

Self-Compassion, Psychological Flexibility and Self-Esteem in Chronic Pain

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Introduction

Definition: Self-Compassion comprises three components (Neff, 2003):

Self-Kindness

Common humanity

Mindfulness

Empirical evidence concerning pain:

Preliminary research on self-compassion in pain shows promising results.

- Loving-Kindness-Meditation in people suffering from chronic low back pain leads to improvement in pain, distress and anger-levels (Carson et al., 2005)
- Self-compassion in chronic pain is associated with greater pain-acceptance and less depression, anxiety and distress (Costa & Pinto-Gouveia, 2011)
- Self-compassion predicts negative and positive affect, pain-catastrophizing and disability in musculoskeletal pain (Wren et al., 2012)
- experimental vignette-study including individuals suffering from chronic pain: self-compassion was associated with less emotional reactions, rumination, catastrophizing and avoidance (Purdie & Morley, 2015)

The current study adds a large sample size, a cross-sectional and control-group design to prior research.

Aims

- **Definition** of Self-Compassion in the context of chronic pain
- **Differentiation** of Self-Compassion from Psychological Flexibility and Self-Esteem

Method

Participants were recruited from psychosomatic inpatient clinics, medical offices, outpatient clinics, physiotherapy practices and via the internet. Chronic pain was self-rated as suffering from pain for more than six months.

Measurements:

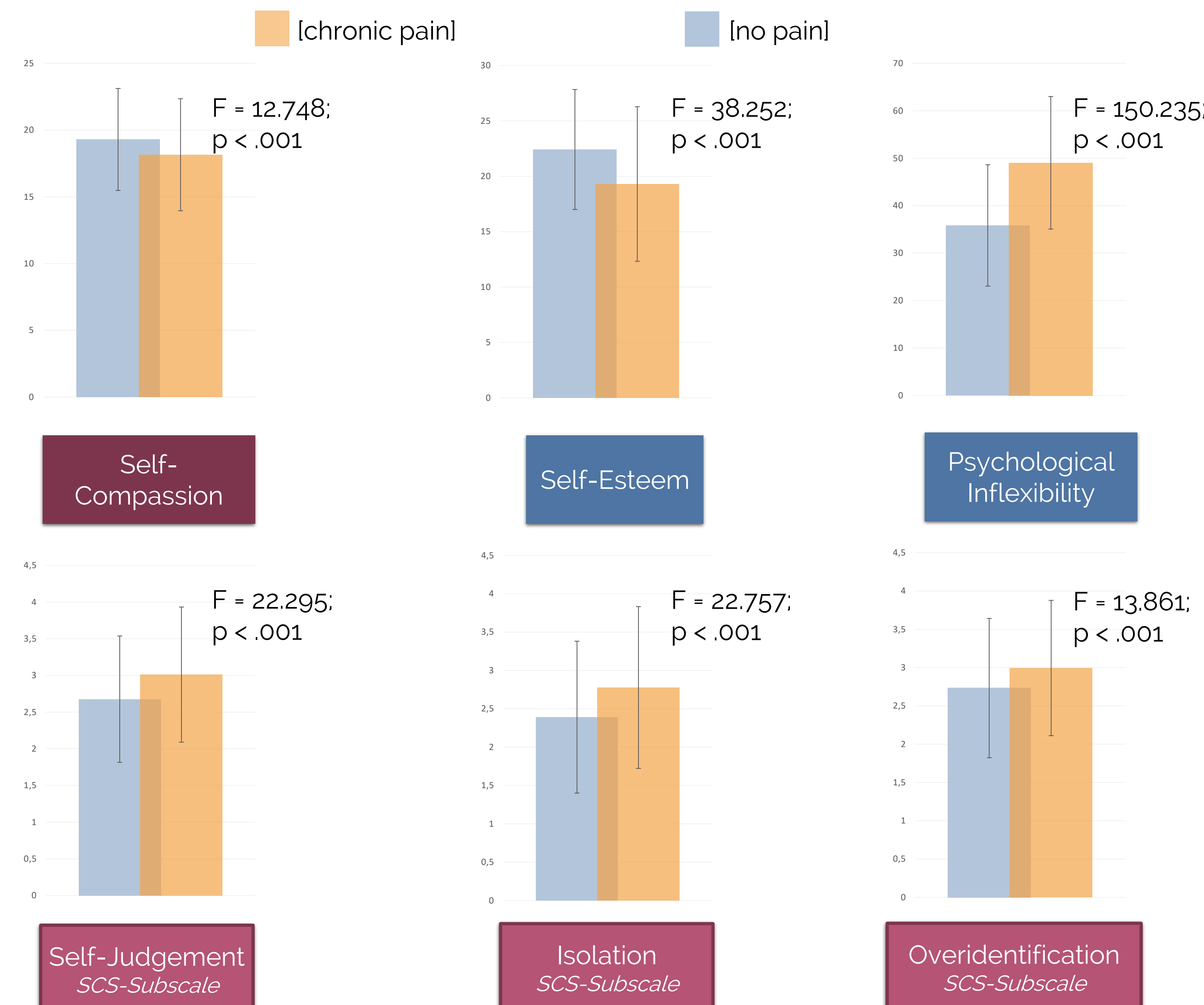
- Pain Disability Index (PDI)
- Numeric Rating Scale (NRS intensity & unpleasantness)
- Pain Catastrophizing Scale (PCS)
- Pain Anxiety Symptom Scale (PASS-20)
- Patient-Health Questionnaire (PHQ-9)
- Self-Compassion Scale (SCS)
- Rosenberg Self-esteem Scale (RSES)
- Psychological Inflexibility in Pain Scale (PIPS)

