

The Relation of Self-Compassion to Functioning Among Adults with Pain

Thank you for tuning into episode #146 with Karlyn A. Edwards, MS

To learn more about Karlyn Edwards and her research check out the following resources:

1. Paper: [The relation of self-compassion to functioning among adults with chronic pain.](#)
2. Google scholar: <https://scholar.google.com/citations?hl=en&user=oyW98tgAAAAJ>
3. Research gate: https://www.researchgate.net/profile/Karlyn_Edwards/research

Show Notes on Self-Compassion and Chronic Pain

1. What is self-compassion?

- a. Generally, self-compassion is to recognize that even in the face of failure and discomfort, one is worthy of compassion, respect and forgiveness, just as all other human beings are
- b. Coined by Dr. Kristen Neff, which is described to consist of three components:
 - i. **Self-kindness:** Kind to oneself during instances of difficult experiences, setbacks, and failures, rather than self-criticizing
 1. Example: A person has to leave early from a family gathering early due to high pain levels.
 - a. Self-criticizing response might be: I'm an awful family member, and I shouldn't have gone in the first place. Why did I think I could do this?
 - b. Self-kindness response might be: I'm glad I was able to make it for the time that I did. I've just hit my limit for today.
 - ii. **Common humanity:** Understanding one's own experience as connected to the larger human experience, rather than feeling alone or separated from others.
 1. Example: A person is having a high pain day and is finding it hard to connect with others.
 - a. Response that makes one feel more disconnected might be: 'No one understands my pain or how I feel.'
 - b. Response using common humanity might be: 'Everyone struggles with pain in some capacity, and I'm just having a tough day today.'
 - iii. **Mindfulness:** Holding and staying in contact with painful experiences without overidentifying with them. Overidentifying is seeing our current state as something that will persist forever, or integrating the difficult experience into one's identity.
 1. Example: A person wakes up with high pain and is feeling down.
 - a. Overidentifying: 'Here we go again. Every morning I'm in pain and feeling awful. I must deserve this.'
 - b. Holding in awareness: 'I'm feeling lots of pain and upset this morning. What is it that I can do to best take care of myself?'

2. How and why is self-compassion related to chronic pain?

- a. So far, previous research has found it to be related to a number of chronic illnesses, and helpful in supporting and maintaining physical and emotional health
- b. Given this, we wanted to better understand the role of self-compassion in functioning among those with chronic pain, specifically measures of functioning that we know contribute to better treatment outcomes.
- c. The study used a large sample of chronic pain patients (N=339) who just about to start an interdisciplinary treatment for chronic pain in the UK. We then examined if self-compassion would be related to important markers of good health
 - i. These markers were: depression, pain anxiety (how afraid a person is of their pain), physical disability, psychosocial disability (general mental health difficulties), pain acceptance (how okay a person is in feeling and noticing pain), engagement in meaningful activities, and use of pain coping strategies (broken into two categories, one based on pain control and one based on acceptance-based approaches)
- d. What we found is that even after controlling, or keeping constant pain intensity and pain duration (how long people have had pain) across all patients:
 - i. Higher levels of self-compassion was associated with lower levels of depression, pain-anxiety, physical and psychosocial disability, and higher levels of pain acceptance, engagement in meaningful activities, and use of pain coping strategies.
 - ii. What was interesting is that self-compassion was more strongly related to depression, pain acceptance, psychosocial disability, use of flexible pain coping strategies and engagement in valued activities
 - iii. It was less related to physical disability and use of pain coping strategies aimed at reducing and controlling pain intensity
- e. What this tells us is that self-compassion is related to a better life among those with chronic pain, particularly for psychological-related distress rather than curing pain or related health conditions

3. When is self-compassion most helpful? Under what circumstances is self-compassion not helpful?

- a. What these findings illuminate is how self-compassion might be related differently to primary and secondary suffering.
 - i. **Primary suffering** is made up of the unavoidable and inevitable difficult parts of life that everyone experiences at some point. This can be grief/loss, stress, low mood, physical and emotional pain, arguments with loved ones. For those with chronic health conditions, these can also include fast and unforeseen changes in health, physical pain, and physical capabilities.
 - ii. **Secondary suffering** is made up of the ineffective ways in which we respond to primary suffering. This can be thinking negatively about ourselves or others, comparing ourselves to an impossible standard, social isolation, taking our frustrations on others, and no longer engaging in activities that make us happy.



