Providing monthly research updates on mindfulness

Volume 14 - Issue 167

Nov 2023

<u>Contents</u>

53 New Cites p1

- **19** Interventions
- 10 Associations
- 14 Methods
- 10 Reviews
- 0 Trials
- Highlights p5

Editor-in-Chief David S. Black, Ph.D.

Highlights by Seth Segall, Ph.D

American Mindfulness Research Association



Interventions Articles testing the applied science and implementation of mindfulness-based interventions

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Providing monthly research updates on mindfulness

Volume 14 - Issue 167

Nov 2023

<u>Contents</u>

53 New Cites p1

19 Interventions

10 Associations

14 Methods

10 Reviews

0 Trials

Highlights p5

Editor-in-Chief David S. Black, Ph.D.

Highlights by Seth Segall, Ph.D.

American Mindfulness Research Association



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Providing monthly research updates on mindfulness

Volume 14 - Issue 167

Nov 2023

<u>Contents</u>

53 New Cites p1

- 19 Interventions
- 10 Associations
- 14 Methods
- 10 Reviews

0 Trials

Highlights p5

Editor-in-Chief David S. Black, Ph.D

Highlights by Seth Segall, Ph.D

American Mindfulness Research Association



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Providing monthly research updates on mindfulness

Volume 14 - Issue 167

Nov 2023

<u>Contents</u>

53 New Cites p1

19 Interventions

10 Associations

14 Methods

10 Reviews

0 Trials

Highlights p5

Editor-in-Chief David S. Black, Ph.D

Highlights ьу Seth Segall, Ph.D.

American Mindfulness Research Association



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Trials Research studies newly funded by the National Institutes of Health (OCT 2023)

None reported.

Providing monthly research updates on mindfulness

Volume 14 - Issue 167

Nov 2023

<u>Contents</u>

53 New Cites p1

- 19 Interventions
- 10 Associations
- 14 Methods
- 10 Reviews
- 0 Trials

Highlights p5

Editor-in-Chief David S. Black, Ph.D

Highlights by Seth Segall, Ph.D

American Mindfulness Research Association



Highlights A summary of select studies from the issue, providing a snapshot of some of the latest research

Mindfulness-based interventions (MBIs) can enhance attention and emotional regulation in certain practitioners, but can they also foster ethical behavior? Studies examining the effects of MBIs on helping behavior, cheating, generosity, compassion, or willingness to inflict harm have produced mixed results. Some studies show MBIs can facilitate prosocial behavior, while others suggest MBIs may make people more self-focused.

Feruglio et al. [*Mindfulness*] conducted a randomized, controlled study to discover whether a MBI could reduce lying for financial gain in a card game.

The researchers randomly assigned 69 Italian university students (average age = 26; 80% female) who had expressed an interest in participating in a MBI to either a MBI or waitlist control. The MBI was an on-line 8week course modeled after the Mindfulness-Based Stress Reduction curriculum, delivered in 8 weekly 2-hour sessions via participants' personal computers. Each session included 30-minute guided meditations incorporating elements of breath-focused, body scan, and open-monitoring meditation. Participants were also instructed to engage in daily home meditation practice using a guided audio recording.

Participants were assessed before and after intervention using the Multidimensional Assessment of Interoceptive Awareness (MAIA) and the Five Facet Mindfulness Questionnaire (FFMQ). They were also evaluated pre- and post-intervention on their willingness to lie while playing 48 hands of a computer-administered zero-sum card game against an ostensible live opponent, which was actually a computer algorithm. Players were informed of the monetary value of each hand in the card game. The computer opponent initially chose a card, either the Ace of Hearts or Ace of Spades, which was concealed from the opponent player so it could not see the card's face value. The Ace of Hearts always won.

Participants, however, could see the card faces and choose to lie or tell the truth to the opponent about which card the opponents had selected and whether they had won. Players earned money for each hand they claimed to have won.



