

Mindful Eating:
A Course in Rediscovering a Healthy and Joyful Relationship with Food
Taught by Jan Chozen Bays, MD

Lesson One: What Is Mindful Eating?

JAN: Hello, everyone, I'm Jan Chozen Bays, and I'd like to welcome you to the first class in an online course through Shambhala Publications about mindful eating. Many people have read the book that I wrote, called *Mindful Eating*, and then taken a workshop or a class on mindful eating, and they tell me that it's a completely different experience to read about mindful eating compared to experiencing mindful eating. When we experience something, we're learning about it from the inside out. When we read about something, we're learning about it from the outside. Or when we do dieting or we do calorie counts, we're learning about something from the outside. But it's those experiences that come from the inside that have the ability to truly transform us and help us grow.

I'd like to tell you a little bit about myself, in case you didn't see the trailer for this course. I'm a medical doctor—actually, a pediatrician—and I trained at UC San Diego. I'm also a Zen teacher, and I trained under Maezumi Roshi at the Zen Center in Los Angeles. I received authorization to teach Zen in 1983, and I've been a pediatrician since 1972. As a pediatrician, I've become concerned about the current epidemic of obesity among children. This is having far-reaching effects on our children's health. In fact, it's predicted that for children born in the year 2000, about 30 percent of boys and 40 percent of girls will end up with type 2 diabetes and all of the side effects of diabetes. For Latina girls and Native American girls, it may be as high as 50 percent will end up with diabetes. There are also some liver complications, some heart complications, kidney complications, and eye complications that can go along with diabetes long term. So as a result, there are also predictions that children born in the year 2000 may live shorter lives than their parents. This is something that we all have to be concerned about.

As a doctor, and also as a person who eats, I'm aware that it's not easy to change eating patterns. We often advise people how to eat, and most people have read about how they should eat, or their dietician or doctor gives them sheets about what they should eat, but it's not as easy as reading a sheet of paper and then changing your eating patterns. Somehow in this country, and ironically in a country where most people can eat food seven days a week, twenty-four hours

a day . . . (all kinds of food: ethnic food, home-cooked food, food from fast-food outlets . . . we really have food available all the time) . . . although there are people in our country who are food challenged and lack food, most of us have enough to eat all the time. And when we say, “Oh, I’m famished” or “I’m starving,” that’s not really true compared to the situation in other parts of the world. So looking at this epidemic of being out of balance with eating or out of harmony with our natural way of eating, I decided to look at, what solutions have we tried in the past? In this country, in general, when we have a problem, we have three ways of working with it. The first way is to attack it: it becomes the enemy and we attack it. The second way is to incarcerate it: something we don’t like we put someplace where we can’t see it; take forbidden food and then put it in the closet and don’t eat it. And the third way is to apply the miracle of science and technology to the problem. I’ll give you examples.

One of the first ways that we’ve worked historically with being out of balance with food is dieting. With dieting, we take certain foods and we incarcerate them. We say, “These foods are not to be eaten.” And I’ve lived long enough as a physician to have seen many diets come and go. In fact, if you want to make money fast—especially if you’re telegenic and especially if you’re in the health-related fields or you’re a movie star—then you should write a diet book because it will sell like crazy for a while, until people realize that the diet doesn’t work long term (and then you need to write another diet book). I’ve seen diets that were the all-protein diet and the no-protein diet. The all-carbohydrate diet, the no-carbohydrate diet. The all-citrus diet, the no-citrus diet. In fact, there’s a diet fad in Japan in the last few years called “the banana diet,” and they’ve sold out of bananas in many stores in Japan. That diet is based on eating three bananas before you eat breakfast, three bananas before you eat lunch, and three bananas before you eat dinner. So you can imagine it works by just filling you up. A meta-analysis of dieting shows that dieting doesn’t work long term. Many people can lose about 8 to 11 pounds on any diet, and then within two years they’ve gained that weight back and maybe more. So the research shows that dieting is not the solution to our disharmony with food and with eating. And it’s not a recommended solution for children: we don’t want young children to start dieting. I’ve become very alarmed because I see young children—as young as eight or ten—telling me, “Oh, I’m too fat. I need to go on a diet,” when they’re a completely normal size. And the research also shows that the earlier girls, in particular, start dieting (like in their teen years) and the more severely they go into dieting, the higher the risk of a later eating disorder. So we don’t want to apply dieting to this problem, especially with children.

Then we tried attacking food: this is the attitude that food is the problem. We attacked food with technology. We stripped out some of the things we thought were bad, like fat, and replaced it with artificial fat. We stripped out sugar and replaced it with artificial sweeteners, and we've taken away the salt and replaced that with artificial salts. We've stripped out the fiber, until we learned that fiber was healthy, and then we've replaced it with something which isn't the bran fiber—which is natural to cereal grains—but often is cellulose. So when you read a package and it says “with added fiber,” make sure you know where that fiber comes from. It may be ground-up trees. So attacking food and replacing real food with artificial food, or as Michael Pollan likes to call it, “food-like substances,” is not the answer either.

