



All Together Series

Session 12: *Compassion is Courage: How Our Neurobiology Supports Compassion Cultivation*

Description: The presenter shared key concepts from his capstone project that focused on supporting caregiver compassion in the Emergency Department. This project is built on research of the neurobiology of compassion and how understanding the process of compassion and implementing simple practices can shift the experience of suffering, bringing about greater well-being for both the giver and recipient of care.

Thursday, October 31st, 2024 (12pm-1pm).

AGENDA ITEM	DISCUSSION
Welcome	<p>Facilitator: Melody Jobse, Community Engagement, BCCPC</p> <p>Presenter: Don Cowie, Spiritual Health Clinical Educator Certified Spiritual Health Practitioner and CPE Supervisor- Educator Fraser Health</p>
Presentation/ Discussion	<p>SUMMARY</p> <ul style="list-style-type: none"> • The goal of the session is to reflect on compassion, understand new science behind it, and enhance compassionate practices. • Research suggests compassion training increases happiness, emotional regulation and satisfaction. • Recent study from Calgary identified compassion as a critical factor in perceived emergency care quality. • The presenter explained the differences between sympathy, empathy and compassion. <ul style="list-style-type: none"> ○ Sympathy is seen as distant or pity-based; empathy as connecting but exhausting; compassion as energizing. ○ Compassion leads to active, positive responses to others’ suffering which benefits both the giver and receiver. • Studies indicate that compassion involves pathways for nurturance and reward, releasing oxytocin and dopamine, fostering well being. • Compassion transforms stress responses into courage responses, suggesting a physiological basis for compassion as courageous. • The presenter also focused on compassion’s nourishing effect, lighting up positive brain regions and fostering dopamine and oxytocin release. • The process of compassion: involves seeing suffering, feeling concern, empathy and a connection to the sufferer. This requires action to lessen or relieve suffering

– through feeling, responding and doing something. The key first step is genuinely seeing suffering, which we often overlook or avoid, affecting our capacity for compassion.

- **Action in Compassion:** In spiritual and palliative care, action can mean simply being present with the person, creating a shift toward compassion. For healthcare workers; performing physical tasks, connecting with the person’s humanity brings meaning and can make the role life-giving beyond just tasks.
- **Benefits of Compassion:** quoted from compassionomics- healthcare professionals practicing compassion experience less burnout, greater resilience and better well-being.
- **Empathy vs Compassion:** Neuroscience suggests that empathy alone can be taxing whereas compassion is beneficial, especially in contexts of suffering.
- Compassion serves as an outlet for empathy, suggesting compassion fatigue may be less likely than empathy fatigue.
- Compassion and empathy aren’t solely psychological, they involve biological processes, with our bodies reacting to others’ suffering.
- Caregivers are skilled at compassion for others but often neglect self-compassion.
- Self-compassion involves acknowledging and caring for one’s own suffering, fostering a non judgmental, understanding attitude toward oneself.
- **Components of self-compassion:**
 - **Kindness to self:** treat oneself as kindly as one would to a loved one.
 - **Common humanity:** recognize that suffering and imperfection are universal human experiences.
 - **Mindfulness:** stay aware of suffering without being overwhelmed or over-identified with it.
- **Benefits of self-compassion:**
 - Self-compassion releases oxytocin and dopamine, promoting resilience and well-being.
 - Practices like compassionate touch and positive affirmations are powerful tools.
- **Encouragement to practice:**
 - Numerous resources, exercises and guided meditations can enhance self-compassion.
 - Mindfulness and self-compassion practices help recognize commonality in suffering, fostering growth in compassion.
- Training in compassion involves connecting deeply with the shared human experience of suffering, understanding it and not viewing oneself as separate or superior.
- Mindfulness is key to growing compassion, as it connects us to our own and others’ suffering.

DISCUSSION:

- Participant shared their experience of using imagination and compassion in suffering: Describing sensations of suffering can bring changes in perception, such as reduced intensity or “fieriness” of pain. By imagining and focusing on the suffering together, both client and practitioner can experience relief.
- Neurological studies support the idea that articulating or labeling emotions can alter biological responses, making the experience of suffering more manageable.
- **Innate vs Trainable Compassion:** some people are naturally inclined to be compassionate while others may lack a natural inclination, showing less immediate empathy which raises the question of whether compassion can be trained.
- **Compassion Training:** research shows that compassion can be cultivated such as through mindfulness and meditation which increases compassionate behaviors even after a few sessions. Training effectiveness may vary with naturally compassionate people more likely to engage in and benefit from growth practices.
- **Challenges in Healthcare Compassion:** healthcare workers often experience frustration from wanting to help patients but are constrained by limited resources. Compassion fatigue, or empathy fatigue can develop due to repeated exposure to unmet needs and systemic limitations.
- **Resource Constraints in Care:** many patients desire more support such as home care but the available services are often insufficient leading to difficult decisions for both patients and healthcare workers.
- **Maintaining Compassion:** compassionate healthcare professionals may feel disheartened when they can’t fully meet patient needs and this ongoing tension can wear them down emotionally. The book “Compassionomics” is recommended noting research that even 45 seconds of compassionate interaction can make a significant impact on both patients and caregivers.
- In summary, the presenter emphasized that despite system limitations, healthcare providers should strive to connect with patients’ suffering meaningfully, avoiding the risk of becoming distantly empathetic.

Additional Resources and connect

- [Session recording link](#)
- Stay tuned for registration info for 2025 sessions!