



CCSH™

Compassion-Centered Spiritual Health

Overview Webinar

Maureen Shelton, Director of Education
Spiritual Health at Emory Healthcare

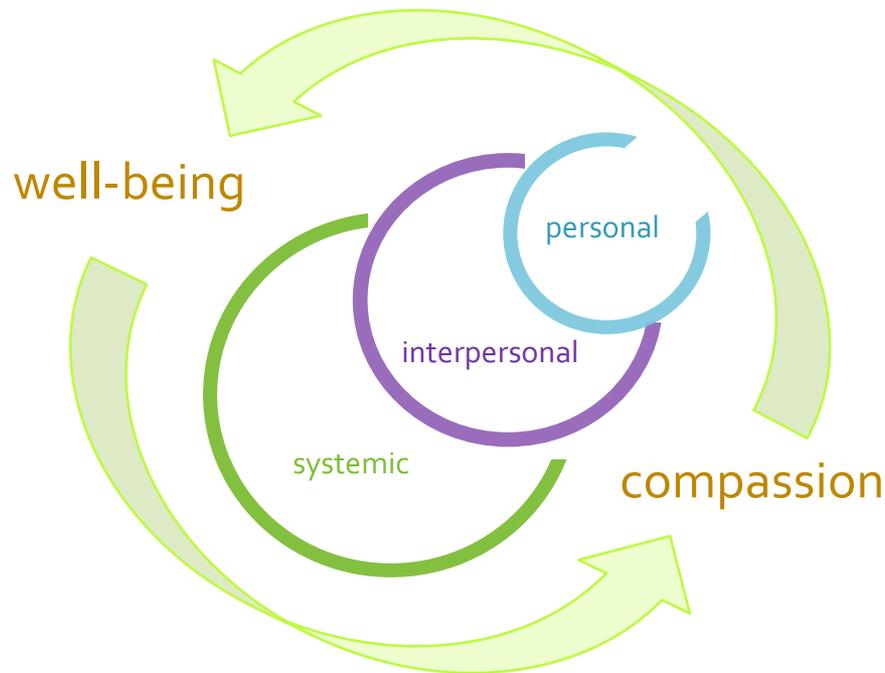
Timothy Harrison, Associate Director for CBCT
Center for Contemplative Science and Compassion-Based Ethics

December 13, 2018
3 pm – 5 pm EDT



CCSH™

Compassion-Centered Spiritual Health



A collaboration between

Spiritual Health at Woodruff Health Sciences Center

and the

**Center for Contemplative Science and
Compassion-Based Ethics**



MISSION

To support spiritual health – individually and collectively – through contemplative practice aimed at strengthening and sustaining compassion rooted in our common humanity.



Webinar Overview

- What is compassion and why do we need it?
- What skills cultivate and support compassion?
- Researched benefits of compassion training
- One method for training compassion (CBCT®)
- Overview of CCSH™ (Compassion-Centered Spiritual Health)
- Next steps



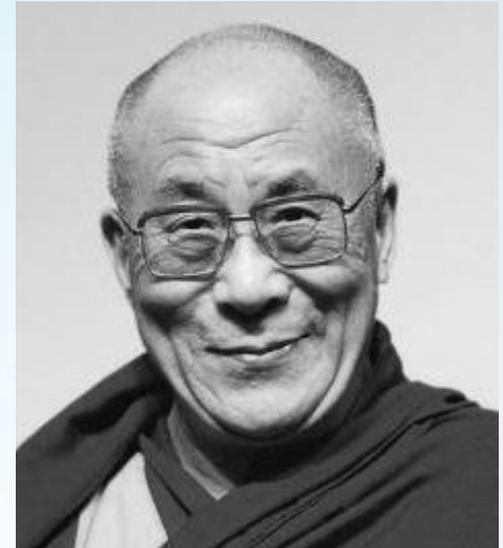
What is compassion?

an affectionate concern, arising from witnessing the distress or difficulties of others, which wishes to see that suffering alleviated

Origins of CBCT

Compassion and love are not mere luxuries. As the source both of inner and external peace, they are fundamental to the continued survival of our species.

*There is nothing amazing about being highly educated; there is nothing amazing about being rich. Only when the individual has a **warm heart** do these attributes become worthwhile.*



His Holiness the Dalai Lama
Ethics for a New Millenium

rumination
anxiety

empathetic
distress

harsh self-
judgment

isolation

distraction

prejudice
favoritism

agitation
stress



II.

mental flexibility

VI.

empathetic concern

III.

self-compassion

V.

gratitude

affection

I.

calm presence

remembered nurturance

inclusivity

IV.

FOUNDATIONAL
PRACTICE

Early CBCT Research

Effect of compassion meditation on neuroendocrine, innate immune and behavioral responses to psychosocial stress

Thaddeus W.W. Pace^a, Lobsang Tenzin Negi^b, Daniel D. Adame^c, Steven P. Cole^d, Teresa I. Sivilli^e, Timothy D. Brown^f, Michael J. Issa^e, Charles L.

