

9 compassion abstracts

january/march '13

Currently the Compassion SIG covers four overlapping areas - Self Compassion, General Compassion, Compassion in Close Relationships and Compassion in the Therapeutic Relationship. Here are ten recent relevant research abstracts:

(Owen, Reese et al. 2012; Del Re, Fluckiger et al. 2013; Dunn, Callahan et al. 2013; Holoien and Fiske 2013; Molix and Nichols 2013; Pace, Negi et al. 2013; Ronay and Carney 2013; Saslow, Willer et al. 2013; Wong and Mak 2013)

Del Re, A. C., C. Fluckiger, et al. (2013). **"Monitoring mindfulness practice quality: An important consideration in mindfulness practice."** *Psychother Research* 23(1): 54-66. <http://www.ncbi.nlm.nih.gov/pubmed/23046287>

Abstract Mindfulness-Based Stress Reduction (MBSR) is an experientially based group intervention empirically supported to reduce psychological symptomatology. Although MBSR has shown to be an effective intervention, little is known about which facets of the intervention are important in producing positive outcomes. This study tested several aspects of mindfulness practice (total practice duration, practice frequency and practice quality) with the primary focus being on validating (i.e., predictive and convergent validity) a new measure of mindfulness practice quality (PQ-M). The PQ-M fit a two-factor solution via a Maximum Likelihood Exploratory Factor Analysis (n=99). Using longitudinal multilevel modeling on a smaller subsample (n=19), preliminary support was found for changes in practice quality over the course of the MBSR intervention. Further, change in practice quality was associated with improvements in psychological symptoms. While this study was exploratory, these findings suggest that practice quality is a relevant factor to promote positive outcomes and may guide mindfulness instructors in providing highly tailored interventions.

Dunn, R., J. L. Callahan, et al. (2013). **"Effects of pre-session centering for therapists on session presence and effectiveness."** *Psychotherapy Research* 23(1): 78-85. <http://dx.doi.org/10.1080/10503307.2012.731713>

The present study tested whether engaging in a mindfulness centering exercise 5 minutes before a session could have a positive impact on therapy, in particular on the therapists' ability to remain present in session and on session outcomes. Results indicated that therapists perceived themselves as being more present in session when they prepared for their sessions by engaging in a mindfulness centering exercises (d=.45), while clients perceived their therapists as being highly present regardless of whether their therapist completed the mindfulness centering exercise. Clients did, however, perceive the sessions as being more effective when their therapists engaged in the mindfulness centering exercise prior to the start of the session (d=.52).

Holoien, D. S. and S. T. Fiske (2013). **"Downplaying positive impressions: Compensation between warmth and competence in impression management."** *Journal of Experimental Social Psychology* 49(1): 33-41.

<http://www.sciencedirect.com/science/article/pii/S0022103112001813>

The compensation effect demonstrates a negative relationship between the dimensions of warmth and competence in impression formation in comparative contexts. However, does compensation between warmth and competence extend to impression management? Two studies examined whether people actively downplay their warmth in order to appear competent and downplay their competence in order to appear warm. In Studies 1a and 1b, participants selected words pretested to be high or low in warmth and competence to include in an e-mail message to people they wanted to impress. As predicted, participants downplayed their competence when they wanted to appear warm (Study 1a) and downplayed their warmth when they wanted to appear competent (Study 1b). In Studies 2a and 2b, compensation also occurred when participants introduced themselves to another person, as evidenced by the questions they selected to answer about themselves, their self-reported goals, and their open-ended introductions. Compensation occurred uniquely between warmth and competence and not for other dimensions, such as healthiness (Study 2a) and political interest (Study 2b), which suggests that the compensation effect extends beyond a mere zero-sum exchange between dimensions.

Molix, L. A. and C. P. Nichols (2013). **"Satisfaction of basic psychological needs as a mediator of the relationship between community esteem and wellbeing."** *International Journal of Wellbeing* 3(1): 20-34.

<http://www.internationaljournalofwellbeing.org/index.php/ijow/article/view/175>

(Free full text available) Past research has shown that possessing a strong sense of community or esteem for one's community is positively related to feelings of psychological wellbeing. Much less research has examined what mechanisms may underlie this relationship. Self-determination theory, a theory of human personality and optimal functioning, proposes the existence of three species-typical basic psychological needs (for competence, relatedness, and autonomy), the satisfaction of which is crucial for experiencing wellbeing. We hypothesized that need satisfaction is a mediator of the relationship between feelings of esteem for one's community and several widely employed measures of wellbeing among a sample of residents living in an urban community in the United States. In accord with the primary hypotheses, the results revealed a robust association between community esteem and both hedonic and eudaimonic measures of wellbeing. Furthermore, the associations between community esteem and wellbeing were mediated by self-reported satisfaction of basic psychological needs. This work contributes to an improved understanding of the complex relationship between esteem for one's community and psychological wellbeing and has implications for debates surrounding the benefits and role of community in individuals' lives.

Owen, J., R. J. Reese, et al. (2012). **"Alliance in action: A new measure of clients' perceptions of therapists' alliance activity."** *Psychotherapy Research* 23(1): 67-77. <http://dx.doi.org/10.1080/10503307.2012.731088>

We developed a new measure, Alliance in Action (AiA), which assesses clients' perceptions of therapist behavior related to fostering and maintaining the alliance. Clients (N=170) were treated by 42 therapists. All clients were currently in therapy. The results of a factor analysis revealed four subscales to the AiA, which reflected clients' perceptions of their therapists' behavior to monitor the therapeutic relationship, the goals for therapy, and progress towards client goals. A fourth subscale emerged that reflected clients' perceptions of therapist avoidance of eliciting feedback. The AiA subscales demonstrated alphas above .70 and they were associated with client-rated alliance and session outcomes in univariate correlation tests. In multilevel models, three of the four subscales were associated with alliance and session outcomes. The AiA may be helpful in understanding how the therapeutic alliance functions in therapy.

