



SELF-COMPASSION: TREATING YOURSELF KINDLY

GUEST: MICHELE GASPAR, DVM, DABVP, LCPC

Colleen Pelar: [00:00:00] Hi, welcome back to UNLEASHED (at work & home). Super excited. My guest today is Michelle Gaspar who does a little bit of everything. I asked her how to introduce herself and she said that – “I do a little bit of everything.” She's a veterinarian. She's also a psychotherapist. So, those don't seem like they go together and yet, as we know, that would be a lovely combination to have all in one person. So, welcome Michelle. Thanks so much for joining me today.

Michele Gaspar: And it's wonderful to be here. Thank you so much for having me.

Colleen Pelar: Can you tell me a little bit about that? How you went from being a veterinarian to exploring some of these other interests?

Michele Gaspar: Certainly. Certainly. So, as a veterinarian, I actually had a career before veterinary medicine. So, my first career was as a reporter with the Chicago Tribune. So, I have an undergraduate degree in journalism, and [00:01:00] then I got to a point where there was something else tugging on my heart and that was veterinary medicine. And so, I pursued veterinary medicine. It was pretty clear in talking to colleagues and certainly then becoming involved as a consultant in feline internal medicine on the Veterinary Information Network that many of my colleagues were suffering from depression, anxiety, imposter syndrome. They just weren't happy, and I have always been interested in psychology. My father was a very... he was a very involved reader in psychology, so Freud and Jung were always in the house. And I decided that I wanted to know a little bit more about mental health issues, psychology, always with the intention of helping veterinarians. [00:02:00] So, I attended graduate school; I have a Masters' from Loyola Chicago and have now a private psychotherapy practice.

The bulk of my work is in writing, lecturing, in trying to move... I think a better understanding... a broader understanding of mental health issues as they impact veterinarians, veterinary staff, and other support personnel.

Colleen Pelar: Yeah, it's a big issue and it's something that until I started exploring. I had no idea how common it was and how profoundly it really affects people.

Michele Gaspar: Absolutely.

Colleen Pelar: So, the topic I really wanted to explore with you today is self-compassion. And I think that is one that people really struggle with so, can you just start with, like what's our textbook definition of self-compassion?

Michele Gaspar: [00:03:00] The self-compassion definition that I like and use the most is actually the definition by Dr. Kristin Neff. Dr. Neff is at the University of Texas Austin. She's considered to be probably the world's top researcher in the area of self-compassion and she defines self-compassion as being able to treat ourselves as our best friends would when times are tough. And so, that tenderness, that warmth, that ability to hold feelings that our best friends would when we're most vulnerable is the same as self-compassion and that's showing us, ourselves tenderness.

Colleen Pelar: Yeah, and I think it's fascinating that we do talk to ourselves so differently than we would talk [00:04:00] to our best friend at times, and it's a fascinating thing that we gravitate toward that. So many people believe like I have to be tough on myself or else... well, you know, I won't achieve, and I won't do, but all of the research really shows that the more compassionate we are to ourselves, the more we achieve and do, and the success actually follows self-compassion as opposed to self-criticism, which seems to be what we're good at.

Michele Gaspar: Absolutely, and you know self-compassion and when you and I were speaking about this program, I know I wrote that I also wanted to talk about perfectionism because I think what you so eloquently stated is really the crux of the problem. Most people who go into the healthcare professions ...and I think veterinarians and veterinary technicians have this in spades... is they are perfectionists. And there's been a [00:05:00] tremendous amount of work over the last 30 years that has been done in the area of perfectionism. Perfectionism is considered to be what's referred to by psychologists as an early maladaptive schema or an EMS. And these early maladaptive schemas, and there are scores of them, are placed into our heads if you were to say, by the time we're about five years old, and they usually come into our consciousness by either the words or the actions of our earliest caregivers. So, parents, extended family members, teachers. And perfectionism comes from one of two ways of thinking about ourselves – either we consider ourselves to be defective, and so, we're constantly trying to prove that we are not defective, or we have been [00:06:00] congratulated for being a good girl and boy, and we desire in our adult lives to keep hearing that praise.

