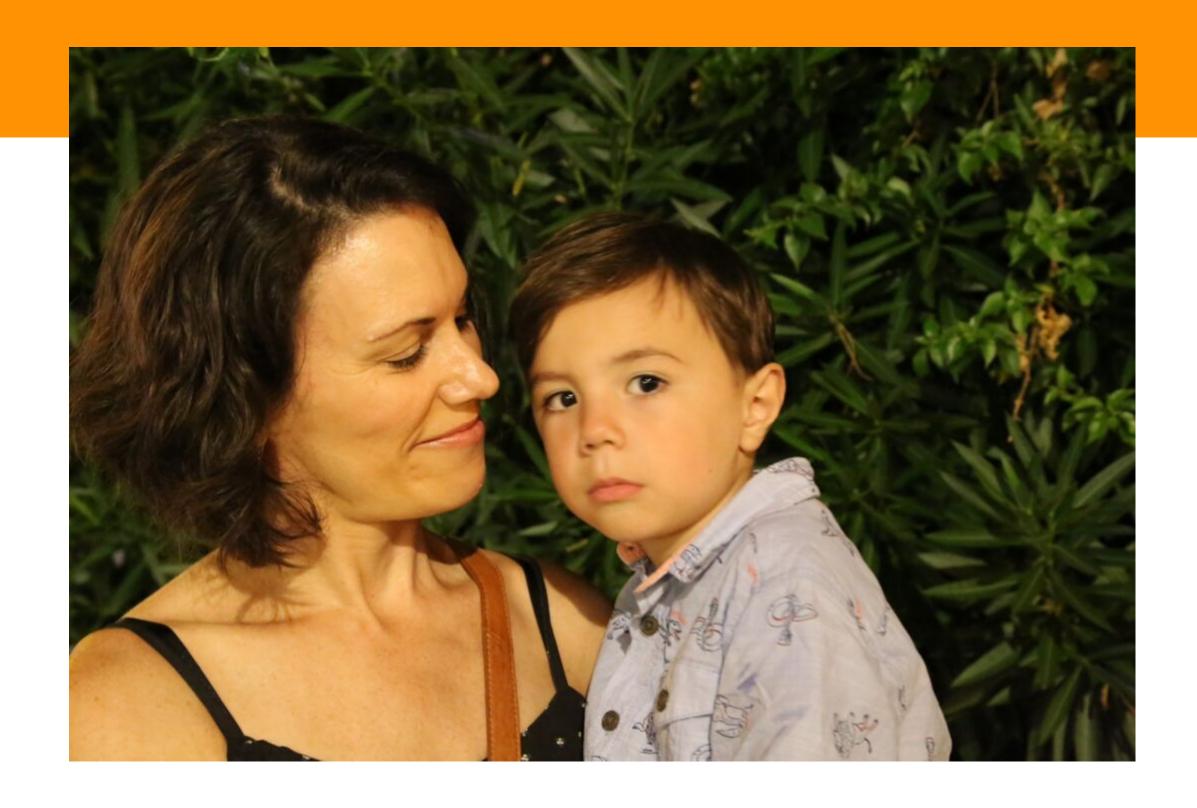
\*don't take my word for it; try this out in your own life





## WHO AM 1?

- Personally
- Professionally
- Working with clients





#### WHY MEDITATION FOR DIETITIANS?

- Mindfulness is having its moment
- Mixed with the western culture of science
- Benefits the meditator and her surroundings (when done responsibly)
- Dietitians wish to be of benefit (and want to do things right)
- Foundation for mindful eating



#### DEFINITION #1

"Meditation is not a matter of trying to achieve ecstacy, spiritual bliss, or tranquility, nor is it attempting to be a better person. It is simply the creation of a space in which we are able to expose and undo our neurotic games, our self-deceptions, our hidden fears and hopes."



~Chogyam Trungpa

### DEFINITION #2

#### Merriam-Webster:

To engage in mental exercise (as concentration on one's breathing or repetition of a mantra) for the purpose of reaching a heightened level of spiritual awareness.





#### DEFINITION #3

"Substituting for our discursive mind another object of attention."

