Psychiatr. Pol. 2024; 58(1): 79–93
PL ISSN 0033-2674 (PRINT), ISSN 2391-5854 (ONLINE)
www.psychiatriapolska.pl
DOI: https://doi.org/10.12740/PP/162165

Validation of the Brief Experiential Avoidance Questionnaire (BEAQ) in a representative Polish sample

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Summary

Aim. The study aimed to validate the Brief Experiential Avoidance Questionnaire (BEAQ) in Polish and establish its psychometric properties.

Material and methods. A representative sample of the Polish population (N = 1,216) in terms of gender, age, education, and place of residence participated in the online study. The adaptation was conducted with back translation to preserve fidelity to the original version. Apart from BEAQ, participants filled in questionnaires measuring the levels of depression, cognitive fusion, mindfulness and psychological flexibility.

Results. Confirmatory factor analysis showed that the unidimensional model insufficiently fit the data, similarly to other reports on BEAQ validations. Exploratory factor analysis using oblimin rotation extracted two factors labeled "cognitive-emotional avoidance" and "behavioral avoidance" with internal consistency (α) of 0.78 and 0.74, respectively, and stability over time of $r = 0.79$ and 0.75 in a 21-day test-retest measurement. The subscales demonstrated satisfactory convergent and discriminant validity.

Conclusions. The Polish BEAQ validation demonstrates it is a tool that can be successfully used in research and clinical practice as it provides a reliable measure of experiential avoidance and is convenient thanks to its limited duration.

Key words: BEAQ, experiential avoidance, Polish validation

Introduction

Avoiding pain is a common phenomenon underlying behavior across all sentient animals [1]. Although pain is often viewed as an exclusive aspect of physical experiences, it is also a characteristic of mental experiences marked by specific cognitive and affective processes [2]. While avoiding an external source of pain is an evolutionary-based preservation behavior [3], a rigid tendency to restrict adverse inner experiences has different functions and consequences [4].

Experiential avoidance (EA) is defined as an attitude toward an experience that is perceived as undesired (e.g., emotions, thoughts, memories) and involves attempts to control or escape from it [5]. The short-term function of EA is to reduce the levels of emotional distress and tension; however, long-term EA often leads to opposite results and aggravation of the problem [6, 7]. Frequent acts of EA lead to decreased positive affect, life satisfaction, and meaning in life, and a reduced number of worthwhile events in daily life [8]. A longitudinal study showed that EA predicts the levels of distress, dysthymia, depression, and generalized anxiety disorder [9].

Although there is strong evidence for EA's negative role in well-being, the relevant assessment tools are criticized for lacking clarity and demonstrating poor convergent and discriminant validity [10, 11]. Importantly, the use of vaguely described tools to explore relationships of essential concepts questions the nature and validity of the acquired findings [12]. Thus, research on evaluating theoretical constructs and properties of psychometric measurements is necessary.

Among the few tools commonly used to assess EA are the *Acceptance and Action Questionnaire* (AAQ-II) [13], the *Multidimensional Experiential Avoidance Questionnaire* (MEAQ) [14], and the *Brief Experiential Avoidance Questionnaire* (BEAQ) [15] which is a shortened form of MEAQ, reduced to a single dimension. Although AAQ-II is probably one of the most widely used tools for measuring EA in research, its validity is questionable [16]. It has been demonstrated recently that AAQ-II was overly saturated with neuroticism and negative affect items compared to MEAQ, resulting in suboptimal levels of convergent and discriminant validity [12]. These results are in accordance with another study, showing that AAQ-II correlates stronger with psychological distress than with acceptance/nonacceptance, elements of the EA theoretical framework [11]. Moreover, when comparing the convergent validity of AAQ-II and BEAQ, the former correlated stronger with the *Depression Anxiety Stress scales* (DASS) [17] than with BEAQ [18].

