



The Five Facets of Mindfulness in Relation to Distress Tolerance

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Abstract

Distress tolerance (DT) is defined as the ability to endure discomfort. Low DT has been associated with disorders such as borderline personality. Mindfulness-based intervention has been shown to increase DT in a variety of contexts, but there is a lack of research examining specific facets of mindfulness in relation to DT. This study examined participants from a community sample who completed the DTS and the FFMQ as part of a larger study. Results show that all facets except Observing significantly predicted DT scores to differing degrees. This suggests that, in a clinical setting, it may be beneficial to focus more on specific facets of mindfulness.

Introduction

- Distress tolerance (DT) is defined as one's ability to endure psychological discomfort.
- An individual with low DT will tend to make an attempt to alleviate distress as soon as possible (Simons & Gaher, 2005).
- This tendency or habit has been associated with a number of psychological disorders, such as borderline personality disorder (Simons & Gaher, 2005).
- One intervention that has gained significant support in recent years, mindfulness-based intervention (Kabat-Zinn et al., 1990; Dimidjian & Segal, 2015), has been shown to specifically increase DT across a number of settings (Feldman et al., 2014; Lotan et al., 2013).

Method

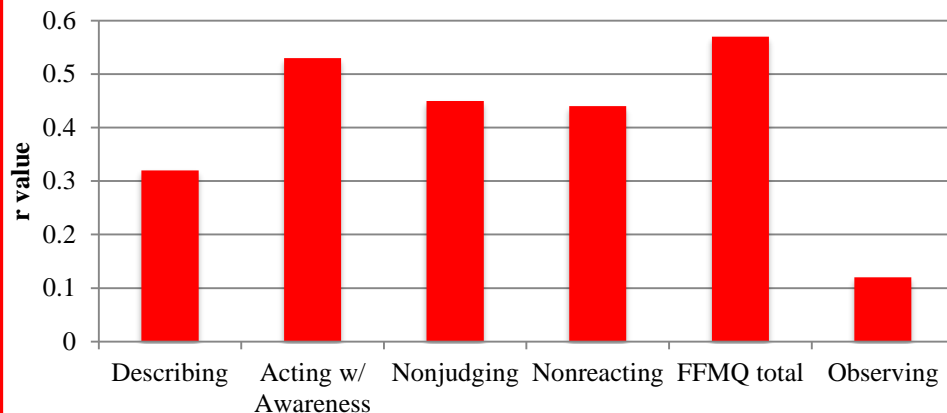
Participants

- Participants were recruited from a community sample from a larger study examining the effects of brief interventions for generalized anxiety symptoms and muscle discomfort. (N=48; Age: M=33.4, SD=13.6)

Procedure

- Participants completed the Distress Tolerance Scale (DTS) and Five Facet Mindfulness Questionnaire (FFMQ).
- General linear modeling was utilized to examine the relationship between mindfulness and DT.

Results



- Bivariate results (N=48) indicated that the Describing ($r=0.32, p<0.03$), Acting with Awareness ($r=0.53, p<0.01$), Nonjudging ($r=0.45, p<0.01$), and Nonreacting ($r=0.44, p<0.01$) facets of the FFMQ as well as the FFMQ Total score ($r=0.57, p<0.01$) significantly predicted participants' total score on the DTS. Notably, the Observing facet ($r=0.12, p=0.47$) of the FFMQ did not.

Conclusion

- Results suggest that increased mindfulness is related to higher levels of DT, but not all facets of mindfulness relate to DT in the same way.
- Thus, while increasing mindfulness through mindfulness-based interventions may lead to increased DT, **enhancing** specific facets of the mindfulness experience (e.g., Acting with Awareness) may be more beneficial than others (e.g., Observing).