~My meditation teacher, Susan Piver



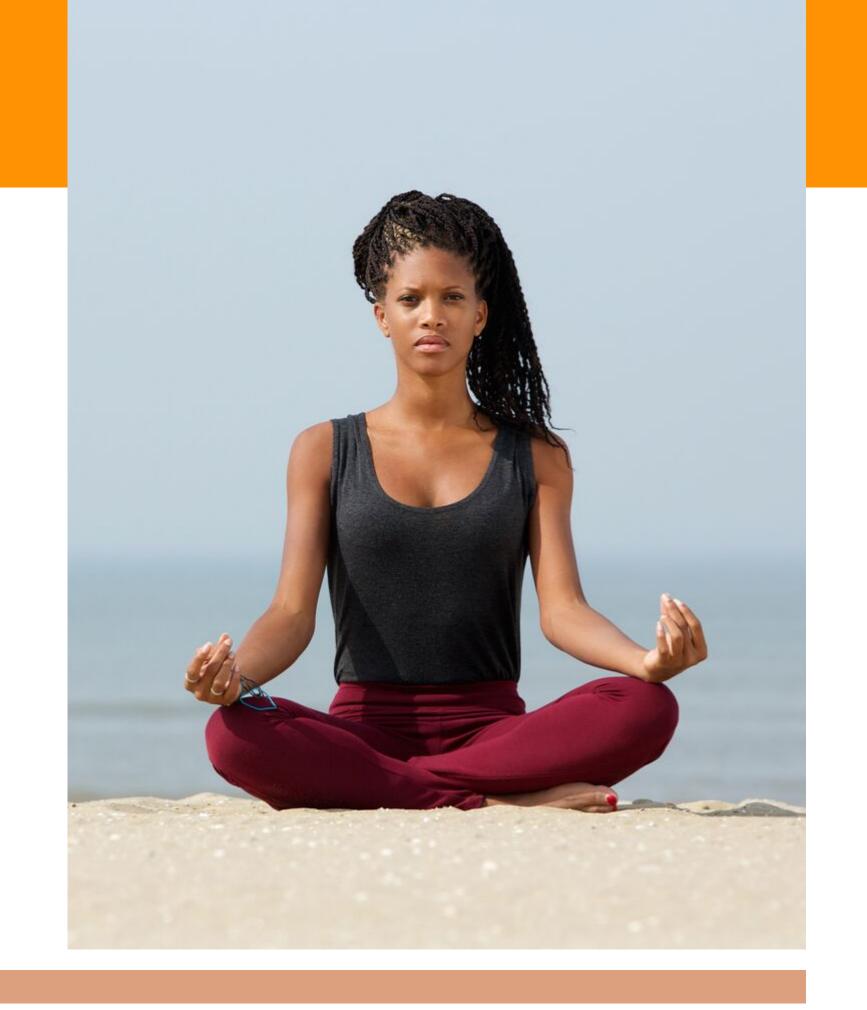
#### TYPES OF MEDITATION

- Focused attention
  - **Shamatha,** Zen, Loving-kindness, Chakra, Kundalini, Sound, Mantra, Pranayama, Qigong, Tonglen/compassion
- Open monitoring
  - Mindfulness meditation, Vipassana, Taoist
- Effortless presence
  - Self-enquiry, Dzogchen, Mahamudra, Taoist, Raja
- Check out: http://liveanddare.com/types-of-meditation



#### WHAT MEDITATION IS

- Synchronizing mind and body
  - Meditation vs. meditative activities
- Meditation = Mindfulness + Awareness
  - Mindfulness technique
  - Awareness insight
- A way to relax
   (but not in the way you think!)