While more studies are needed to redefine our understanding of AAQ-II and its application [16], it is recommended to use BEAQ for measuring EA instead [12, 15, 16, 18]. BEAQ's 15 items were extracted from MEAQ, based on their loadings on a single common factor via exploratory factor analysis (EFA) [15]. BEAQ represents similar psychometric properties to MEAQ and moderate to high correlations with the MEAQ subscales (mean $r = 0.62$) [15]. Although BEAQ originally demonstrated a unidimensional character, two recent studies did not confirm it. In the first one EFA extracted two factors labeled "cognitive avoidance" and "behavioral avoidance" [19]. In the second study it was found a bifactor structure consisting of one general and five specific factors, fit best the data [20]. Thus, further studies are needed to explore the factor structure of this scale and resolve the existing ambiguities.

Language validations of the tool have been published in Spanish [21], German [19], and Chinese [20]. Nonetheless, a Polish validation of the scale is still lacking. Therefore, the present study aimed to translate BEAQ to Polish and evaluate its psychometric properties, along with analyzing its relationship with other clinical psychology tools.

Material and methods

Participants and Procedures

In study 1, 1,322 adults being a representative sample of the Polish population in terms of gender, age, and place of residence participated. The measurements were conducted online by a professional company with a nationwide survey panel, which has a current and valid certificate of the Pollsters' Quality Control Program (PKJPA) confirming the high quality of survey services. Of the total sample, 106 participants were excluded based on two criteria: short response time (lack of reliability) and contradictory answers to reversed items. The answers from 1,216 individuals aged 18–87 (M = 45.72; SD = 15.81) including 662 women (54.4%) aged 18–87 (M = 46; SD = 16.1) and 553 men (45.5%) aged 18–85 (M = 45.4; SD = 15.7) were analyzed.

In study 2, a different cohort consisting of 36 3rd-year psychology students aged 21–30 (M = 22.57; SD = 1.86) were asked to participate in the second phase of the study to assess BEAQ's stability over time. They filled out BEAQ twice to complete the 21-day test-retest procedure. The demographic characteristics of both samples are presented in Table 1.

Informed consent was gathered from all participants and the ethics committee approval was obtained.

Table 1. **Demographic characteristics of the study samples**

Sample characteristics	Study 1		Study 2	
	n	%	n	%
Gender				
Men	553	45.4	6	16.6
Women	662	54.4	30	83.3
Education				
Primary	18	1.5	0	0
Secondary	514	42.27	0	0
Post-secondary	119	9.78	35	97.2
Higher education	565	46.4	1	2.7
Place of residence				
Urban	757	62.3	36	100
Rural	459	37.7	0	0

Measurements

BEAQ

It is a 15-item assessment that was created to measure EA [15]. Participants respond to the statements on a 6-point Likert scale (1: "strongly disagree"; 6: "strongly agree"). The internal consistency of the scale in our study was assessed with Cronbach's alpha and equaled 0.83.

AAQ-II

It is a 7-item tool developed to measure EA and psychological inflexibility [13]. Participants answer on a 7-point Likert scale that ranges between "never true" and "always true". The Polish scale that was used in the study demonstrated internal consistency with a Cronbach's alpha value of 0.94.

The Patient Health Questionnaire (PHQ-9)

It is a brief self-administered tool for screening and assessing depression severity according to the DSM-IV [22]. Respondents rate the statements on a 4-points scale, yielding a score between 0 and 27. According to Polish norms, a score of ≥ 12 indicates clinically significant symptoms [23]. We used the Polish translation of PHQ-9 developed by the MAPI Research Institute (www.phqscreeners.com). Cronbach's alpha for this scale was 0.93 in our study.

The Cognitive Fusion Questionnaire (CFQ)

It is a 7-item universal tool measuring cognitive fusion and was created as an alternative to questionnaires that were embedded in narrowed-down contexts, such as anxiety disorders or youth [24]. The Cronbach's alpha for the reliability of the Polish version was 0.96 in the present study.

The Short Form Mindful Attention Awareness Scale (MAAS-SF)

It is a 5-item version of a tool that was designed to measure mindfulness as a disposition [25]. In our study, Cronbach's alpha was 0.88.

BEAQ Adaptation

Permission to conduct a validation study was obtained from the authors of the original tool [15]. The scale was adapted according to the principles of accurate translation by applying the back translation method. It was translated independently by one of the authors of the article, two Polish clinical psychologists, and a psychiatrist working in English. Each version was discussed in terms of accuracy of the translation and cul-

tural adaptation until reaching a final agreement and approval by the team. The back translation was conducted by a bilingual resident of the UK.

