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The prevalence of "Mindful Eating" in adults in Cyprus and its relation to **Body Mass Index**

E. Andreou¹, C. Philippou¹ and P. Korfiati¹ ¹Department of Life and Health Science and Engineering, University of Nicosia, Cyprus

A growing body of scientific research supports the principles and practices of The Mindfulness Diet as a successful approach to establishing a healthy relationship to food and eating based on mindful eating, mind/body integration, stress management, and mindful awareness of body, mind, emotions, and behavior (1,2).

Mindful eating is endorsed as means to avoid possibly maladaptive dietary restrictions while maintaining a healthy weight⁽³⁾. Although hypothetically related, no studies have examined the correlations between mindful eating, and weight control in the same sample (4,5). This study sought to examine these structures and their correlations with body mass index (BMI), eating-disordered behaviors, and meal consumption in an adult Cypriot sample.

The aim of this research was to investigate the prevalence of "Mindful Eating" among Cypriot adults and to correlate it with the Body Mass Index. Participants (N = 265) completed an online validated CyMindful Eating Questionnaire (CyMEQ). The CyMEQ was made up of different parts (demographics, anthropometrics, dietary history, nutritional habits, and MEQ with scoring⁽⁶⁾). The final scale consisted of 28 items and five subscales: disinhibition, organoleptic awareness, external cues, emotional response, and distraction. The study was granted ethics approval by the Cyprus Bioethics Committee. Mindful eating (ME) and dietary restrictions were not correlated. Multiple regression analyses indicated that restricted and mindful eating reported significant variance in disordered eating and BMI. The elevated restriction was associated with increased BMI and disordered eating; elevated mindful eating was associated with decreased BMI or normal and disordered eating.

Analyses suggested that specific mindful eating subscales accounted for unique variance in the relationship between mindful eating and disordered eating. ME was the only structure that was significantly associated with meal consumption. The MEO was online and adults from all over Cyprus participated, with an overall response of (n = 265). Participants were mostly women (78.4%) and male (21.6%), and had a mean age of 38.2+/-0.42 years (range 19 to 65 years). Exploratory factor analysis was used to identify factors, which were defined as the mean of items scored one to four, where four indicated higher mindfulness; the mean of all factors was the summary MEO score. Multiple regression analysis was used to measure associations of demographic characteristics, obesity, and physical activity with MEO scores. Domains of the final 28-item questionnaire were: disinhibition, awareness, external cues, emotional response, and distraction. The mean MEO score was 2.92+/-0.37, with a reliability (Chronbach's alpha) of .64. The covariate adjusted MEO score was inversely associated with body mass index (3.02 for body mass index <25 vs 2.54 for body mass index >30, P < 0.001).

Mindful Eating and dietary restriction appear to be only weakly correlated, and each is differentially associated with meal consumption. High mindful eating scoring appears to relate to normal BMI.

References

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