#### WHAT MEDITATION ISN'T

- Religious
- Self-help
- Doing nothing
- A way to stop thinking/space out/calm down



## PERSONAL BENEFITS OF MEDITATION



# THREE MARKS OF EXISTENCE VS. THE MIND'S SURVIVAL STRATEGIES

- Impermanence
  - -- The only constant is change

- Suffering
  - -- First and second dart

- No self (egolessness)
  - -- Not so solid, not so separate

- The desire to make constant that which is always changing
- The preference for comfort and safety over pain and discomfort
- The tendency to 'put things in boxes' to understand them

(Hanson R. Buddha's Brain: The Practical Neuroscience of Happiness, Love, and Wisdom. New Harbinger Publications, 2009)



#### MEDITATION: SCIENCE MEETS SPIRITUALITY

- "When neurons fire together, they wire together"
   ~psychologist Donald Hebb on how mental activity creates new neural structures
- Neuroplasticity: "The mind is what the brain does"
- Path to wakefulness = training the mind





#### WHAT HAPPENS IN THE BRAIN

#### • Structure:

- Increased gray matter in anterior cingulate cortex, prefrontal cortex, and hippocampus
- Decreased brain cell volume in amygdala
- Weakened connections between amygdala and prefrontal cortex

#### • Function:

- Frontal lobe goes "offline"
- Parietal lobe processing slows down
- Thalamus slows down sensory inputs
- Reticular formation decreases arousal

(Martino, Collective Evolution website, 2014)



#### WHAT HAPPENS IN THE BODY

- Lower cortisol levels
- Improved homeostatic regulation of the ANS
- Decreased symptoms associated with
  - Depression
  - Anxiety disorders
  - Pain
  - Insomnia
- Increased focus and concentration



(Jacobs et al., *Health Psychol*, 2013; Khoury et al., *J Psychosom Res.*, 2017; Strauss et al., *PLoS ONE*, 2014; Zeidan et al., *Neurosei Lett*, 2012; Ong et al., *Sleep*, 2014; Black et al., *JAMA Intern Med*, 2015; Blase et al. *Appl Psychophysiol Biofeed*., 2019)