Pace, T. W., L. T. Negi, et al. (2013). **"Engagement with cognitively-based compassion training is associated with reduced salivary C-reactive protein from before to after training in foster care program adolescents."** *Psychoneuroendocrinology* 38(2): 294-299. <http://www.ncbi.nlm.nih.gov/pubmed/22762896>

BACKGROUND: Children exposed to early life adversity (ELA) have been shown to have elevated circulating concentrations of inflammatory markers that persist into adulthood. Increased inflammation in individuals with ELA is believed to drive the elevated risk for medical and psychiatric illness in the same individuals. This study sought to determine whether Cognitively Based Compassion Training (CBCT) reduced C-reactive protein (CRP) in adolescents in foster care with high rates of ELA, and to evaluate the relationship between CBCT engagement and changes in CRP given prior evidence from our group for an effect of practice on inflammatory markers. It was hypothesized that increasing engagement would be associated with reduced CRP from baseline to the 6-week assessment. METHODS: Seventy-one adolescents in the Georgia foster care system (31 females), aged 13-17, were randomized to either 6 weeks of CBCT or a wait-list condition. State records were used to obtain information about each participant's history of trauma and neglect, as well as reason for placement in foster care. Saliva was collected before and again after 6 weeks of CBCT or the wait-list condition. Participants in the CBCT group completed practice diaries as a means of assessing engagement with the CBCT. RESULTS: No difference between groups was observed in salivary CRP concentrations. Within the CBCT group, practice sessions during the study correlated with reduced CRP from baseline to the 6-week assessment. CONCLUSIONS: Engagement with CBCT may positively impact inflammatory measures relevant to health in adolescents at high risk for poor adult functioning as a result of significant ELA, including individuals placed in foster care. Longer term follow-up will be required to evaluate if these changes are maintained and translate into improved health outcomes.

Ronay, R. and D. R. Carney (2013). **"Testosterone's negative relationship with empathic accuracy and perceived leadership ability."** *Social psychological and personality science* 4(1): 92-99. <http://spp.sagepub.com/content/4/1/92.abstract>

Two studies examine the relationship between naturally occurring levels of circulating testosterone and empathic accuracy. In Study 1, the authors find that higher endogenous levels of testosterone are negatively related to the accuracy with which people infer the thoughts and feelings of others. In Study 2, the authors use 360 data collected in the field to show that individuals with higher levels of endogenous testosterone are evaluated by their real-world professional colleagues as functioning with lower levels of empathic accuracy. Furthermore, the authors report evidence that this negative relationship between testosterone and perceived empathic accuracy has downstream consequences for perceptions of one's leadership skills and abilities.

Saslow, L. R., R. Willer, et al. (2013). **"My brother's keeper?: Compassion predicts generosity more among less religious individuals."** *Social psychological and personality science* 4(1): 31-38. <http://spp.sagepub.com/content/4/1/31.abstract>

Past research argues that religious commitments shape individuals' prosocial sentiments, including their generosity and solidarity. But what drives the prosociality of less religious people? Three studies tested the hypothesis that, with fewer religious expectations of prosociality, less religious individuals' levels of compassion will play a larger role in their prosocial tendencies. In Study 1, religiosity moderated the relationship between trait compassion and prosocial behavior such that compassion was more critical to the generosity of less religious people. In Study 2, a compassion induction increased generosity among less religious individuals but not among more religious individuals. In Study 3, state feelings of compassion predicted increased generosity across a variety of economic tasks for less religious individuals but not among more religious individuals. These results suggest that the prosociality of less religious individuals is driven to a greater extent by levels of compassion than is the prosociality of the more religious.

Wong, C. C. and W. W. Mak (2013). **"Differentiating the role of three self-compassion components in buffering cognitive-personality vulnerability to depression among chinese in hong kong."** *J Couns Psychol* 60(1): 162-169. <http://www.ncbi.nlm.nih.gov/pubmed/23088681>

Research shows that sociotropy, autonomy, and self-criticism are cognitive-personality vulnerability styles contributing significantly to the development of depression symptoms, but little is known about the factors that may protect sociotropic, autonomous, and self-critical individuals against mental health problems. The present study examined self-compassion components (i.e., self-kindness, common humanity, and mindfulness) as potential moderators to protect these individuals from developing depression. On the basis of survey data from 345 Chinese adults in Hong Kong, the relationships between cognitive-personality vulnerability styles, self-compassion components, and depression were examined. The results of the present study show that when the effect of gender and the 2 other self-compassion components were controlled, self-kindness and mindfulness could moderate the association between autonomy and depression, and the association between self-criticism and depression, while common humanity could moderate the association between self-criticism and depression. Unexpectedly, interaction between sociotropy and mindfulness was found, with the association between sociotropy and depression being stronger among individuals with high mindfulness than it was with individuals with low mindfulness. These results suggest the differentiating role of the 3 self-compassion components in buffering autonomous and self-critical individuals from depression. Applications of self-compassion and the hypothesized moderation model in future psychological interventions are discussed.