

Finding perspective in

# TOUGH situations

POCKET GUIDE

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ELIZABETH CASSON TRUST





# Finding perspective in **TOUGH** situations

Welcome to Finding Perspective in Tough Situations. One of a series of pocket guides created to support the wellbeing of occupational therapists in their first year of practice.

Year One: Thriving not Surviving is a grass roots initiative. Over the course of several months, we engaged with many occupational therapists in their first year of practice and asked a core question, “How has the first year of practice impacted on your wellbeing?” The answers have informed the pocket guide that you are now reading.

As an occupational therapist you will already have a range of excellent tools that you can use to support you. Think of this as an addition to your toolbox. A kind voice that reminds you to, ‘Stop for a moment and take some time to focus on yourself because your wellbeing is important’. It is designed to not only make you stop and think but, as importantly take action. All of the guides are designed so that you can dip in and out and pick the tools which resonate most with you.

The tools are designed to support your wellbeing but are not a replacement for specialist support if you are experiencing significant challenges to your mental health. If this is the case, you are advised strongly to seek support via your GP or through your occupational health department.

By reading the insights of other newly qualified occupational therapists we hope that you get a sense that others are having similar experiences. You are not alone. You are part of a community finding its feet and sense of identity, a process which can feel a bit like being on a roller coaster but ultimately is a great ride.

# Introduction

As an Occupational Therapist you will be very familiar with the concept of reflective practice: a core skill to support your continuing development. This pocket guide is designed to encourage you to become more reflective about the way you think about, interpret and respond to situations. To take time to understand some of the ways in which your interpretations influence your experiences and how reflection can help to broaden your perspective.

The following quotes summarise this perfectly.

*Between stimulus and response there is a space. In that space is our power to choose our response. In our response lies our growth and our freedom.* Viktor Frankl

*'While you can't control your experiences, you can control your explanations.'*  
Martin Seligman

The important things to emphasise in these quotes are the 'space' described by Frankl and the agency we have over our response described by both.

When we become more mindful about how we interpret situations we see that there is more than one perspective to explore. The more we develop our curiosity about different interpretations the more we develop our mental agility by asking questions like:

**'Where's the evidence?'**

**'What does it look like from different perspective?'**

**'What is the underlying belief here?'**

The quotes point to a thread which runs through this pocket guide. To work to increase your awareness of how, over time, you will have developed certain ways of thinking or responding which may not always be helpful. It is easy to slip straight into problem solving mode or to internalise, what, at the time, may feel like harsh criticism or negative self-judgement.

In his book S.U.M.O. (Shut Up and Move On) Paul McGee talks about the need to take responsibility for your thinking and develop your understanding and awareness of other people's world. The 'Shut up' refers to quietening the noise in your head and taking time to reflect and listen to yourself and the 'Move on' speaks to exploring the possibilities and taking action rather than going round in circles and dwelling on something.

# Imposter Syndrome

'I haven't a clue what I'm doing and I'm about to be found out.'

'It was a marking mistake in my finals, I should have failed.'

'If I open my mouth they will see me for the fraud that I am'

If you've experienced this kind of self-talk then you are probably already acquainted with the concept of imposter syndrome: the feeling of being a fraud who is about to be found out.

Imposter syndrome was first described by Clance and Imes (1978) who identified that high achieving women often felt that their success was due to chance or luck rather than their own efforts. Their work has subsequently been replicated across age, race and gender demonstrating how common this feeling is.

It was voiced many times throughout the Year 1 project:

*I need to keep reminding myself - I can't know everything now. The most evidenced OT's don't know everything either.*

*There are times when I think someone is going to ask if I really did pass my finals!*

An important distinction to understand is the difference between **questioning yourself and questioning your skills and knowledge**. Feeling that you have a lot to learn is an uncomfortable feeling but is different to feeling you're a fraud and don't deserve the title of Occupational Therapist.

If you type imposter syndrome into a search engine and

you will come up with over six million hits. However, the thing which is strange about this syndrome is that, whilst it's a common experience felt by most people at some point in their life, it is something that we have a tendency to keep quiet about. To feel that we are the only one feeling this way.

Feeling like an imposter can be fuelled also by comparing yourself with colleagues. You look at someone else and they appear to be flying through the same situation with ease, brimming with confidence and full of expertise.

Remember, such comparisons are subjective and based on a comparison between what you are feeling and what you are observing and guessing about someone else. You don't know how hard that person is working, how challenging or difficult they are finding what they are doing. They could well be thinking the same about you.

It's also so easy when you are starting out in your career to make inappropriate comparisons:

*The OT I'm working with is amazing and has been practising for some time. I need to give myself time and remind myself of that and not constantly compare.*

As a newly qualified practitioner you are surrounded by people who have a different skill set and level of expertise and that is exactly how it should be. It would be scary if that weren't the case.