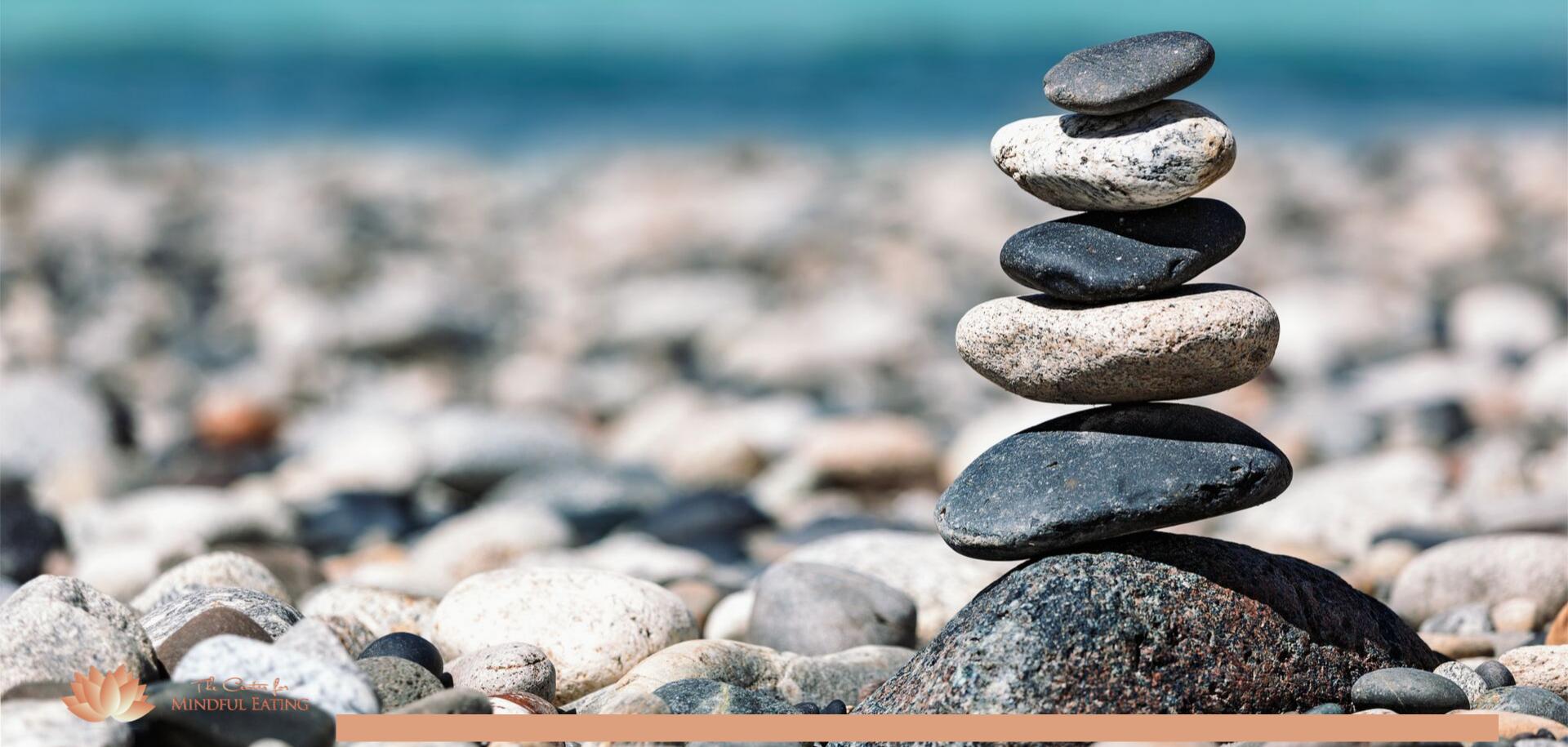
#### MEDITATION AND RESILIENCE

- Evidence for immediate and sustained effects on resilience found in short-term meditators
- Mediated partially by changes in the left rostral anterior cingulate cortex-dorsomedial prefrontal cortex functional connectivity; this was also predictive of long-term effects
- At 3-month mark resilience was significantly maintained, meaning the changes occurred and were maintained in the resting brain



(Kwak S et al. *Front Hum Neurosci.* 2019;13:101)

## PROFESSIONAL BENEFITS OF MEDITATION



#### MEDITATION IN THE HEALTHCARE SETTING

- Mindfulness training for healthcare professionals and trainees: A meta-analysis of randomized controlled trials.
  - Objective: to quantify the effectiveness of MBIs on distress, well-being, physical health, and performance in HCPs and HCPs-in-training
  - Studies also evaluating patients of clinicians found benefits to patients personally and to the patient-clinician relationship
- Results from included 38 studies (n=2505, 75.88% female)
  - Significant moderate effect on anxiety, depression, psychological distress, and stress
  - Small to moderate effects for burnout and well-being at post-intervention
  - Effects not significant for physical health and performance
  - Larger intervention effects on overall outcomes found with HCPs with Mindfulness-based Stress Reduction intervention, and inactive controls

(Spinelli C et al. J Psychosom Res. 2019 May;120:29-38.)



#### MEDITATION AND HCP WELLBEING

- Overall, studies have found a benefit of mindfulness-based and meditation interventions on HCP wellbeing
- Specifically improvements in measures of stress, psychological distress, anxiety, and depression
- Self-compassion was also noted and included in these measures (note: this could be its own presentation)
- No significant benefits to HCP physical health and performance found in this analysis (note conservative aspects of this analysis)
- Notable: electronic delivery associated with greatest effects, MBSR had greatest effects on stress

(Khoury et al. **J Psychosom Res.** 2015;78(6):519–528; Dharmawardene et al. **BMJ** 2016;6(2):160–169; McConville et al. **Explore (NY).** 2017;13(1):26–45.)



#### MEDITATION AND COMPASSION

- Perhaps the best-known aspect of meditation practice
- Compassion vs. empathy
- Mechanism as yet unknown may be related to development of enhanced empathy but evidence suggests additional mechanism(s)

(Condon et al. *Psychol Sci.* 2013;24:2125-7; Lim et al. *PLoS One.* 2015;10:e0118221; Lamothe et al. *Complement Ther Med.* 2016;24:19-28; Sanchez-Reilly et al. *J Support Oncol.* 2013;11:75-81.)



