Mindfulness, self-esteem and positive states of mind: Correlates of psychological quality of life in an LGBT sample

Wiley Stem, Eliot Lopez, M.S., Chwee-Lye Chng, Ph.D. and Mark Vosvick, Ph.D.
Psychological quality of life (QOL) in the LGBT communities

- Harassment, abuse, discrimination and stigma are “nearly universal” experiences among lesbian, gay, bisexual and transgender individuals (APA, 2008).

- Sexual and gender minorities are 2.5 times more likely than heterosexuals to have a mental health disorder (Cochran, Sullivan & Mays, 2003).

- “LGBT people may face unique risks to their mental health and well-being, which mental health care providers should be aware of” (Bostwick, 2007).
Mindfulness, self-esteem and positive states of mind (PSOM)

• Mindfulness-based interventions improved quality of life in a depressed sample (Godfrin & van Heeringen, 2010) and in a distressed sample (Nyklíček & Kuijpers, 2008).

• “The vast majority of articles argue that self-esteem is positively associated with adaptive outcomes” (Neff, 2011). Quality of life and self-esteem are positively correlated among a discriminated sample (Drosdzol, Skrzypulec & Plinta, 2010).

• Positive states of mind negatively correlate with stress following an intervention (Chang et al., 2004).
Minority Stress Model (Meyer, 2003)

A) Environmental Circumstances

B) Minority Status
   - Sexual Orientation
   - Gender
   - Ethnicity

C) General Stressors

D) Distal Minority stress processes
   - prejudice events

F) Proximal Minority stress processes
   - expectations of rejection
   - concealment
   - internalized homophobia

E) Minority Identity
   - LGBT

G) Characteristics of Minority Identity
   - prominence
   - valence
   - integration

H) Coping and Social Support (Community & Individual)

I) Mental Health Outcomes
   - positive
   - negative
Hypotheses

- Mindfulness is positively associated with psychological QOL.
- Self-esteem is positively associated with psychological QOL.
- Positive states of mind (PSOM) are positively associated with psychological QOL.
- Mindfulness, self-esteem and PSOM explain a significant proportion of the variance in psychological QOL.
Measures

Kentucky Inventory of Mindfulness Skills (KIMS 39) (α = .86)

Subscale used: Accept without judgment (α = .87)

- Bear, Smith & Allen, 2004
- Convergent validity with other measures of mindfulness established
- 39 item likert-type scale: 1 (never or very rarely true) to 4 (very often or always true)
  - Accept without judgment subscale: 9 items
- Higher scores indicate higher levels of mindfulness
- Sample items:
  - “I tend to make judgments about how worthwhile or worthless my experiences are”
  - “I tend to evaluate whether my perceptions are right or wrong”
Measures

Rosenberg Self-Esteem Scale (α = .78)

- Rosenberg, Schooler & Schoenbach, 1989
- Convergent validity with self-esteem related constructs and discriminant validity with academic intelligence established (Robinson, Shaver & Wrightsman, 1991)
- 11 item likert-type scale: 1 (strongly agree) to 4 (strongly disagree)
- Higher scores indicate higher levels of self-esteem
- Sample items:
  - “I feel that I have a number of good qualities”
  - “I take a positive attitude toward myself”
Measures

Positive States of Mind Scale (α = .71)

- Horowitz, Adler & Kegeles, 1988
- Divergent validity with presumptive stress and negative moods established
- 7 item likert-type scale: 0 (unable to have it/not relevant to me) to 3 (have it well)
- Higher scores indicate more positive states of mind
- Sample items:
  - “Productivity: feeling of flow and satisfaction without severe frustrations, perhaps while doing something new to solve problems or to express yourself creatively”
  - “Restful Repose: feeling relaxed, without distractions or excessive tension, without difficulty in stopping it when you want to”
Measures

Short-Form 36 (SF-36) Quality of Life Survey (α = .85)
Subscale used: General Mental Health (MHI-5) (α = .95)

- Ware & Sherbourne, 1992
- Convergent validity vis-à-vis other quality of life measures established
  - MHI-5 correlates .95 with the full length MHI-38
- 36 item likert-type scale with varying anchors
  - Mental Health subscale: 5 item likert-type scale: 1 (all of the time) to 6 (none of the time)
- Higher scores indicate higher psychological QOL
- Sample items:
  - “In the past four weeks have you felt calm and peaceful?”
  - “In the past four weeks have you felt so down in the dumps that nothing could cheer you up?”
Participants

