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Rahimi-Ardabili, Hania; Vartanian, Lenny R; Zwar, Nicholas; Sharpe, Albie; Reynolds, Rebecca Charlotte

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Efficacy and acceptability of a pilot dietary intervention focusing on self-compassion, goal-setting and self-monitoring

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HANIA RAHIMI-ARDABILI, LENNY R VARTANIAN, NICHOLAS ZWAR, ALBIE SHARPE, REBECCA CHARLOTTE REYNOLDS

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Abstract

Objective:

Overweight and obesity are universal health challenges. Recent evidence emphasises the potential benefits of addressing psychological factors associated with obesity in dietary programmes. This pilot study investigated the efficacy and acceptability of a combined online and face-to-face dietary intervention that used self-compassion, goal-setting and self-monitoring to improve dietary behaviour, as well as psychological factors associated with dietary behaviour.

Design:

Embedded mixed methods including a 4-week before-after trial and a one-on-one interview. Quantitative outcomes of the study were the levels of self-compassion; eating pathology; depression, anxiety and stress; and dietary intake. Qualitative outcomes were participants' perceptions about the acceptability of the intervention.

Setting:

UNSW Kensington campus.

Participants:

Fourteen participants with overweight and obesity aged between 18 and 55 years old.

Results:

Results showed that the intervention significantly improved self-compassion and some aspects of dietary intake (e.g. decrease in energy intake) at Week Four compared with Week Zero. Some aspects of eating pathology also significantly decreased (e.g. Eating Concern). However, changes in self-compassion over the 4 weeks did not significantly predict Week Four study outcomes, except for level of stress. Most participants found self-compassion, goal-setting and self-monitoring to be essential for dietary behaviour change. However, participants also indicated that an online programme needed to be efficient, simple and interactive.

Conclusions:

In conclusion, the current study provides preliminary but promising findings of an effective and acceptable combined online and face-to-face intervention that used self-compassion, goal-setting and self-monitoring to improve dietary habits. However, the results need to be examined in future long-term randomised controlled trials.