#### MEDITATION AND BURNOUT

- Some overlap between definitions of stress, wellbeing, and burnout
- Different types of programs seem to produce different effects, ie, "other" mindfulness-based interventions produced the largest effects on burnout
- Lim et al. suggest that mechanism by which meditation enhances compassion also decreases the tendency for burnout

(West et al. *Lancet*. 2016;388:2272-81; Goodman et al. *Int J Psychiatry Med.* 2012;43:119-28; Goldhagen et al. *Adv Med Educ Pract.* 2015;6:525-32; Lim et al. *PLoS ONE* 2015;10(2):e0118221.)



#### MEDITATION AND MINDFULNESS

- Small to moderate increases in mindfulness that persisted to follow-up, which is aligned with previous reviews and meta-analyses.
- Largest intervention effects for mindfulness were found with HCPs and through MBSR
- Note: fewer than half the studies (47%) included the Spinelli meta-analysis included a validated measure for mindfulness.

(Khoury et al. *J Psychosom Res*. 2015;78(6):519–528; McConville et al. *Explore (NY)*. 2017;13(1):26–45.)



### MEDITATION AND QUALITY OF HEALTHCARE

- Patient visits with self-reported high-mindfulness clinicians were more likely to feature patientcentered pattern of communication
- More rapport building and discussion of psychosocial issues, though not biomedical issues
- Higher ratings from patients with high-mindfulness clinicians

(Beach et al. *Ann Fam Med*. 2013;11:421-8.)



#### FOUR IMMEASURABLES

- Loving-kindness -- wish for your happiness & recognizing no separation between you and me
- Compassion -- feeling your pain in my own heart
- Sympathetic joy -- feeling your happiness in my own heart
- Equanimity -- "the mind of no preference"



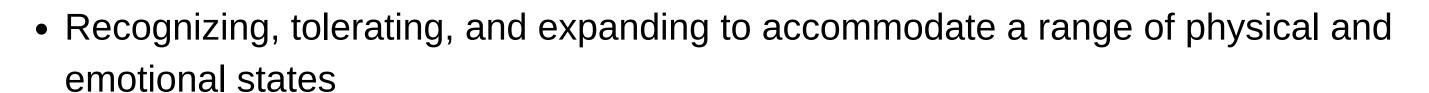


## MEDITATION BENEFITS TO OUR PATIENTS



# MEDITATION AND WEIGHT-INCLUSIVE APPROACHES TO EATING

- Synchronizing body and mind
- Revealing the true nature of our minds and bodies
- Development of non-judgmental curiosity and self-compassion







