What is Cognitively-Based Compassion Training?

The root of compassion lies in realizing the interconnected nature of all beings on Earth. Cognitively-based Compassion Training (CBCT), a secular alternative to the Tibetan Buddhist tradition of lojong, trains practitioners to cultivate compassion through straightforward contemplative practices.

In addition to realizing greater compassion, practitioners also find an improvement in their health and well-being.

Geshe Lobsang Tenzin Negi, senior lecturer in Emory University’s Department of Religion, developed CBCT and has since initiated research studies into the effects of compassion meditation. UB Hawthorn spoke with him about how CBCT works, the health benefits of this type of meditation and the different kinds of compassion.

Q. How does CBCT train someone to be compassionate?

A. Cognitively-based Compassion Training (CBCT) draws from what is known as lojong in Indo-Tibetan Buddhism. The strategy is to bring a shift of perspective through reflection about ourselves, our relationship to others as well as the events in our everyday lives and develop an understanding of our interconnection.

Q. Can you give me an example of one of these processes used in CBCT?

A. If a child is in pain or experiencing joy a mother would feel the pain and joy of the child, which would lead to rejoicing in the child’s happiness or concern for the child’s pain. The idea is to expand that feeling of closeness beyond immediate family members to strangers and even those who are somewhat difficult to deal with.

We all share common aspirations like wanting to be happy and free of suffering. So by reflecting on our interconnectedness we realize that all people contribute directly or indirectly to our own accomplishments and well-being. Reflecting on our interconnectedness is the catalyst for compassion. When we relate to someone with compassion and endearment for their difficulties and accomplishments we feel joy in their well-being and feel for their pain and suffering in ways not different than we would feel for a close friend or parent. The training involves a number of strategic reflections that help deepen the perspective in our hearts and minds to better inform the way we feel about others.

Traditionally this is referred to as analytical or discursive meditation. It’s not sitting with one single object or quieting the mind, but taking time to deliberately reflect on how we are all interconnected.

Q. How does compassion meditation benefit health?

A. In many ways. We go to work with this mindset that the workplace is mixed with people that we like, people we don’t like and people that we have a neutral feeling towards. These interactions have an impact on our stress response as our bodies — on an unconscious level — are constantly in a state of alert. Our brain translates that state of alert as danger for your survival and so our body reacts the same way as if it’s in the presence of a tiger that’s about to jump on you.

In our studies with freshmen college students our hypothesis was that if we change the way we relate to others, to see them in a more positive light, it should reduce stress hormones and inflammation in the immune
system. That’s what we found in the meditation group. Those who practiced more had lower levels of cortisol and inflammation. The more you train in compassion the better you cope with stressors. We learn to see the world and people around us not with this lens of danger, but we can relate to them more as family members with common aspirations that we share.

Q. Emory led a study that found a correlation between the practice of compassion meditation and the prevention and reduction of depression. How does practicing compassion meditation have this effect on depression?

A. I’m not a scientist so I can’t tell you in detail, but my understanding is that biomarkers like cortisol, CRP (another stress hormone in our body) and IL6 (interleukin 6 — an immune cell that causes inflammation in our bodies) were necessary in the past to protect our bodies when we’re confronted with tigers or viruses that require the immune system to produce inflammation to tackle these viruses. These actual dangers are now at a minimum, but psychologically we’re perceiving our own coworkers and others as dangerous people, leading our body to respond in similar ways as if we’re in front of a tiger.

Modern medical science apparently is quite clear that the high elevations of these biomarkers are correlated with many modern day illnesses like cancer, Alzheimer’s, and heart disease. So if that is the case, an intervention like CBCT acts as a preventive measure for some of those illnesses.

Q. Why the need for CBCT instead of the more traditional form of lojong?

A. Lojong literally means mind training, which simply means training the mind to become altruistic. Among other things, one of the main focuses in lojong literature is to become more compassionate. The strategies involved in lojong literature are equanimity, impartiality — appealing to that basic fundamental aspiration that people (whether they are friends, strangers or enemies) want to be happy and free from suffering.

Q. So how is CBCT different from lojong?

A. It’s not different. It’s based on lojong, except that it excludes Buddhist beliefs like reincarnation and things like that. It is secular so you can practice it without having to learn in the context of the belief of rebirth and previous and future lives. Wanting to be happy and free are universal aspirations.

Q. How do you define active compassion and aspirational compassion?

A. Aspirational compassion is wanting others’ difficulties or distress to be relieved, but without the commitment to help them find the relief of such distress.

When that compassion is accompanied by the commitment to help the person find relief from whatever difficulties they are going through, that is what is called active compassion. With active compassion there is the resolve to help others, not just wish them to be free or relieved of their suffering, but taken to the next step that I should do whatever is in my capacity to help.

Imagine a father and a distant relative are witnessing a child caught in a burning house. It would be safe to assume that the father and the distant relative will both deeply empathize for the child’s pain and of course want the child to be safe, but most likely the father would jump in to rescue the child. The distant relative may feel for the child’s anguish and danger, but may not have that kind of commitment or courage to actually face the danger himself. The father’s compassion is active compassion and the distant relative’s is aspirational compassion.

Q. In CBCT is the idea to get people to the point beyond aspirational compassion and get to active compassion?

A. Eventually, yes. It doesn’t have to be that dramatic example of a burning house — even a person sitting on a
sidewalk homeless. We feel for his hunger and pain which translates to giving him $2 for some warm coffee or just feeling for him but not being able to do something.

Q. Anything else you’d like to add?

A. It’s becoming clear through social and positive psychology that we’re missing methods to learn to be more compassionate. That’s where I feel the rich Indo-Tibetan Buddhist tradition offers a great gift to humanity despite struggling for its survival under the current Chinese communist regime. There’s so much wisdom and knowledge embodied in the Tibetan contemplative culture that we can appreciate all that it is contributing to the greater health and well-being of the world. Sadly, the homeland where this tradition was kept alive for centuries is coming under greater difficulties for its preservation and survival.


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