Next, we attacked our fat cells. We decided that our bodies' fat cells were the problem. And they're very uncooperative, those fat cells. For the two hundred thousand years of our evolution, they have been storing extra calories, extra energy for us. This was absolutely necessary in the past because human beings often died of famine, and food supplies were very irregular. If your crops failed in the fall, you might have nothing to eat during the winter. And famine was a leading cause of death among human beings. So we have a very primitive cellular memory about famine, and we try to take in extra calories to protect against unnecessary death. But now, of course, food is available all the time to us, and when we take in the extra calories, they aren't burnt off in the lean times, and we end up keeping those extra calories in our fat cells. So we've applied technology to our fat cells, and that technology is called “liposuction.” Now, I always say that there are certain days when I look in the mirror and think, “I would be grateful for some liposuction.” And I'm very grateful that clothing hides those areas of my body. But one of the problems with liposuction is that if you take the fat cells off of parts of your body where you don't want them, like your belly or your thighs, and if you keep consuming extra calories, then the fat cells in other parts of your body will just inflate. So you end up with fat pads behind your elbows, around your ankles, behind your knees, and so on. So liposuction doesn't turn out to be a long-term answer.

Lately what we've done is attack our digestive system. Can you imagine the audacity of our digestive system? Whatever we put in, it tries to break down and absorb and store for us. We've decided that our digestive system is misguided and that we must rearrange the anatomy of our digestive system so that it can't absorb our food, and that rearrangement is called “bariatric surgery.” There are several types of bariatric surgery. Usually it involves making a smaller stomach, either by stapling or cutting off part of the stomach. Then there's another form

called “bypass surgery,” where we bypass the part of the small intestine that absorbs the food and reintroduce the food down further in the small intestine. Some unfortunate consequences of bariatric surgery are that because you’re not absorbing the food, you’re not absorbing fat-soluble vitamins, like vitamin A and vitamin D, so you have to take fairly heavy supplements. Also, you can only eat small amounts of certain foods. If you eat more than you should in terms of quantity (in general, people can eat—with a smaller stomach or bypass surgery—about half a cup to a cup of well-processed food at a time), you have to be careful about eating sugar or fat; if you overeat in quantity or eat the wrong kinds of food, you get sick. Quite sick. So what bariatric surgery actually is, is enforced mindful eating.

With mindful eating, we can become aware of what is the appropriate amount or the appropriate type of food for us to eat by paying attention to our digestive system—by paying attention to our cells and then following their wisdom about what to eat and how to eat—and bring ourselves back in harmony with body, heart, and mind . . . in harmony with our eating and our food choices.

I’m not claiming that bariatric surgery is all wrong for every person. I know people who have benefitted tremendously from it. When they lose weight, often they can begin to exercise (they have a lot more energy); and when they can exercise, they lose more weight. Also, they can often go off of their diabetes medication within a few days after having surgery. We don’t exactly know how that happens. And sometimes their blood pressure is lowered too, so a lot of their health risks are decreased after bariatric surgery. But there are side effects from bariatric surgery. For one thing, it costs thirty thousand dollars, so it’s not available to many people. Another side effect is what’s called “transfer addiction.” If people aren’t well prepared psychologically and screened psychologically for bariatric surgery, they can end up with an increased rate (in some studies, as high as 25 percent of people following bariatric surgery) of addiction to drugs or alcohol or to gambling or to sex. Because they lose body weight, their hormones shift and they explore their sexuality in a rather uncontrolled way. The other issue with bariatric surgery: it is really not appropriate for children—for growing children—because we do not know the long-term side effects of rearranging our digestive system, this digestive system that evolved over hundreds of thousands of years to keep us healthy. So bariatric surgery is not a long-term solution for this issue.

In summary, food is not the problem. Food-like substances might be the problem, but true food is not the problem. Fat cells are not the problem—they’re just trying to do their job in

keeping us healthy for lean times, which actually almost never come. And our digestive system is not the problem. It's also trying to keep us healthy by absorbing food and giving us energy for our daily life.

So, at this point, I looked at the other half of my life. I've had these two parallel careers: a career as a physician and a career as a Zen teacher. And I thought, perhaps there's a solution in our Zen practice and the Zen half of my life. I wanted a solution that was inexpensive, so accessible to more people, something that could be learned by parents and passed on to children or had an immunizing effect. If we taught it to children, it would immunize them against problems with eating for the rest of their life. Something that had positive side effects and would transfer positively to the rest of our life outside of our eating life, and something that would help get us in touch with our spiritual foundation, our religious foundation. Our life doesn't go well if we don't have a spiritual or religious foundation for our life. This is absolutely essential and probably the most nourishing thing we can do.