- b. Our findings support that self-compassion may be most helpful during instances of secondary suffering (how we respond to difficult events) rather than reducing primary suffering (eliminating the difficult events themselves).
 - i. **Helpful:** During times of heightened self-criticism, and when engaging in important activities that are meaningful but can be difficult to complete
 - 1. Sometimes self-compassion can be the difference between engaging in a meaningful experience, and watching it pass by
 - ii. **Not helpful:** Is not going to eliminate primary suffering, including physical pain, emotional pain, significant physical disabilities, or chronic health conditions. But, it can reduce the events impact on overall functioning in life.

4. How can I cultivate self-compassion?

- a. **Meditation**, to train mindfulness, to **catch ourselves** when we are in thinking traps, and beating ourselves up
 - i. Meditations: <https://self-compassion.org/category/exercises/>
 - ii. Training to tune our awareness to how we are treating ourselves and get a better sense of our needs in difficult situations
- b. **Things I can ask/tell myself:**
 - i. **'I am not alone in what I am feeling'**. Recognize that you are not alone, no matter what you are experiencing – chronic pain, significant hardships, depression, difficult emotions, it doesn't mean you are alone, it means that you are human. That you, just like everyone else in this world, have difficult experiences.
 - ii. **'I am worthy of forgiveness, compassion and kindness'** - Recognize that you are worthy of forgiveness, compassion, and kindness
 - iii. **'How would I treat a friend in this situation?'**
 - iv. **'How best can I take care of myself in this moment?'**
 - v. **Love is more powerful than fear** - we respond best to caring approaches rather than fear-based ones, so if we can motivate ourselves by positive reinforcements and kindness, we create behavior that is more sustainable
 - vi. **'Should', 'have to'**, are all indicators to slow down to take a moment to notice emotions and re-evaluate, these are indicators of fear-based decisions
 - vii. **For the caregivers**, sacrificing your entire well-being for others is not sustainable, we need to take care of ourselves to give the best care we can to others. **Take the time for yourself**, even if it is just 5 minutes to take a break and do something kind for yourself (sitting quiet, self-compassion break to recognize the difficult emotions you are feeling,)
- c. Resources for book/reading: Kristen Neff, 'Self-Compassion'
- d. Resources for treatment and interventions:
 - i. Acceptance and Commitment Therapy
 - 1. Self-compassion is a specific targeted mechanism in ACT, such that changes in self-compassion mediate treatment outcomes
 - ii. Mindfulness-based interventions
 - 1. Compassion based meditations

2. Training to pick up warning signals for when we are pushing ourselves too far

5. What is next for self-compassion in chronic pain?

- a. Brief interventions are being tested currently to see if we can deliver even small web-based programs to help with self-compassion training, or even brief in-person group and individually delivered interventions
- b. Testing these relations among demographically diverse populations, race/ethnicity, urban/rural, etc.
- c. Research on self-compassion has suggested that it is a pervasively helpful mechanism in reducing the impact of most any kind of hardship
 - i. However, are there specific aspects of self-compassion that are most relevant to chronic pain patients?
 - ii. Could a brief self-compassion intervention that is delivered during routine medical care visits be useful? For whom would this be helpful?

About Karlyn

Karlyn was born and raised in Seattle, Washington, and completed her undergraduate degree at the University of Puget Sound. She is now currently a clinical psychology graduate student at the University of New Mexico, working with Drs. Kevin Vowles and Katie Witkiewitz. She studies important psychological factors that impact chronic pain as well as psychological interventions that can improve the lives of those with chronic pain. She also studies opioid and other substance misuse in the context of chronic pain, specifically how pain impacts medication treatment for those with co-occurring opioid use disorder and chronic pain. In her spare time, Karlyn enjoys travel, snowboarding, surfing, and yoga. She plans to pursue a career where she can continue carrying out research examining important psychological factors and effective interventions for chronic pain and substance misuse.