The problem with perfectionism is that not only are we attuned to external criticism, so, when people bring up our shortcomings, we definitely take offense and we're hurt. But perfectionists are under the thumb of a vicious internal critic and the vicious internal critic

says you can never do enough. You can never be good. You are always a failure. And so, it's the internal critic that desperately needs to be tamped down by self-compassion, which says none of us are perfect. We are all human. We all make errors. The biggest push back that I received from veterinarians when I talk about perfectionism is they say, you know, "If I don't strive to be [00:07:00] perfect, my patients will die." And one thing about perfectionism is that they lack a gray area. No one who has gone to veterinary school that certainly I know of is going to just take the path of least resistance. We desperately want to fix our patients. We want to make them feel better. We want to reduce client grief over patient illness and death.

And it's actually been proved that perfectionists rather than make fewer medical errors, perfectionists actually make more medical errors. And that's because a perfectionist is always hyper-vigilant, and loses the sense of the large picture. And when we're hyper-vigilant, when our adrenaline is at full tilt, we fall into the trap [00:08:00] of not being aware of what's taking place in the moment around us. And that's when medical decisions can be made incorrectly. Colleen Pelar: Yeah.

Michele Gaspar: So, the two go together; the antidote for perfectionism is self-compassion.

Colleen Pelar: And it's fascinating how it really changes things because I certainly have some perfectionist tendencies, and all the things you were saying about the early maladaptive schema, it is those early messages that somehow, you know, you got to measure up, you got to measure up. And we internalize them, and we carry them forward and we're always struggling against these schemes that nobody else is really measuring us by and yet...

Michele Gaspar: Except ourselves. And you know, I used to concur with the thought that many psychologists had that perfectionism did [00:09:00] carry with it some benefits. So, perfectionists tend to do well in school. They tend to do well on the job. So, there are perks of being a perfectionist, but the work done by Dr. Paul Hewitt at the University of British Columbia has basically proven that perfectionism has very little going forward. As matter of fact, perfectionism drives depression, anxiety, suicidal ideation, even suicide and hopelessness. And so, we all need to realize that there is no perfection in this world. It is an imperfect world and we're imperfect people who are only trying to do their best. And I definitely believe that veterinarians and veterinary technicians support staff every day try to make the world a better place.

I want to just briefly say that I'm also involved as part of my work... I'm [00:10:00] involved in a mindfulness meditation group for veterinarians and veterinary support staff that is on the Veterinary Information Network. And we have a couple sayings in the group. And the first is that we can only do what time and resources allow, and I think that's very important

for us particularly in veterinary medicine. You know clients have legitimate financial concerns. Sometimes they come with histories and back stories that we don't know. Sometimes our own... we, you know... we have a hard time thinking about this, but sometimes we're limited too. You know, we don't have a knowledge base that we need. Our hospitals can't afford the equipment that would you know provide a level of care. So, we have to do what time and resources allow. And when we can get clear with that, when we can accept it and still say no matter what [00:11:00] the challenges are, I'm just going to try to do the best I can do on any given day, you know, we're well ahead of the curve and that's self-compassion in action.

Colleen Pelar: Yeah. So, what are some initial steps you encourage people to do when they're trying to get into that mindset? Like, how do you help them move there?

Michele Gaspar: I think... I think the biggest issue is to be unkind... to be comfortable with our discomfort and you know, it takes a lot of self... it takes a lot of self-awareness to be able to listen to our thoughts and say, you know, that's my internal critic. That internal critic was my mother, my father, my grandmother, my aunt, my sister, my brother, you know. Somebody put that put that into my head and I'm just reacting to it. So, I think veterinarians, and veterinary staff, we tend not [00:12:00] to want to avail ourselves to mental health counseling. We think we can kind of white-knuckle it by ourselves. But if we find ourselves, you know really in the throes of perfectionism and we... we're beating up ourselves, we realize there's a pattern. I think it behooves us to make ourselves better caregivers by taking care of ourselves. I think having... I think having a meditation practice definitely helps.

What meditation allows us to do is basically tolerate our thoughts. So, meditation over time allows us to have distressed tolerance. So, our thoughts are only thoughts. They carry no weight except the weight that we give them and by a daily meditation practice which you know a lot of us as westerners push back, you know, we want to be able to eat [00:13:00] mindfully, run mindfully, walk mindfully, work mindfully, but we don't often want to do the hard work of just sitting quietly 10-20 minutes, and just having the thoughts come and go.

And then the third is to be able to call up to ourselves times when a good friend was tender to us, you know, and a good friend doesn't collude with us. So, if we really do something that's egregious, that's you know, beyond the pale, good friend is going to... is not going to say, "Oh, that's okay. You know, that's alright; just kind of let it slide." They're going to be appropriately challenging, but in a way that's not judgmental. And perfectionists live under a constant threat of being judged and being judged to be inadequate.