Here are some tips on how to challenge those imposter feelings.

1.	One of the most common pieces of advice is to share how you are feeling with other people. Maybe it's something to take to supervision or share with a colleague or peer. It is highly likely they will have had moments of feeling the same and can support you and give you the reassurance you need to reduce the feelings of self-doubt.
2.	Start to recognise the situations that evoke your imposter syndrome.  When does it crop up the most?  What practical steps can you take to change how you feel in these situations?  Maybe it flags up a situation where you need to ask for more support or training?
3.	In the pocket guide on Becoming Your Own Cheerleader we explored the idea of creating a smile file - a place where you can keep positive feedback you receive. As your file develops over time dive into it when you have moment of self-doubt.
4	Check out some of the exercise in the Pocket Guide to Quietening Your Inner Critic.

# Thinking Traps

Thinking traps, or cognitive distortions, are trains of thought which reinforce negative thinking. They refer to the way in which you interpret a situation without stopping to reflect on whether your interpretation is true.

Here are some example of thinking traps that it is easy to fall into.

MIND READING	
Expecting someone to know what you're thinking or assuming you know what they are thinking	Surely they can see that I'm struggling. I don't need to say anything They think I'm really stupid and are wondering why they offered me a job
ME TRAP	
I'm the sole cause of every problem. It's all my fault	This client isn't making any progress because my treatment plan isn't right
THEM TRAP	
Others are the cause of every problem	If they'd given me the right information in the first place it would have been OK.
CATASTROPHISING	
Automatically going to the worse case scenario	If I don't get this right the patient is going to fall, die, complain (insert what ever word you want)
HELPLESSNESS	
I have no control over this situation	I'm just going to have to suck it up, put my head down and get on with it.
FORTUNE TELLING	
Predicting the worst outcome	I know I'm going to get this wrong
FILTERING	
Only paying attention to the negative aspects of a situation and ignoring the positive	Well, that was a total disaster!
EMOTIONAL REASONING	
However your feeling you believe to be true irrespective of the evidence	He may have said I'm doing really well and he's really pleased with my progress but I know he was just being kind.

The pocket guide to Quietening Your Inner Critic focuses on noticing when you are listening to your inner critic and challenging what you were telling yourself. The approach with thinking traps is similar, to start to recognise when you are falling into them and explore and challenge your thinking.

Do any of the above thinking traps feel familiar? If so pick one to work with.

Describe a situation when you have fallen into using it

Ask yourself, 'how else can I view this situation' and jot down the different perspectives.

How has this influenced how you feel about the situation?

# Looking Through a Reverse Lens

Moving into clinical teams brings its own challenges especially when they are multi-disciplinary and people are working from different frames of reference and with different priorities and pressures.

This can be a hard world to navigate especially as the newest member of the team with potentially the least authority or influence. On occasions you may find yourself in a challenging inter-personal situation. You may be asked to do something that you don't agree with or, given the choice, would approach differently.

It is easy to get stuck in a train of thought about the rights and wrongs of a situation which is not a great place to be and doesn't really help you move forward. It can also have a negative impact on your relationship with that person which doesn't help future interactions or team dynamics.

Looking through a reverse lens is an exercise which encourages you to step back for a moment and explore the situation from the other person's point of view.

Think of a situation where you have disagreed with something someone has said or asked you to do and jot it down.

1.	How is the other person in this situation seeing it and how might they be right?
2.	How can I learn and grow from this situation
3.	How am I likely to view this situation in 6 months time?

# Dealing with 'constructive' feedback

As a first year practitioner you will be on the receiving end of feedback from your supervisor and other members of the team. When it's positive the day ends on a high and your spirits lift. Wouldn't it be wonderful if it was like that all the time? However, as you know, feedback also comes under the heading of 'constructive'.

Constructive feedback can shake your self-confidence and self-belief. It can also fuel your inner critic and lead you down a spiral of self-critical thinking. It can feel most harsh which it conflicts with how we see ourselves or the values we hold dear.

In the introduction, we talked about pausing before responding or reacting and we want to explore this further in the context of feedback you experience as negative. 'Experience' is a key word to reflect upon here because, as suggested by Tara Mohr, 'Feedback is emotionally neutral' it is our interpretation of it that makes it emotive.

Here are some suggestions which may be helpful.

1.	None of us enjoy being on the receiving end of what we perceive to be negative feedback. Treat yourself with compassion, this is a moment of hurt. Acknowledged what you're feeling (you will find more on this in the Pocket Guide to Self-compassion).
2.	Ask yourself, 'What do I need right now?'. It may be a bit of time out to compose yourself, a treat, or to share what's been said with a friend or colleague.
3.	Remember to bring some perspective to the situation, you are hearing one person's opinion.
4.	Assume that the feedback is being given with good intentions not designed to be hurtful.
5.	Ask yourself, 'Can I use the situation to clarify expectations and understand my role better?'
6.	Remind yourself of the positives about yourself.