Demographics	N (%) / M ± SD	
Measure	Chronic pain	No Pain
Sample Size	386	275
Age	45.28 (14.1)	39.97 (17.7)
Sex		
Men	43 (11.1)	70 (25.5)
Women	343 (88.9)	205 (74.5)
Marital status		
single	70 (18.1)	78 (28.4)
partnership	270 (69.9)	177 (64.4)
divorced	36 (9.3)	13 (4.7)
widowed	10 (2.6)	7 (2.5)
Highest school grade completed		
Grades 9 and below	56 (14.5)	20 (7.3)
Grades 10	175 (45.3)	79 (28.7)
Grades 13	155 (40.2)	176 (64)

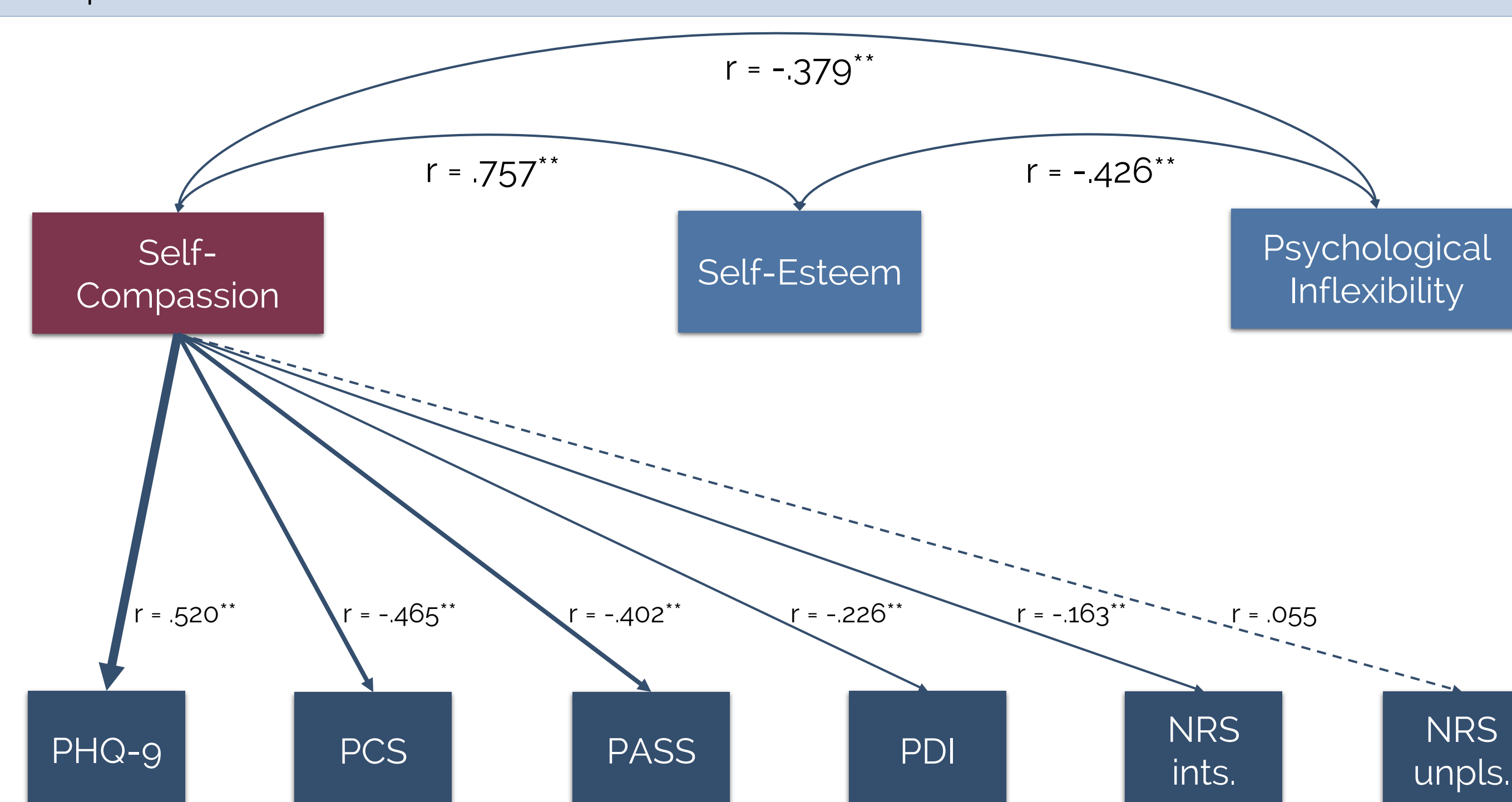
Table 1. Sample demographic information

Results

Univariate analysis of variance [chronic pain], [no pain]



Correlations [chronic pain]



Results

Multiple regression analysis:

[chronic pain]

Predictors: self-compassion, self-esteem, psychological inflexibility
Dependent Variable: pain related-disability

Predictor	Modell 1 (R ² = .049)			Modell 2 (R ² = .103)			Modell 3 (R ² = .372)		
	B	β	sr ²	B	β	sr ²	B	β	sr ²
(constant)	49.008 (3.408)	-	-	46.301 (3.375)	-	-	1.852 (4.554)	-	-
SCS	-.823 (.183)	-.226***	.051	.169 (.274)	.046	<.001	.472 (.232)	.130*	.007
RSES				-.791 (.165)	-.362***	.055	-.386 (.143)	-.177**	.013
PIPS							.632 (.051)	.577***	.266

Table 2. Multiple Regression Analysis; DV = PDI; Significance: *** p < .001; ** p < .01; * p < .05

Psychological Inflexibility is the most relevant predictor for pain-related disability.

Conclusion and further directions

Conclusions:

- People suffering from chronic pain showed significantly lower levels of self-compassion.
- Low self-compassion was significantly associated with:
 - negative pain-related outcomes
 - higher depression-levels
- However, compared to psychological flexibility, self-compassion did not explain unique variance on these outcome measures.
 - This indicates that self-compassion might be less relevant for the treatment of chronic pain than psychological flexibility.

Further directions:

- Self-Compassion as a mechanism of action or a precondition for fostering psychological flexibility – further differentiation of the constructs
- Evaluation of Self-Compassion interventions in the context of pain – comparison to acceptance strategies
- Self-Compassion relevant for specific subgroups - tailored treatment (high self-criticism, high anger)

References

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Acknowledgements/Disclosures: The study was funded by the Department of Clinical Psychology and Psychotherapy at the Philipps-University Marburg and the Department of Clinical Psychology and Psychotherapy at the University Koblenz-Landau. There were no conflicts of interest.

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