- We recruited lesbian, gay, bisexual and transgender participants from the Dallas/Fort Worth area.
  - At least 18 years of age
  - Fluent in English
  - Self-identify as LGBT
- We obtained approval from the appropriate Institutional Review Board (IRB). Participants provided signed informed consent.
- We used a computerized survey protocol.
- Participants received $25 incentive upon completion of our survey.
Data Analysis

- Univariate & bivariate analyses
- Cross-sectional correlational design
- Hierarchical Linear Regression analysis

- **Dependent variable**
  - Psychological QOL
- **Independent variables**
  - Mindfulness
  - Self-esteem
  - Positive states of mind
Demographics (N = 177)

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<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
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<td><strong>Gender</strong></td>
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<tr>
<td>Male</td>
<td>60</td>
<td>33.9%</td>
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<tr>
<td>Female</td>
<td>73</td>
<td>41.2%</td>
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<tr>
<td>Transgender</td>
<td>44</td>
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<td>Gay</td>
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<tr>
<td>European American</td>
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<td>African-American</td>
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<td>Asian-American</td>
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<th></th>
<th>M</th>
<th>SD</th>
<th>Range</th>
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<tr>
<td><strong>Age (Years)</strong></td>
<td>34.4</td>
<td>13.8</td>
<td>18 - 73</td>
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<tr>
<td><strong>Education (Years)</strong></td>
<td>15.2</td>
<td>4.7</td>
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<td><strong>Income ($)</strong></td>
<td>41,562</td>
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### Results | Univariate Statistics

<table>
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<tr>
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<th>Mean (SD)</th>
<th>Possible Range</th>
<th>Actual Range</th>
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<tbody>
<tr>
<td>Mindfulness</td>
<td>129.2 (18.4)</td>
<td>39 - 195</td>
<td>75 - 173</td>
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<td>Self-esteem</td>
<td>21.7 (5.9)</td>
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<td>6 - 30</td>
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<tr>
<td>PSOM</td>
<td>15.7 (4.8)</td>
<td>0 - 21</td>
<td>0 - 21</td>
<td>.83</td>
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<tr>
<td>Psychological QOL</td>
<td>68.9 (18.9)</td>
<td>0 - 100</td>
<td>8 - 100</td>
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## Results | Bivariate Statistics

![Image](image.png)

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<td>8. PSOM</td>
<td>.14</td>
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<td>.05</td>
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<td>.22**</td>
<td>.32**</td>
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<td>9. Psychological QOL</td>
<td>.17*</td>
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<td>.53**</td>
<td>.73**</td>
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* = p < .05  
** = p < .01
## Results | Multivariate Statistics

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<td>Age</td>
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<td>Income</td>
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<td>PSOM</td>
<td>.24</td>
<td>4.21***</td>
<td>.73</td>
<td>1.37</td>
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<td>Self-esteem</td>
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<td>8.43***</td>
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<td>1.52</td>
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<td>Mindfulness</td>
<td>.16</td>
<td>2.65***</td>
<td>.69</td>
<td>1.44</td>
</tr>
</tbody>
</table>

**Adj. $R^2 = .59$, $F (6,170) = 43.0$**

* = $p < .05$
** = $p < .01$
*** = $p < .001$

DV: Psychological QOL
Discussion and Implications

- All hypotheses are supported.

- Contributes to research in support of the well-being of the LGBT community.

- Support for Bear, Smith & Allen’s (2004) understanding of accepting without judgment mindfulness.

- Supports prior research regarding the positive correlations amongst mindfulness, self-esteem and PSOM.

- We encourage interventions that target improved mindfulness, self-esteem and PSOM to improve psychological QOL in sexual and gender minorities.
Limitations and future research

- Causality cannot be inferred.
- Data collected were self-report.
- Sample is not representative of entire LGBT community.
- We encourage future research to address our limitations by using a random sampling method on an expanded sample, using clinician-administered assessments, and to further explore the relationship of various constructs on mental health in the LGBT community.
Acknowledgments

- Center for Psychosocial Health Research
  - Members & faculty
- Dallas Resource Center
- LGBT communities
Questions
References