Statistical Analysis

To evaluate the original factor structure of the scale, a confirmatory factor analysis (CFA) was performed using IBM AMOS Statistics 24.0. The maximum likelihood method was used as the estimation method. A model that matched the following criteria was considered satisfying [26]: standardized mean square root of residuals (SRMR) ≤ 0.08; root mean square error of approximation (RMSEA) ≤ 0.08; comparative fit index (CFI) ≥ 0.95; $\chi^2/df < 3$.

Because the statistical matching of the data was insufficient with the univariate model, EFA was applied using principal components analysis with oblimin rotation. The Bartlett sphericity test and the Kaiser-Meyer-Olkin (KMO) statistics were used to assess the correctness of the factor analysis. The data were considered adequate for factor analysis if the Bartlett test was statistically significant and the KMO statistics were ≥ 0.80. The following criteria were used to determine the number of factors: (1) eigenvalues ≥ 1, (2) scree plot, and (3) Velicer's MAP test. The test items with a load value ≥ 0.30 were included in the analysis [27].

The internal consistency of the scale was determined by the Cronbach's alpha internal consistency coefficient. The discriminant power of the test items was determined using the item-scale correlation.

The ceiling and floor effects were examined based on the percentage of participants who obtained the highest or lowest scores. If these proportions were greater than 30%, the effect occurred [28].

Convergent and discriminant validity was determined by the correlation between the BEAQ scores and the AAQ-II, PHQ, CFQ, and MAAS-SF scores. The strength of the correlation was classified as weak (< 0.30), moderate (0.30–0.70), or strong (> 0.70) [29]. All statistical analyses, except for CFA, were performed using IBM SPSS Statistics 25.0. A p-value of < 0.05 was considered statistically significant for all statistical tests.

Finally, a bifactor model from other validation articles [19, 20] was subjected to confirmatory analysis. The Hierarchical Omega (ωH) was used as a measure of reliability. In addition, the explained common variance (ECV) and the percentage of unconfounded correlations (PUC) were calculated as measures to assess the unidimensionality of the analyzed scale [30].

Results

Factor Structure

CFA did not confirm the 1-factor structure of the BEAQ scale since the analyzed model was insufficient in terms of fitting the data ($\chi 2/df = 19.28$; CFI = 0.681; TLI = 0.628, $\chi^2 = 1734.88$; $df = 90$; $p < 0.001$; RMSEA = 0.123; 95% CI: [0.118-0.128]; SRMR = 0.091). Therefore, EFA was applied.

The Bartlett sphericity test was statistically significant ($\chi^2 = 5243.01$; $df = 105$; $p < 0.001$), and the KMO statistic was 0.851, which confirms the validity of the analysis. Based on the criterion of eigenvalue ≥ 1, the analysis identified 4 factors that together explained 58.49% of the variance. The Velicer MAP test identified 2 factors, similar to the scree plot. Therefore, a 2-factor solution was adopted for further analyses. Both factors accounted for 43.89% of the variance in total. Factor 1 was related to cognitive-emotional avoidance and included 8 test items, while factor 2 was related to behavioral avoidance and included 7 items. The factor loading values ranged from 0.44 to 0.79. Item 6 was negatively related to its subscale, requiring further analyses. The results of these analyses are presented in Table 2.

Table 2. **Single factor loadings of the Brief Experiential Avoidance Questionnaire (BEAQ) items and descriptive statistics**