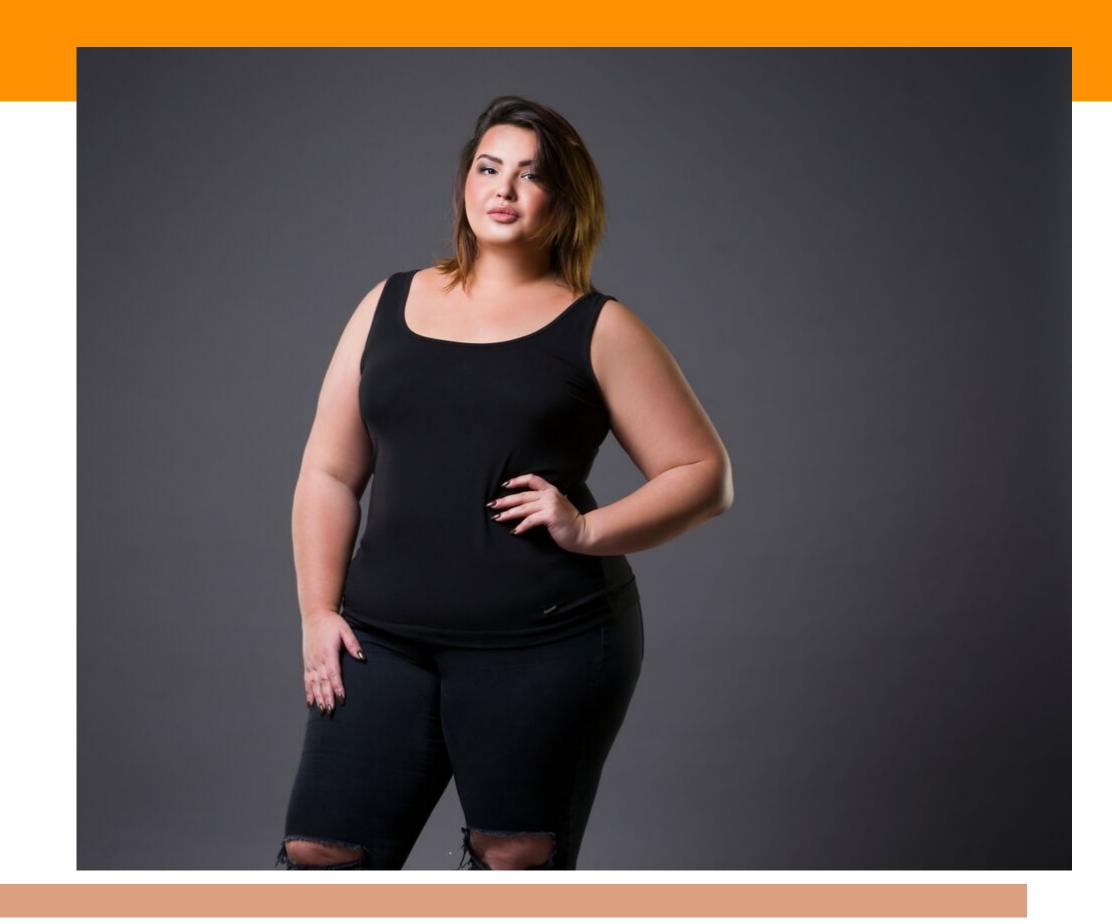
#### A WORD OF CAUTION

- Meditation is not a panacea
- Meditation does not replace medication
- Meditation may not be for everyone importance of trauma sensitivity



## COMMON BARRIERS TO MEDITATING

- Not knowing where to begin
- Misconceptions about meditation
- No time (duh!)
- Perfectionism
- Lack of support





#### IF YOU WOULD LIKE TO

#### Practice

- Find a technique that is at least 2500 years old
- Find a trained MI
- Pair with study

#### Teach

- Learn how
- Have your own consistent personal practice



## BREATH AWARENESS MEDITATION

- Shamatha = the practice of tranquility
- Simplicity, precision, gentleness
- 3 aspects of mindfulness
  - Body
  - Breath
  - Mind





## LET'S TRY IT





# SUGGESTED SCIENTIFIC AND CLINICAL RESOURCES

- Brown University's Meditation Safety Toolbox. https://www.brown.edu/research/labs/britton/resources/meditation-safety-toolbox
- David Treleaven Trauma-sensitive mindfulness.
   https://davidtreleaven.com/
- American Mindfulness Research Association website.
   www.goAMRA.org



#### ADDITIONAL RESOURCES TO EXPLORE

- Chodron P. Start Where You Are: A Guide to Compassionate Living. Boulder, CO: Shambhala; 2001.
- Hanson E, Mendius R. Buddha's Brain: The Practical Neuroscience of Happiness, Love, and Wisdom. 1st ed. Oakland, CA: New Harbinger Publications; 2009.
- Piver, S. Start Here Now: An Open-Hearted Guide to the Path and Practice of Meditation. 1st ed. Boulder, CO: Shambhala; 2015
- Insight. Insight Timer website. https://insighttimer.com
- Open Heart Project.
   http://susanpiver.com/open-heart-project



#### CONCLUSIONS

- Buddhist philosophy and scientific evidence support meditation benefits to the dietitian as individual and professional and to her clients/patients
- Important to do your own work to root out misconceptions about meditation and mindfulness
- If you are interested in sharing the benefits of meditation with your patients/clients, cultivate your own practice and learn how to share it responsibly



#### AFTER COMPLETING THIS WEBINAR

You will receive an email within 24 hours of this program that contains links to the following:

- The recording of the program
- A PDF of the slide show
- An evaluation survey
- Information about how to obtain your Continuing Education Certificate.

This program offers 1 CE for Dietitians. The Center for Mindful Eating is a Continuing Professional Education (CPE) Accredited provider with the Commission on Dietetic Registration (CDR). CDR Credentialed Practitioners will receive 1 Continuing Professional Education units (CPEUs) for completion of this program.



### QUESTIONS?

### Thank you!

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