Colleen Pelar: Yeah, and that all goes back to our like social connection piece [00:14:00] of... if they see that I'm imperfect and they'll discover I'm an imposter and I really don't

deserve this, you know, credit that everyone's giving me, and everyone will hate me. And none of that's realistic and yet, that's what the saboteur in your head is busy radiating in those moments. I think the idea of meditation helping us tolerate our thoughts and become more aware of them is really fascinating. Somebody once said to me that our goal is to learn to notice, name, and navigate our emotions, and you have to sort of start with noticing like we're often hooked, and we get swept away before we know it.

And I was at a conference recently and I started with the story where I had, you know, just this crazy, terrible 48-hour period and it ended with a flat tire and I standing outside my car looking at it and going, "Huh...meditation [00:15:00] works," because I was not sobbing in the parking lot and it's like oh that's what it is. It gave me a little bit of distance from this spot of all of the stress and all of the strain and then one more thing and I was just curious like, oh wow, the entire day is changed, but I can handle that. And that was not my past; my past would have been crying in the parking lot.

Michele Gaspar: Yes, and you know, the feeling I think... the misconception about meditation is that over time, we don't feel and that's incorrect. What we do is... we do feel, but we don't get hooked by the feeling and most of us go through life being very reactive. So, you know, a client comes in angry, and we're immediately hooked by that anger where over time with a meditation practice, and we [00:16:00] use a secular contemplative practice, so, we don't...we don't teach a spiritual tradition. Over time., you can you can hear the anger, but you're not sucked in by it. And so, you have less of a tendency to get into, you know, these spirals that we hear that take place in exam rooms between either the veterinary technician, or the veterinarian and the client and it just doesn't go anywhere. That's helpful.

Colleen Pelar: Right. Right. And we don't even see those things right as they're starting until we take some time and practice it and figure out, what are those signs? What are the things here in this environment? So, are there any downsides to self-compassion? I certainly can't think of any, but can you?

Michele Gaspar: No, there are no downsides to self-compassion. The only the only downside comes when we confuse self-compassion with collusion and [00:17:00] basically... colluding with ourselves. You know, what self-compassion demands is that it demands a truthfulness, you know, owning up to something that did not go well and really just sitting with it. So, I think for people who confuse self-compassion with collusion, there is a huge downside because you know, we then begin to believe our own misconceptions of what happened. But self-compassion can only help us be more genuine, more open, more vulnerable, and who doesn't want that in a healthcare provider?

Colleen Pelar: Yes. Yeah, and if we add in all the other pieces of... you'll be happier at work, you'll make better decision, you'll be [00:18:00] more productive. It's a win, win, win, win, win.

Michele Gaspar: Indeed.

Colleen Pelar: So, if we're looking at self-compassion and we have that whole struggle of well, you know, lives depend on me being perfect, how do we become a little bit more comfortable with that gray area... the idea of doing what time and resources allow? Are there beginning steps that you can encourage people to think about, or what are the initial thoughts to lean into that?

Michele Gaspar: And I love the concept of leaning in because that's I think where we really do forge connections and relationships when, you know, that we have to have good boundaries, but we also have to be willing to lean into what's presented. So, I think [00:19:00] many veterinarians and veterinary support staff suffer because they have an idea in their head about what needs to be done. That thought pattern bumps up against what might be the client's reality. So, I think to be curious about where the client is coming from, to try to have a broader view of a back story that we don't know, you know. And oftentimes, and I've heard this on social media over the last couple of weeks, sometimes we think well, you know, they drive such and such cars; usually a, you know, pretty exotic late model; they should want to spend "x" amount of money. We don't know the backstory and so we start creating our own stories in our heads which may or may not be accurate. So, to take the first step is [00:20:00] just not to create a story, to listen to what the client presents, and to realize that we are basically there to evaluate, assess, and make recommendations.

When I've said that, and I've had colleagues put that into practice, they say their stress level reduces about 70-80%...

Colleen Pelar: Awesome!

Michele Gaspar:because we think we have to fix. We think we have to have the magic bullet. We think we have to do this and so and all we have to do as physicians. as veterinarians is to see what's in front of us, put it all together in a picture that the client can understand, and make recommendations, and really put the ball in their court. I think most veterinarians and technicians suffer because somehow, they [00:21:00] feel that they either haven't done a good job explaining things, or they haven't done a good job with recommendations. There's always a failure component of it. As a veterinarian when I did have a clinical practice, my stress level reduced considerably when I was able to do what I was what I was trained to do and put it in the clients' hands.