			Factor	
Item content (paraphrased)	M	SD	1	2
1. The key to a good life is never feeling pain	4.59	1.26	0.136	-0.515
2. I'm quick to leave situations that make me uneasy	4.69	1.06	0.096	-0.695
3. I try to put unpleasant memories out of my mind	4.55	1.16	0.050	-0.707
4. I feel disconnected from my emotions	2.82	1.36	0.655	0.248
5. I won't do something unless I absolutely have to	3.48	1.33	0.580	-0.064
6. (R). Fear/anxiety won't stop me from doing important things	2.86	1.27	-0.116	0.443
7. I would give up a lot not to feel bad	4.44	1.29	0.478	-0.344
8. I rarely do things that might upset me	4.21	1.23	-0.198	-0.697
9. It's hard for me to know what I am feeling	3.01	1.38	0.793	0.390
10. I try to put off unpleasant tasks for as long as possible	3.71	1.35	0.600	0.013
11. I go out of my way to avoid uncomfortable situations	4.29	1.19	0.461	-0.471
12. A big goal is to be free from painful emotions	3.92	1.34	0.624	-0.300
13. I work hard to keep out upsetting feelings	3.94	1.30	0.602	-0.318
14. I won't do something if I have doubts	4.14	1.15	0.271	-0.481
15. Pain always leads to suffering	4.19	1.32	0.467	-0.309
% Variance			30.54	13.35

M = mean; SD = standard deviation; (R) = reverse coding

Factor and test-retest reliability

EFA extracted two factors and pointed out ambiguity for item 6. These observations were confirmed by reliability calculations after excluding certain items (Table 3). Previous research on the Spanish [19], German [20] and Chinese [21] validations of the scale also indicated issues with the 6th item, suggesting excluding it from further analyses. Therefore, we propose a 14-item version of BEAQ with two factors: cognitive-emotional avoidance and behavioral avoidance.

Table 3. **Reliability of the factors after exclusion of items and item-scale correlation**

Factor 1				Factor 2		
Item number	Item-scale correlation	Cronbach's alpha if deleted		Item number	Item-scale correlation	Cronbach's alpha if deleted
BEAQ_r4	0.41	0.77		BEAQ_r1	0.39	0.53
BEAQ_r5	0.45	0.77		BEAQ_r2	0.58	0.48
BEAQ_r7	0.48	0.76		BEAQ_r3	0.55	0.49
BEAQ_r9	0.49	0.76		**BEAQ_r6R**	**0.27**	**0.74**
BEAQ_r10	0.42	0.77		BEAQ_r8	0.46	0.55
BEAQ_r12	0.61	0.74		BEAQ_r11	0.45	0.50
BEAQ_r13	0.59	0.74		BEAQ_r14	0.45	0.53
BEAQ_r15	0.45	0.77				

Descriptive statistics of both factors and the general score are presented in Table 4. The factors demonstrated satisfactory internal consistency (> 0.70). Excluding item 6 increased the reliability of the second factor by 0.12 (from 0.62 to 0.74). The discriminatory power of the items ranged from 0.34 to 0.61 (Table 4). The percentage of the participants with extreme scores was < 1.5%, indicating that there was no floor or ceiling effect. The detailed results are presented in Table 4. The 21-day test-retest analyses suggested that the construct is relatively stable over time – for cognitive--emotional avoidance Pearson's $r = 0.79$ ($p < 0.001$) and for behavioral avoidance 0.75 ($p < 0.001$).

Table 4. **Descriptive statistics and reliability of BEAQ's dimensions**

	Cognitive-emotional avoidance	Behavioral avoidance	Total score
Possible score range	8–48	6–36	14-84
Score range	8–48	6–36	20-84
M	29.51	26.46	55.98
SD	6.73	4.68	9.85
Me	30.0	27.0	56.0
IQR	9.0	6.0	12.0

table continued on the next page

Lowest score (Floor)	1 (0.1%)	1 (0.1%)	0 (%)
Highest score (Ceiling)	6 (0.5%)	20 (1.6%)	5 (0.4%)
Reliability (Cronbach's alpha)	0.784	0.740	0.827

M = mean; SD = standard deviation; Me = median; IQR = interquartile range

Convergent and discriminant validity

Table 5 presents the results of the correlation between the BEAQ factors and depression (PHQ-9), psychological inflexibility (AAQ-II), cognitive fusion (CFQ-7), and mindfulness (MAAS-SF). Although the factors correlate moderately and positively with one another, their relationships with other variables differ. Cognitive-emotional avoidance correlates positively and moderately with depression, psychological inflexibility, and cognitive fusion, and negatively and weakly with mindfulness. For behavioral avoidance, there was a negative and weak correlation with all measurements except for mindfulness, with which it correlated positively and weakly. Note that all the correlation coefficients were below 0.20, which is considered negligible. There was a strong relationship between psychological inflexibility and depression. Considering the AAQ-II's issue of oversaturation with negative affect [11] the validity results speak in favor of BEAQ.

