ASCO
Resilience Skills Training Program
Session 5: Living with Your Imperfections
Facilitator Guide
SESSION 5: Living with Your Imperfections

Key points:
- There is a long tradition of perfectionism among clinicians. We strive most of our lives and this momentum and perfectionistic streak is not without its complications. We can turn a judgmental eye toward ourselves and feel shame, anxiety, and anger, when we worry we have been less than perfect.
- Self-compassion begins with kindness and curiosity toward ourselves, our own pain and humanity. Self-Compassion has 3 parts. First, we aim to be kind to ourselves even when we haven’t been at our best, realizing that every person has difficult moments, or moments that fall short of our expectations. Second, we can focus on our connection to others and humanity and remember that we are not the only ones struggling with a sense of inadequacy. Lastly, we return to mindfulness and cultivate an allowing and friendship toward ourselves.
- It is important to remember, that when we move our mind to expand the positive, there will be a backdraft of negative feelings. This is normal, we remind ourselves of the dialectic, and come back to the self-compassion exercise.

Timetable & Talking Points:
00:00 – 00:10 Check-in = What happened when you tried using a mindfulness practice, like washing your hands, or walking, or an app, or just taking a few quite moments? Pairs for 3 minutes, then highlights from the group. Or group discussion if you don’t prefer pairs.

00:10 – 00:20 Mindfulness and Reflect = Add a mindfulness mantra from self-compassion literature: “May I love myself just as I am, May I be truly happy, May I find peace in this uncertain world, May I love and be loved” (Geermer, 2009). You may have noticed as you’ve been working with mindfulness, that at times we can be quite tough on ourselves. How many of you find this? What happens for you? Discuss in pairs for a couple of minutes or group discussion.

00:20 – 00:30 Learn = Living with imperfection is about a concept the psychologists call self-compassion.

Why not have high standards?
- Becoming a terrific clinician will not happen by cutting corners or settling for less. You would not be a clinician in this program if the faculty here had not thought you were headed for anything but excellence.
- There is a long tradition of perfectionism among clinicians. We strive most of our lives and this momentum and perfectionistic streak is not without its complications. We can turn a judgmental eye toward ourselves and feel shame, anxiety, and anger, when we worry we have been less than perfect.
- What’s less well known is that perfectionism can have a dark side. Many clinicians tend to beat themselves up about being less than perfect and can be a little intolerant of imperfection. Think of the way you’ve heard clinicians make pejorative remarks about their colleagues. It’s common, but it tends to isolate us—when in oncology, the work itself, EVEN WHEN YOU DO EVERYTHING PERFECTLY, can be tough.

Shouldn’t I be more compassionate to others before myself?
- Although we’ve entitled this session “Living with your imperfections” the concept in the research literature is called ‘self-compassion’.
- Self-compassion has 3 components:
1. Self-kindness and curiosity rather than self-judgment. Could we be understanding towards ourselves when things haven’t worked out or we’ve failed, rather than be harsh and self-flagellating?

2. Connecting to the human journey: allowing and tolerating being imperfect, like everyone else, rather than feeling like I’m the only one who screws up. Imperfection is part of the human experience, not something you have to deal with alone.

3. Lastly, we return to mindfulness about our feelings rather than suppressing them or distorting them. We’ve talked about mindfulness and cognitive distortions in previous sessions. Today we’re building on those sessions: use mindfulness to notice and sit with your feelings without trying to change them; you can challenge your cognitive distortions if you tend to exaggerate or dwell on the negative.
   - Let’s do a practice: May I love myself just as I am, May I be truly happy, May I find peace in this uncertain world, May I love and be loved.
   - Finally, being more kind to yourself will make it easier for you to have loving kindness or “Metta” for others—your patients, their families, your colleagues.

00:30 – 00:50  **Try** = [Experiential exercise]. A short writing exercise that asks you to listen to the part of you that criticizes yourself, that feels criticized, and finally your compassionate observer. Generate a list of common criticisms and see if members can then respond as a compassionate observer in a group exercise. Give 10 minutes to do the writing part of the exercise, 5 minutes for discussion with a partner, and 5 minutes for discussion with the whole group—ask for insights.

00:50 – 00:55  **Prep** = Learning partners. Find a time to practice self-compassion in the next 2 weeks.

00:55 – 00:60  **Check-out** = “One word”
Additional References
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A TEDx talk about the difference between self-compassion and self-esteem.
  •  https://www.youtube.com/watch?time_continue=3&v=lvtZBUSplr4

Read this article about self-compassion:

More info, pdfs, and exercises are at this website by researcher Kristin Neff:
  •  http://self-compassion.org/

Go back to one of the mindfulness apps:
  •  https://www.headspace.com/
  •  http://www.10percenthappier.com/
In this exercise, you will take different roles to help get in touch with different, often conflicting parts of yourself, experiencing how each aspect feels in the present moment. Think about an issue that often troubles you, and that often elicits harsh self-criticism. In your first role, you will take the voice of your inner self-critic, in your second role as the voice of the part of you that feels judged and criticized, and in your third role as the voice of a wise, compassionate observer. You are going to be role-playing all three parts of yourself – you, you, and you. It may feel a bit silly at first, but you may be surprised at what comes out. You won’t have to share any of this, but you will talk about what it was like with a partner.

1. **Think about your “issue,” and then take the role of the self-critic.** Write a few words about what the self-critical part of you is thinking and feeling. For example, “I hate the fact that you’re such a whimp and aren’t self-assertive.” Notice the words and tone of voice the self-critical part of you uses, and also how it is feeling. Worried, angry, self-righteous, exasperated? Note what your body posture is like. Strong, rigid, upright? What emotions are coming up for you right now?

2. **Now take the role of the criticized part of yourself.** Try to get in touch with how you feel being criticized in this manner. Then write a few words about how you feel, responding directly to your self-critic. For example, “I feel so unsupported.” Just write a few words about whatever comes into your mind. Again, notice the tone of your voice. Is it sad, discouraged, childlike, scared, helpless? What is your body posture like? Are you slumped, downward facing, frowning? Go back to add a few words to the self-critic, or here to your criticized self if they come up.

3. **Now take the role of your compassionate observer.** Call upon your deepest wisdom, the wells of your caring concern, and address both the critic and the criticized. What does your compassionate self say to the critic, what insight does it have? For example, “It must be incredibly difficult to hear such harsh judgment day after day.” Try to relax, letting your heart soften and open. What words of compassion naturally spring forth? What is the tone of your voice? Tender, gentle, warm? What is your body posture like – balanced, centered, relaxed?

4. **When you’ve finished, reflect upon what just happened, and discuss it with a partner.** You don’t have to show your partner anything that you wrote. Do you have any new insights into how you could treat yourself, where your patterns come from, new ways of thinking about the situation that are more productive and supportive?

As you think about what you have learned, set your intention to relate to yourself in a kinder, healthier way in the future. A truce can be called in your inner war. Peace is possible. Your old habits of self-criticism
don’t need to rule you forever. What you need to do is listen to the voice that’s already there, even if a bit hidden – your wise, compassionate self.

Write a couple of new ways you’d like to treat yourself below:

I’d like to ________________________________________________________________.

I’d like to ________________________________________________________________.

I’d like to ________________________________________________________________.

I’d like to ________________________________________________________________.