**The Multi-theory Model of Health Behavior Change: Understanding Meditation, or ‘Dhyana’**

Meditation is the regular, purposeful practice of becoming aware of one’s bodily sensations, thoughts, or other points of focus.

Professor Manoj Sharma, a global health promotion leader and Chair of the Social and Behavioral Health department at the University of Nevada, Las Vegas, wished to test whether a health behavioral model that he developed could explain why adults begin and maintain a meditation practice. While this multi-theory model – or ‘MTM’ – has been applied to many health-related behaviors, two domains are core to the model: *initiation* of a health behavior and *sustenance* of this behavior.

Professor Sharma’s team collected data from 330 adults, 64 of whom practiced meditation, through an online questionnaire. Upon analyzing the data, they identified two MTM constructs that are key to the initiation of mediation.

The first construct that predicted the initiation of meditation was participatory dialogue – assessing the advantages and disadvantages of undertaking a given behavior. Intuitively, the more acutely we perceive the advantages of undertaking a behavior, the more likely we will engage in it. Thus, Professor Sharma suggests that educational approaches emphasizing the advantages of meditation will motivate individuals to take it up.

The second MTM construct predicting the initiation of meditation was behavioral confidence. This describes how confident an individual feels that they will start meditation. The results of the team’s questionnaire showed that overall levels of behavioral confidence were low. As such, interventions that increase behavioral confidence regarding meditation would be valuable.

In order to maintain a meditation practice, the team found that emotional transformation was critical. In this context, emotional transformation means that emotions are converted into intentions and channeled toward meditation and self-improvement.

The second important predictor for the sustenance of meditation was support from family and friends. In future interventions, this support could be improved through the inclusion of partners or friends.

In a further study involving college students, Professor Sharma’s team explored the impact of introspective meditation – ‘manan dhyana’ – before undertaking pleasurable activities.

Students are prone to chronic stress, but often choose activities that provide immediate gratification, taking their focus away from their studies and worsening their stress. Developing more helpful approaches to stress management, such as meditation, could break this maladaptive cycle.

Again, the team used the MTM to find predictors of initiation and sustenance of meditation in a sample of 65 students, 14 of whom engaged in the practice. This time, the physical environment was key to initiation. Thus, by improving the availability of suitable spaces for meditation, students may be more likely to take it up.

In terms of sustenance, the team found that emotional transformation was again critical. Campus resources such as counseling services could be useful in facilitating this.

The team’s findings will aid the development of effective interventions for students, while also reducing maladaptive behaviors such as alcohol misuse. This work also complements the growing body of research confirming the value of the MTM in promoting health behaviors.

**///Bio slide:**

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