Table 5. **Correlations among BEAQ's dimensions and other scales (N = 1,216)**

	CEA (BEAQ)	BA (BEAQ)	BEAQ total score	Depression (PHQ-9)	Cognitive inflexibility (AAQ-II)	Cognitive fusion (CFQ-7)	Mindfulness (MAAS-SF)
CEA (BEAQ)	1	0.48**	0.91**	0.38**	0.44**	0.40**	-0.22**
BA (BEAQ)	0.48**	1	0.80**	-0.11**	-0.11**	-0.11**	0.17**
BEAQ total score	0.91**	0.80**	1	0.32**	0.35**	0.22**	-0.07**
Depression (PHQ-9)	0.38**	-0.11**	0.32**	1	0.69**	0.68**	-0.36**
Cognitive inflexibility (AAQ-II)	0.44**	-0.11**	0.35**	0.69**	1	0.75**	-0.42**
Cognitive fusion (CFQ-7)	0.40**	-0.11**	0.22**	0.68**	0.75**	1	-0.38**
Mindfulness (MAAS-SF)	-0.22**	0.17**	-0.07*	-0.36**	-0.42**	-0.38**	1

** $p < 0.001$

BA – behavioral avoidance; CEA – cognitive-emotional avoidance

Comparison with other models

Figure 1 presents a bifactor model from German validation [20] for one general factor and five specific factors. In the bifactor model, ω_H was 0.018, indicating a low level of reliability. For the particular factors, the reliability values and ECV are given in Table 6. The ECV for the model was 0.164 and for the factors >0.70, indicating that the common variance was higher for the specific factors than for the general factor. The PCU value was 0.83. Thus, it can be assumed that the BEAQ in the 5-factor model is a multivariate model – this solution is better than the 1-factor solution.

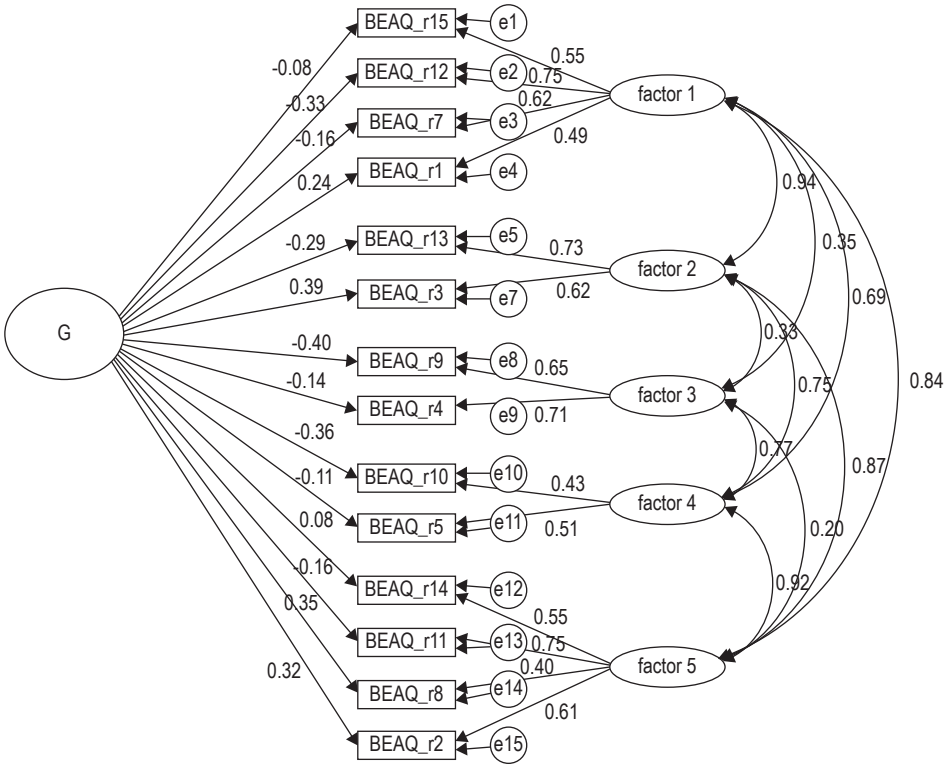

Figure 1. **Factor loadings of the bifactor model derived from the German validation [20]**