And yes, you know, there's quite a bit of information now about, you know, moral distress among veterinarians and veterinary technicians. The Boston Globe just ran a story two days ago that was picked up by national media, but our moral distress I think stems from having a need and a desire to control outcomes. And that has been a very long, hard road for many of us to accept that we have less control over [00:22:00] situations than we think, and much suffering to us comes from the thought that somehow, we can control it.

Colleen Pelar: Which is so true. I mean just that the idea being that the suffering isn't the problem that the animal is experiencing but our thoughts about that problem and where our role plays into it.

Michele Gaspar: Right and you know, that's the core of... So, on the Veterinary Information Network, in the meditation group we practice mindfulness meditation, and mindfulness meditation comes from Siddhartha Gautama, the Buddha who lived about 2,500 years ago. And you know, he said that you know, our suffering comes from four places, you know, we either have delusion, we have greed, and I'll go back to that in a minute. We don't like what we have. And [00:23:00] we want what we don't have. And so, you know, the delusion could be 'I can control this situation. I have the power to control it.' And the greed is about what we want to have happen, which may be undoable, you know to the to the client. Might have, you know, might be more expensive than they can legitimately afford and so it just might not happen. So, I think those are all things to, you know, to keep in mind.

Colleen Pelar: I like that break down; just looking at it from those different perspectives and really trying to just accept, you know, the role is to listen, evaluate, assess, and make recommendations. That's doable. That's within the skill set. That is very, very valuable. I mean it is [00:24:00] doing a service. So, it's not like you're dropping the ball.

Michele Gaspar: Absolutely not. Absolutely not. You know, as doctors that... that is our job. "Tell me what is wrong and tell me what I can do about it. And it's up to me to decide what I can or can't do." So, by incorporating those kinds of thoughts, it does reduce stress; it reduces compassion fatigue; reduces anxiety, depression. We need to be able to be okay, and I know it's very difficult. I been on both sides of the exam table, so I know how it is to be a client. I know how it is to be a veterinarian. But I think we have to realize that the client is ultimately in control. And for most of us, that's a thought that doesn't sit well. [00:25:00]

Colleen Pelar: I think that's true. I think for many animal care professionals; the goal is to make it right. Very, very true. I think this has been a really awesome conversation with a lot of very specific ideas that people can think about in their own lives and see how they play

out. If people wanted to learn more about you and the work you do, how could they do that?

Michele Gaspar: Well, there are a couple of ways of getting in touch with me. The easiest is to email me and my veterinary email is pretty easy. It's "FelineDoc@SBCGlobal.net". I can also be reached at the Veterinary Information Network, so www.vin.com. And I get around to conferences and meetings. And if anyone wants to reach out, I would love to talk with them. This is a... I think it's a very important [00:26:00] concept. You know, my goal is to kind of move the needle off the well-worn, 'We're just suffering.' We have a great privilege in veterinary medicine. It's really made an impact not only in the lives of animals, but in the lives of people too, and I think a lot of the reason why we are seeing very reactive clients in our hospitals, is that as a society and as a culture we simply have lost many of what used to be daily occurrences where we just rub shoulders with one another. So, you know, we can order our groceries online. We can order our movies from Netflix. We don't have to really engage with people and there's a real hunger that we... that we can still provide because, you know, until we really go to telemedicine, people still have to bring their companion animals to us [00:27:00] and some of the most heartfelt memories that I have in my life in clinical practice was in connecting to people and making their days a little better.

That is what we have control about. You know, I tell veterinarians that you know, all we can control is what we say and how we say it. And how people take it. We really have no control over that. So, I think we have the privilege to relieve suffering. I think we have the privilege of being kind. I think we have the privilege of being responsible and caring, and there are very, very few ways of livelihood in this world that offer that much.

Colleen Pelar: Yeah, I think that was beautifully stated. So, thank you for that. I think that was awesome. I will put links in the show notes to the various emails [00:28:00] that you shared and so all of that will be there. So, thank you so much for joining me on UNLEASHED (at work & home) today. I really enjoyed talking with you.

Michele Gaspar: Well, it was a it was an absolute pleasure. Thank you so much.

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