The efficacy of Mindfulness-Based Stress Reduction - Cognitive Therapy (MBSR-CT) and correlation between self-compassion, stress, anxiety and depression in participants affected by cancer

Background
The inclusion of more explicit compassion-focused practices in MBSR-CT teaching has been a hot topic in recent years but there is limited research measuring the impact of the course on self-compassion. Self-compassion involves feelings of caring and kindness towards oneself in the face of personal suffering and involves the recognition that one’s suffering, failings and inadequacies are part of being human. Its three components are:
1) Extending kindness and understanding to oneself rather than harsh self-criticism and judgement
2) Seeing one’s experiences as part of the larger humanity rather than as separating and isolating
3) Holding one’s painful thoughts and feelings in balanced awareness rather than over-identifying with them (Alfano 2003).

Research into compassion and self-compassion related to the field of mindfulness is now burgeoning. A recent systematic review and meta-analysis of meditation studies (Tu et al. 2015) found that there is consensus evidence for mindfulness and preliminary but insufficient evidence for self-compassion and psychological flexibility as mechanisms underlying mindfulness-based interventions. Bergner-Cloca et al. (2014) found that the cultivation of mindfulness mediates changes in self-compassion and trait anxiety and concluded that meta-cognitive skills are at the core of mindfulness and are essential to and precede self-compassion.

With the formalisation of the format for mindfulness-based cognitive therapy (MBCT) being applied in different settings, the mindfulness-based stress reduction (MBSR) programme, taught since 2003 at The Haven, has now merged into a course teaching elements of both approaches which we have termed Mindfulness Based Stress Reduction-Cognitive Therapy (MBSR-CT). Within this course there has been more consistent and continuously explicit teaching of kindness and self-compassion with discussion around kindness to oneself and others within their context within the course, its practice and life in general. Previous research in patients with breast cancer at The Haven (Hoffman et al 2012a, 2012b) demonstrated that depression and anxiety amongst other factors of mood state, quality of life and wellbeing were all significantly improved compared to controls as a result of MBSR-CT.

Methods
Eighty seven people predominantly affected by cancer attended an 8-week programme of Mindfulness-Based Stress Reduction – Cognitive Therapy (MBSR-CT) at The Haven breast cancer support centres during 2011-2014. Self-report questionnaires were completed pre- and post the programme. The courses were led by qualified and experienced MBSR/MBCT instructors with backgrounds in providing medical and psychological support in cancer care.

Characteristics of participants
Gender: 84 female, 3 male
Mean age of participants: 52 years
Types of cancer: Breast cancer, n=71; other cancers, n=6; non-cancer, n=4; Supportive, n=4

Outcome measures
The questionnaires completed pre week 0 and post week 3 of the MBSR-CT programme were: Perceived Stress Scale (PSS), n=87
Hamilton Anxiety Rating Scale (HAMS), n=87
World Health Organisation (WHO-5), n=87
Self-Compassion Scale-Short Form (SCS-SF), n=36
Hospital Anxiety and Depression Scale (HADS), n=36

Results
Statistically significant improvements were found between pre and post MBSR-CT in self-compassion, stress, anxiety, depression and wellbeing:
• Increase in self-compassion: SCS-SF, p<0.001 (n=35)
• Decrease in anxiety: HADS Anxiety, p<0.001 (n=36)
• Decrease in depression: HADS Depression, p<0.001 (n=36)
• Decrease in stress: PSS, p<0.001 (n=87)
• Increase in wellbeing: WHO-5, p<0.001 (n=84)

Conclusion
This preliminary study has affirmatively answered the research questions, not only does MBSR-CT reduce stress, anxiety and depression confirming previous findings, but also that there is a direct and significant correlation between these reductions and the cultivation of self-compassion. At the end of the 8-week programme participants also reported an increase in self-compassion, not only does MBSR-CT reduce stress, anxiety and depression confirming previous findings, but also that there is a direct and significant correlation between these reductions and the cultivation of self-compassion. At the end of the 8-week programme participants also reported an increase in self-compassion.

Correlation between self-compassion and anxiety and depression
As anxiety or depression decreased, self-compassion increased as shown by a negative correlation between the change in the SCS-SF score and the change in the HADS anxiety (r = -0.389, p<0.001) and HADS depression (r = -0.341, p<0.045) scores, pre and post MBSR-CT.

References

Our Haven offers a free programme of in-depth support to improve the quality of life of anyone affected by breast cancer. Services and support are also available online at: www.thehaven.org.uk
For more information email: info@thehaven.org.uk | Leeds: 4132 341 061 | Manchester: 0800 284 7829 | This Haven is the working name of Breast Cancer Haven. Registered Charity No. 1061726