Table 6. **Omega and ECV for the model derived from the German validation [20]**

	ECV	Omega/ OmegaS	OmegaH/ OmegaHS
General factor	0.164	-	0.018
Specific factor 1	0.882	0.719	0.706

Specific factor 2	0.795	0.684	0.680
Specific factor 3	0.838	0.706	0.609
Specific factor 4	0.758	0.439	0.351
Specific factor 5	0.845	0.708	0.665

In addition, a bifactor model with one general factor and two specific factors was tested by confirmatory factor analysis (Figure 2). The analysis showed that for the general factor, all factor loadings values were statistically significant ($p < 0.001$). For the first factor in the bifactor model, the factor loading values were no longer significant for items 7, 12, 13 and 15, and were lower for items 5 and 10 than for the general factor. For the second factor, the values of factor loadings remained significant, with 3 items taking higher values than the overall factor (items 2, 3, 8), and the remaining items taking lower values than the overall factor (items 1, 11, 14).

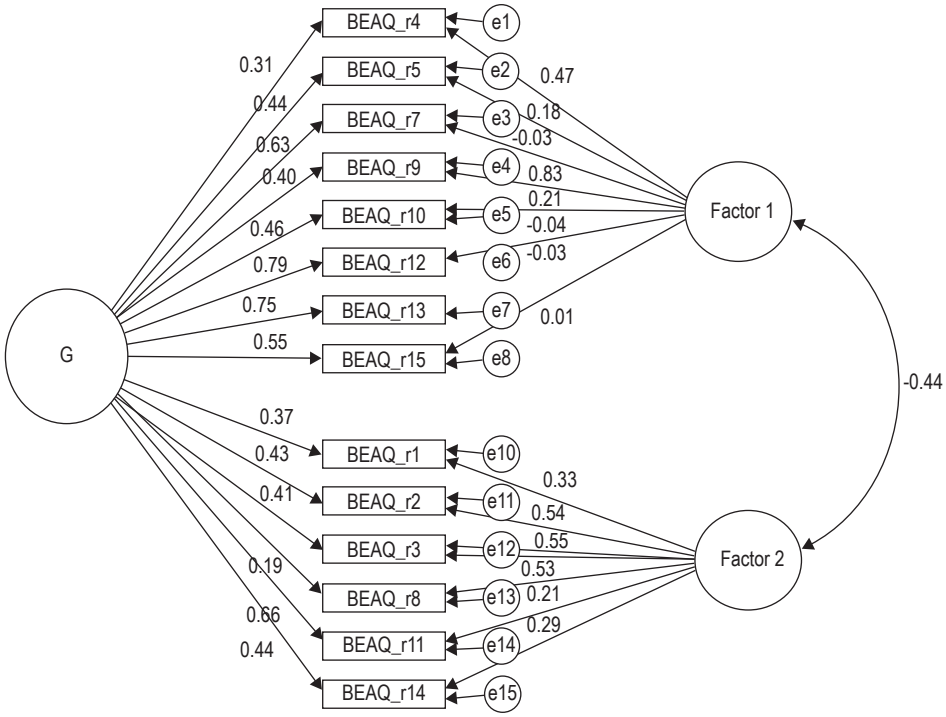

Figure 2. **Factor loadings of the bifactor model derived from the Chinese validation [19]**

The model was not a good enough fit to the data (χ^2/df= 9.34; CFI = 0.897; TLI = 0.848; RMSEA = 0.083; 95% CI: [0.077-0.089]; SRMR = 0.047); nevertheless, it indicates the possibility of creating an overall score for the BEAQ, as the model fit indices were better than for the 2-factor model ($\chi 2/df$= 17.20; CFI = 0.754; TLI = 0.705; RMSEA = 0.115; 95% CI: [0.110-0.122]; SRMR = 0.091). In the bifactor model, ωH was 0.736, indicating a satisfactory level of reliability. ECV was 0.638 and PCU was 0.53, indicating that the presence of multidimensionality construct is not clear enough to disqualify the interpretation of the overall result [31]. Table 7 summarizes the fit indices of the analyzed models.