In looking at my Zen practice, I realized that for two thousand five hundred years we have had a practice of mindful eating. I first learned it at the first retreat that I went to as a Zen student, and I was absolutely delighted with it. And when I became a teacher, I began teaching it to my students. Here at the monastery, we eat in a ceremonial way with a set of bowls called *oryoki* bowls. *Oryoki* means "just enough," and it means that by paying attention to our bodies' wisdom, to the eight hungers (which you'll learn about in the next class), we can develop an awareness of what we should eat, how much we should eat, and when we should eat it—that comes from within us. It's not some rules that people enforce from the outside. So I'd like to share with you in this course the principles of mindful eating.

Out of all the research that I did on eating, I wrote a book called *Mindful Eating*. The full title is *Mindful Eating: A Guide to Rediscovering a Healthy and Joyful Relationship with Food*. One of the most important words in the title (besides "joyful") is "rediscovering," because this is a wisdom that you had when you were a child and that's been lost over the years, and mindful eating will help you rediscover that innate wisdom.

One of the issues that people run into when they've become out of balance with eating is a voice inside that we call "the inner critic." And the inner critic can become a driving force behind a situation called "yo-yoing," where people diet and then crash and then overeat and then get back on a strict diet and they crash and then overeat. And that situation is directly related to

the inner critic, who feels that if we make one small mistake, it's all over and we might as well eat the whole cake. We abbreviate the inner critic—that inner critical voice—as *IC*. But we want to change that with mindful eating to *inner curiosity*. We want to explore what's going on when we eat—what's going on in our mind and our heart and our body—with curiosity, because through curiosity we can make very interesting discoveries, and out of those discoveries we can change the way we eat in a natural way.

What is mindful eating? Mindfulness is deliberately bringing attention to our external environment and to our internal environment while we're eating—and this last part is really important—without criticism or judgment. Mindful eating involves deliberately (that means *purposefully*) bringing our full attention to our external environment, so that might include looking at the food in our bowls and appreciating it as a piece of art—appreciating the colors, the shapes, and the textures before we begin to eat. It also involves smelling the food—appreciating the aromas before we begin to eat, like people might sniff a fine wine for its aroma. We bring deliberate attention to the internal environment, so once the food is in our mouth, we focus our full attention on the mouth—on the textures, on the flavors, even the temperatures of the food. Fully absorbed and enjoying what we're eating. It sounds radical, but it's really fun to do. So we bring full attention to the external environment and the internal environment while we're eating, and the internal environment includes what our mind is thinking about, how our heart feels about the food, how our mouth experiences the food, and then how the food feels as it goes into our digestive system and then ultimately out to our cells. And I'm going to reiterate the last part because it's very important: without criticism or judgment. This is where we change the inner critic to inner curiosity.

People sometimes ask, “When did mindful eating begin?” The answer is it's beginningless, because you yourself once were a mindful eater. All children are mindful eaters. There's an old experiment in which they put children in high chairs with trays in front of them and put a variety of foods on the trays, and within a week's time the children—these are small children, toddlers—would eat a balanced diet. They would eat the right nutritional balance, and they would eat the appropriate number of calories. It's as if they were listening to an inner nutritionist or dietician. That's an inner wisdom that we've always had. However, it took a week for the children to eat a balanced diet. The first day, they might eat only mashed potatoes. Of course, what's the parent's reaction when they see that the children haven't eaten the protein or the vegetables or the fruits in a balanced diet? The parents get upset. So children are mindful

eaters until parents interfere. Of course, being a parent and a grandparent, I know that instinct. Your child eats only mashed potatoes, and you think, “Oh no, they haven’t had any protein today.” So you take a fork and you jab it in that piece of chicken or that piece of tofu, and you try to shovel it in their mouth. Right away, at that point, we’re interfering with their internal wisdom about what to eat. The first day, they eat mashed potatoes, but if you let it go on for a week, the next day, they eat peas. The day after that, they might eat apple sauce, and the day after that, Cheerios. So, in the course of a week, they will eat very appropriately if we don’t interfere. Mindful eating is about rediscovering—as I said, the most important word in the title of the book, *rediscovering*—that innate ability you had when you were young to eat in a way that was balanced and harmonious. That is your natural birthright as a human being, and mindful eating can restore it to you.

Mindful eating is becoming known all around the world. The *Mindful Eating* book has been translated into seven languages so far. I teach a course for professionals called “Mindful Eating: Conscious Living” to help train professionals so that they can pass mindful eating on to their clients or their patients. And the professionals who come to that training say, “This is the missing piece. We can teach people all about calorie counts and food pyramids, but mindful eating is what we really need to fill in the hole in what we’re teaching our patients and our clients.”

So I invite you to join me in the joyful and healthy practice of mindful eating. This course will give you the tools to help you restore yourself to a balanced and harmonious way of eating. Mindful eating is really fun, and I look forward to you joining me in the next class.