

What is the relationship of mindfulness and self-compassion with obsessive-compulsive symptoms? Results from a large survey with treatment-seeking adults.

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Background and objectives

Obsessive-compulsive disorder (OCD) is a debilitating and distressing mental health condition, characterised by a vicious cycle of persistent intrusive thoughts, images or urges that cause significant anxiety or distress (e.g. thoughts about contaminating others), and repetitive, ritualistic behaviours (e.g. hand washing) or mental acts (e.g. mentally repeating phrases) that are aimed at alleviating anxiety or distress and preventing intrusive thoughts from coming true but instead serve to maintain symptoms. This vicious cycle is informed by distorted beliefs about the personal significance and importance of intrusive thoughts. Despite its theorised potential, there is a dearth of research into the potential benefits of mindfulness-based interventions for OCD. Little is known about the relationship of mindfulness and self-compassion with obsessive-compulsive symptoms to inform such interventions.

The main aims of the study were to: (a) assess the associations of mindfulness and self-compassion with obsessive-compulsive symptoms, obsessive beliefs and distress tolerance; (b) test whether mindfulness and self-compassion mediate the relationship between obsessive beliefs, distress tolerance and obsessive-compulsive symptoms; and (c) compare mindfulness and self-compassion in i) treatment-seeking adults with clinically significant obsessive-compulsive symptoms, ii) treatment-seeking adults with clinically significant symptoms of depression and/or anxiety but not OCD, and iii) non-treatment-seeking adults without clinically significant symptoms of OCD, depression and/or anxiety.

Methods

An anonymous online survey was completed by (a) a clinical sample of 1400+ adults with common mental health problems awaiting psychological support or therapy in Improving Access to Psychological Therapies services in the UK National Health Service, and (b) a non-clinical sample of 540 university students. The survey consisted of short-form measures of mindfulness (FFMQ-SF), self-compassion (SCS-SF), obsessive-compulsive symptoms (OCI-R), symptoms of depression (PHQ-9) and anxiety (GAD-7), obsessive beliefs (OBQ-20), distress tolerance (DTS) and wellbeing (SWEMWBS) and sociodemographic questions. Data is currently being analysed and will be presented along with a discussion of clinical research implications.