As well of constructive feedback designed to support your personal development you may also receive such feedback about the way your clinical skills. Teams and senior colleagues have developed their own approaches to working over time and what you are being told may well tell you more about them than it does about yourself.

You can use the following exercise if you find yourself in one of those situations.

Describe a situation when you received negative feedback. What was the feedback you received and from whom?

What might this tell you about the person giving you the feedback and their perspective?

What might this tell you about what you need to do to work more effectively with that person?

# Reframing

Have you ever had the experience of going for a walk in one direction, turning round and walking back the way you came and seeing different things? The change of direction opens up a different view.

Fundamentally this is what is involved in reframing: exploring a situation in a different way. Understanding that the frame you choose to look through will impact on how you feel and respond to the situation and what you do next.

Reframing can be used in any situation where you feel stuck or confused as a way of helping you explore different options and alternative ways of thinking about something before taking action.

Describe a situation where you may feel stuck or confused about what to do.

Firstly, look at from your current perspective and ask yourself the following questions.

What assumptions am I making?

What perspective am I taking?

What assumptions am I assuming other people are making?

Write them down.

How else could I look at this situation, what other meaning could I give it?

How might someone else look at this

What could I learn?

How might these different perspectives help me move forward?



# Asking for help

As you make the transition from student to therapist you've moved from an environment where asking for help and explanations probably felt fine. As a student that is what you are meant to do: 'I don't understand, please can you explain? I'm not sure how to do this can you show me?'

Somehow, that can feel very different when you move into a clinical context. You are now qualified and surely should know what to do? The thought of asking for help comes laden with all kinds of negative emotions and concerns about the kinds of judgements other people may be making about you.

*'I have to keep reminding myself I'm newly qualified and it's OK to still be finding my feet.'*

*'I do not need to know it all even though I think I should! It's more than OK to ask. Everyone has to ask for support at some point don't they?'*

*'Learning doesn't stop when you graduate. OT is so diverse you will continue to learn and develop. Don't be put off when you don't know something or feel nervous. This is just an opportunity to fill your OT toolbox. Keep going and celebrate achievements, big or small.'*

It serves no one if you are needing help but keep quiet about it and it will undoubtedly have a negative impact on your well-being.

If you are feeling reticent about asking for help the following exercise is worth exploring.

Think of an instance when you have been concerned about asking for help.

What is the underlying belief that is making you feel reticent?

Challenge that with a different perspective. What are different ways of looking at this?

How does it feel from those perspectives?

How are you going to action this request for help - what are you going to do about it?

# Asking for help

Some of the NQOT's we spoke to shared their experience of asking for support to accommodate special needs they may have or personal information they may want to share.

*'Personally, I love a challenge, and year one has been full of them! I've enjoyed sharing these challenges with my new colleagues and peers from uni; discussions as a team have always helped me work things through. The secret thing that I found most challenging about year one however was being worried about how my own mental health and well-being would be affected in my new role.'*

*'Having my own mental health conditions isn't something I tend to disclose. I worry it will impact people's opinion about how capable I am to do my job. But this defensiveness means it's a challenge I face alone. Working in mental health I am the first person to say it is so important to be open and honest about what you're experiencing in order to make sure you have access to any support you may need. But I'm not the best at taking my own advice!'*

*'Eventually, due to how lovely my new team were, I felt comfortable enough to talk about it. I was so impressed with how many resources I learned were available to support me! It also opened a door for me to be a part of a new 'lived experience' strategy put in place by my trust, finding out about the experience of staff members with lived experience of mental health conditions.'*

This level of disclosure is not something to provide generic advice about because it is personal and dependent upon the context each person is working in.

It brings to the fore the importance of trust you place in your colleagues and does, as the extract above illustrates, have the potential to open access to a range of support mechanisms which could otherwise be unavailable.

If this applies to you this may be one of those situations where you use the exercise above to help you work through different perspectives and options.

# Reflection

This page had been included so that you can use it in your CPD File to evidence your learning

Date:	Impact on my practice
Description of what you have done	
	Follow-up actions or further development.
Summary of my main learning points	
Relevance to my practice	

## References

Clance, P.R., & Imes, S.A. (1978). The Impostor Phenomenon in High Achieving Women: Dynamics and Therapeutic Interventions. *Psychotherapy: Theory Research and Practice*, 15, 241-247. [http://www.paulineroseclance.com/pdf/ip\\_high\\_achieving\\_women.pdf](http://www.paulineroseclance.com/pdf/ip_high_achieving_women.pdf)

## Resources to Explore

There is a wealth of resources available on the internet to support well-being. Here are just a few that you might wish to explore further. They have been chosen because they are varied in their approach to well-being.