Table 7. **Summary of the fit indices of CFA models in different variants**

	χ^2/df	CFI	TLI	RMSEA	90% CI RMSEA	SRMR
1-factor	19.28	0.681	0.628	0.123	0.118-0.128	0.091
Chinese validation [19]						
Two-factor model	19.38	0.683	0.626	0.123	0.118-0.128	0.096
Bifactor model (one general and two specific factors)	10.30	0.867	0.811	0.087	0.082-0.093	0.050
German validation [20]						
Five-factor model	13.73	0.830	0.769	0.102	0.096-0.108	0.068
Bifactor model (one general and five specific factors)	7.23	0.934	0.887	0.072	0.065-0.078	0.039

Discussion

The study aimed to evaluate the psychometric properties of the Polish version of BEAQ. Our analyses, designed to determine the optimal factor structure of BEAQ, revealed that the model assuming the two general factors "cognitive-emotional avoidance" and "behavioral avoidance" had an acceptable fit using EFA. After excluding item 6 from the behavioral avoidance factor, both general factors presented acceptable internal consistency and temporal stability in the 21-day test-retest study. The correlation analysis revealed satisfactory convergent and discriminant validity.

Our CFA results did not confirm the unidimensional structure of the scale similarly to other studies evaluating BEAQ's factor structure [19-21], although additional calculations, based on models derived from the aforementioned earlier validations, showed the validity of using the overall score in addition to the specific factors. Cognitive-emotional avoidance positively and moderately correlated with psychological inflexibility, depression, and cognitive fusion. This finding is consistent with theoretical premises [5] and empirical findings [32, 33]. Putting effort to control mental events and suppress or distract oneself from experiencing them intensifies the symptoms of distress and leads to detrimental emotional consequences [7, 8, 32, 34].

Behavioral avoidance correlated weakly and negatively with the rest of the assessed negative mental health outcomes, which at first sight is puzzling. From a statistical per-

spective, such weak relationships should be neglected [35]. Importantly, similar results were reported in recently published research for the relationship between depression and behavioral avoidance measured with BEAQ [19] or MEAQ [36].

Limitations and recommendations

Although the goal of the study was to obtain validation of BEAQ based on a representative sample, the findings of construct validity and associations with other variables cannot be transferred to specific populations. Cross-validation of BEAQ in non-general populations (particularly, in clinical anxiety and depression samples) is needed to extend the understanding of EA across different groups of people.

It is worth noting that not only the tool itself but also the way avoidance is understood and defined provide ample room for further exploration. It is argued that experiential avoidance is a vague idea that blurs the differences between significantly distinct mechanisms such as avoidance and escape [37]. While escaping requires an experience of distress and a behavior reducing its impact, avoidance refers to an action caused by the anticipation of distress.

Furthermore, the results of self-reported questionnaires do not reveal the underlying motivation for avoidance behavior. For instance, while a socially anxious person rejects an invitation to a party because of expectations of social rejection [38], depressed individuals avoid social gatherings because of their anhedonia and lack of energy [39]. Thus, the avoidance score in certain questionnaires may be similar for people with different motivations, and therefore, different emotional consequences.

Conclusions

Despite the aforementioned limitations, the Polish version of the BEAQ scale demonstrated satisfactory psychometric properties of the two extracted factors: "cognitive-emotional avoidance" and "behavioral avoidance". The scale can be used in research and clinical settings for practical application. We recommend, however, using the 14-item BEAQ scale, without item 6 of the original 15-items scale, since it reduces the reliability of the scale, as shown in the present and some previous studies. More research is needed to compare the findings of this study with other specific populations, including individual differences but also making a clear distinction between similar constructs, such as avoidance and escape behaviors, and situation selection strategy.

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