The results showed that the MBI group had significantly increased scores on the MAIA Self-Regulation (partial $\eta 2 = 0.33$), Attention Regulation (partial $\eta 2 = 0.21$), Body Listening (partial $\eta 2 = 0.14$) and FFMQ Non-Reactive (partial $\eta 2 = 0.10$) subscales more than the control group.

Additionally, the MBI group showed decreased frequency of lying in the card game (d = 0.41), while the control group did not (d = 0.16). More meditative practice minutes during the course was linked with less lying, but only among those MBI participants who scored at least one standard deviation above the mean on the MAIA Attention Regulation subscale.

The study demonstrates that a MBI can reduce deceit for minimal financial gain in a simulated card game. This decreased deceit is correlated with improved interoceptive awareness. Further, this reduction in deceit appears to be partly dependent on more minutes of meditation practice. Study limitations include enrolling participants already interested in a MBI, the absence of an active control group, and the lack of a post-assessment to determine whether participants believed they were playing against a live opponent rather than a computer simulation during the card game.

Providing monthly research updates on mindfulness

Volume 14 - Issue 167

Nov 2023

<u>Contents</u>

53 New Cites p1

- 19 Interventions
- 10 Associations
- 14 Methods

10 Reviews

0 Trials

Highlights p5

Editor-in-Chief David S. Black, Ph.D.

Highlights by Seth Segall, Ph.D

American Mindfulness Research Association



Inadequate maternal diet and high stress during pregnancy are risk factors for poorer cognitive and social development in early childhood. In a study previously highlighted in the September 2023 issue of the Mindfulness Research Monthly, Crovetto et al. investigated the effects of Mindfulness-Based Stress Reduction (MBSR) or a Mediterranean diet on toddlers whose mothers received treatment during pregnancy.

As a secondary outcome of that trial, **Nakaki** et al. [*American Journal of Obstetrics and Gynecology*] newly examined fetal MRI and infant neurobehavioral outcomes from a subsample of participants in the original study.

The original study recruited 1,221 pregnant women from Barcelona who were assessed as being at risk for delivering low birthweight infants. The expectant mothers were randomly assigned to one of three study groups: usual treatment, usual treatment plus MBSR, or usual treatment plus a Mediterranean diet.

MBSR consisted of eight 2.5 hour weekly group sessions, a full-day retreat, and home practice. It followed a MBSR syllabus that included a specialized focus on maternal yoga and mothers' relationships with their fetuses. The Mediterranean diet intervention involved monthly 30-minute assessments and 1-hour group sessions conducted by trained nutritionists. Participants received monthly supplies of extra virgin olive oil and walnuts, along with weekly suggested shopping lists, detailed meal plans, and menus. The usual care group received pregnancy care following current institutional protocols.

A randomly selected subset of 692 infants from the original trial underwent assessment using the Neonatal Neurobehavioral Assessment Scale (NBAS) at 1-3 months of age. The NBAS provides measures of infant sensory, motor, arousal, and autonomic nervous system development. Additionally, a smaller subset of 90 mothers underwent MRI scanning at 35-39 weeks into their pregnancies to assess brain development of their unborn fetus.

The results showed that fetuses of mothers who participated in the Mediterranean Diet intervention had significantly larger total brain volumes, corpus callosa, and right frontal lobes compared to fetuses of mothers in the usual treatment group. Fetuses of mothers who received MBSR had significantly larger left anterior cingulate gyri than fetuses in the usual treatment group.



There were no significant differences in fetal brain development between MBSR and Diet groups.

Mediterranean Diet infants scored higher on NBAS measures of autonomic stability, attentiveness to external stimuli, and range of arousal compared to infants in the usual treatment group, while MBSR infants scored higher on arousal regulation.

The study reveals that maternal Mediterranean Diet and MBSR interventions during pregnancy each both yield observable structural and behavioral effects on fetal and infant development phases. The limitations of this analysis include the evaluation of only a small subset of the original study participants, and the possibility that findings applicable to a higherrisk population of expectant mothers may not hold in the broader population.