### **Becoming Who You Are**

Hannah Braime is a creative coach who blogs about self-care and personal growth and has developed a range of resources which can be downloaded or purchased through her website. [www.becomingwhoyouare.net](http://www.becomingwhoyouare.net)

### **Brené Brown**

Brené Brown is a research professor at the University of Houston. She has spent two decades studying courage, vulnerability, shame, and empathy and is an internationally renowned author and speaker. Her website contains a wide range of resources including podcasts, blogs, downloads and guides. <https://brenbrown.com>

### **Jen Gash**

Jen Gash is an occupational therapist and personal coach and her website contains information about coaching, a series of blog posts related to personal development and links to other occupational therapists working as personal coaches <https://otcoach.com/about-us/>

### **Lynne Goodacre**

Lynne Goodacre is an occupational therapist and personal coach who blogs on a regular basis on topics related to personal development and well-being. She has created a mini-series of free eBooks which can be downloaded from her site. [www.lgpersonaldevelopment.co.uk](http://www.lgpersonaldevelopment.co.uk)

### **Greater Good Science Centre at University of California, Berkley**

An extensive online resource comprising blogs, podcasts, videos, tools and educational programmes informed by research. The tools are focused on creating a happier life and more compassionate society. Well worth checking out. <https://greatergood.berkeley.edu>

### **Gretchen Rubin**

Author of *The Happiness Project*, and internationally renowned author this website contains a wide selection of blogs and podcasts about creating a happier, more productive and creative life. <https://gretchenrubin.com>

### **Kristin Neff**

Is one of the world's leading experts on self-compassion. Her website contains a range of exercises and tools focused on developing self-compassion and a comprehensive list of recommended reading. <https://self-compassion.org>

### **Life Coach on The Go**

Life Coach on The Go is an online resource providing a wide range of self-coaching tips, tools, articles and resources. <https://lifecoachonthego.com/about/>. It is merging with the Fierce Kindness Blog <https://fiercekindness.com/page/2/>.

### **Mind Tools**

Provides access to several thousand resources including articles, videos and podcasts to support you in learning management, leadership and personal effectiveness skills. [www.mindtools.com](http://www.mindtools.com)

### **On Being**

The On Being Project is a non-profit media and public life initiative making radio shows, podcasts and tools for 'the art of living'. It explores the intersection of spiritual inquiry, science, social healing, community, poetry, and the arts. <https://onbeing.org>

### **Positive Psychology**

A community of practitioners who have built an online science-based resource of courses, techniques, tools and tips to help you put positive psychology into practice every day. <https://positivepsychology.com>

### **Tara Mohr**

An expert on women's leadership and wellbeing, author of *Playing Big: Practical Wisdom for Women Who Want to Speak up, Create and Lead*. Tara Mohr also developed the global *Playing Big Leadership Programme* and is a Certified Coach. Her website includes a range of resources and blogs. [www.taramohr.com](http://www.taramohr.com)

### **TED**

Several of the people mentioned in the pocket guides have given TED talks. A place where you can explore short powerful talks of 18 minutes or less from some of the worlds most inspiring thinkers on a wide range of topics from science to business to global issues. <https://www.ted.com>

### **Tiny Buddha**

The sites feature blogs, articles and insights on a wide range of personal development topics. Whilst it has its root in Buddhism it is not a site about religion. <https://tinybuddha.com>

## End Note

The Year One: Thriving Not Surviving pocket guides have been funded by the Elizabeth Casson Trust. We would like to extend our thanks to the Trust and to everyone who has contributed to the project. Without the insights that have been shared by the occupational therapy community, with honesty and compassion, this resource would not have been possible.

The Project was led by Dr Lynne Goodacre (an occupational therapist and personal coach) and Rob Young (a writer and artist who helps NHS leaders to communicate).

The project team comprised: Andrew Bates, Stephanie Exley, Joanna Hunt, Bethany Morgan-Davis, Deborah May, Ryan McClure, Rebecca Power, Siobhan Scanlon, Paul Wilkinson, Katy Williams. All of whom were in their first year of practice as occupational therapists.

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Please visit our website ([elizabethcasson.org.uk](http://elizabethcasson.org.uk)) and follow us on Twitter (@elizabethcasso1) for more information.

This is one of a series of pocket guides which includes:

- **Becoming Your Own Cheerleader**
- **Building Your Network of Support**
- **The Book of Blogs**
- **Finding Perspective in Tough Situations**
- **Finding Balance**
- **Questioning Your Inner Critic**
- **Treating Yourself with Compassion**

All are available freely from the Elizabeth Casson website.