Social Cognitive and Affective Neuroscience Advance Access published September 29, 2012

doi:10.1093/scan/nss095

SCAN (2012) 1 of 8

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^c Department of Health, Physical Education & Recreation, Emory University, Atlanta, GA 30322, United States
^d Research Design Associates Inc., 1315 Baptist Road, Atlanta, GA 30322, United States
^e Emory Collaborative for Contemplative Studies, Emory University, Atlanta, GA 30322, United States
^f Weill Cornell Medical College, 525 East 68th St, New York, NY 10021, United States

Compassion meditation enhances empathic accuracy and related neural activity

Jennifer S. Mascaro,^{1,2,3} James K. Rilling,^{1,2,3,4} Lobsang Tenzin Negi,⁵ and Charles L. Raison^{6,7}

¹Department of Anthropology, Emory University, 207 Anthropology Building, 1557 Dickey Drive, Atlanta, GA 30322, ²Department of Psychiatry and Behavioral Sciences, Emory University, Neuroscience, Emory University, 1365C Clifton Road, Atlanta, GA 30322, ³Emory University, Department of Psychology, 1515 North Decatur Road, Atlanta, GA 30322, ⁴Department of Psychiatry, University of Virginia, Charlottesville, VA 22904, ⁵The John and Doris Norton School of Family and Consumer Sciences, University of Arizona, Tucson, AZ 85724, ⁶Department of Psychiatry, Emory University, 1365C Clifton Road, Atlanta, GA 30322, ⁷The John and Doris Norton School of Family and Consumer Sciences, University of Arizona, Tucson, AZ 85724

The ability to accurately infer other people's social cognitive disorders such as autism spectrum disorders is a key component of social functioning. In this study, we used a longitudinal design to investigate the effects of compassion meditation on empathic accuracy. Twenty-eight participants completed the Mind in the Eyes Test (RMET), a test of theory of mind, before and after a 6-week intervention of compassion meditation. Results showed that participants who practiced compassion meditation showed increased neural activity in the amygdala and related regions compared to baseline. These findings suggest that compassion meditation may be a behavioral intervention for improving social cognitive skills.

Keywords: meditation; compassion; neuroendocrine; innate immune; behavioral responses

INTRODUCTION

A fundamental goal of most major world religions is to help people become more compassionate toward others. In the Buddhist tradition, compassion is considered to be a key component of enlightenment. Buddhist mind training (in Tibetan Buddhism) specifically promotes compassion as an initial step toward enlightenment for all people.

While little is known regarding the effects of compassion meditation on neuroendocrine, innate immune, and behavioral responses, it has been suggested that compassion meditation enhances empathic behavior in

Effects of mindful-attention and compassion meditation training on amygdala response to emotional stimuli in an ordinary, non-meditative state

Authors: Gaëlle Desbordes^{*1,2}, Lobsang Tenzin Negi³,

Thaddeus W. W. Pace³, B. Alan Wallace⁴, Charles L. Raison⁵, Eric L. Schwartz²

Institutions: ¹Massachusetts General Hospital, ²Boston University, ³Emory University,

⁴Santa Barbara Institute for Consciousness Studies, ⁵University of Arizona

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KEYWORDS

Meditation;
Compassion;
Mindfulness;
Trier social stress test;
Cortisol;
Interleukin-6

Summary
stress and
emphasize
known abn
examined t
responses
practice in
training in
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meditation
and POMS
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* Corresponding author at: Mind-Body Program, 1365C Clifton Road, Room 5004, Atlanta, GA 30322. E-mail address: craison@emory.edu (C.L. Raison)

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CBCT with At-Risk Populations

Engagement with Cognitively-Based Compassion Training is associated with reduced salivary C-reactive protein from before to after training in foster care program adolescents

Thaddeus W.W. Pace^a, Lobsang Tenzin Negi^b, Brooke Dodson-Lavelle^b, Brendan Ozawa-de Silva^b, Sheethal D. Reddy^c, Steven P. Cole^d, Andrea Danese^e, Linda W. Craighead^f, Charles L. Raison^{g,h,*}

^aDepartment of Psychiatry and Behavioral Sciences, Emory University School of Medicine, Winship Cancer Center, Atlanta, GA 30322, United States

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^cDepartment

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^fPsychiatry,

^gDepartment

^hDepartment

ⁱNorton School

Cognitive-Based Compassion Training: A Promising Preventive Strategy for At-Risk Adolescents

Sheethal D. Reddy · Lobsang Tenzin Negi · Brooke Dodson-Lavelle · Brendan Ozawa-de Silva · Thaddeus W. W. Pace · Steve P. Cole · Charles L. Raison · Linda W. Craighead

Received 12/1/16

KEYWORDS
Inflammation
Early life
CRP
Compassion
Foster care
Saliva

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Abstract
Due to the high prevalence of mental health problems in foster care youth, it is important to develop effective interventions to reduce the risk of mental health problems. This study examined the effects of a brief, manualized, group-based, compassion training (CBCT) on salivary C-reactive protein (CRP) levels in foster care youth. CBCT was associated with a significant reduction in CRP levels from baseline to post-training.

Compassion Meditation for Veterans with Posttraumatic Stress Disorder (PTSD): a Nonrandomized Study

Ariel J. Lang^{1,2} · Pollyanna Casmar⁴ · Raquel Good^{7,8} · Michael J. ...

© US Government (outside the US)

Abstract

Compassion meditation (CM) is a form of Buddhist practice that focuses on developing a sense of compassion toward self and others. A recent national survey shows that 40% of patients with PTSD used a complementary and alternative medicine approach in the past year, with meditation being one of the most commonly used approaches. Meditation is acceptable to veterans with PTSD. Compassion meditation (CM) is a meditative practice that focuses on the wish that the self and others be free of suffering. CM has been associated with increases in positive emotion and social connectedness in non-clinical samples. CM has never been evaluated in relation to PTSD.



A Pilot Study of Compassion Meditation for PTSD

Anne Malakris^{1,2}, Selena Baca³, Pollyanna Casmar⁴, Shahrokh Golshan^{2,4}, Timothy Harrison⁵, Lobsang Negi⁶, and Ariel J. Lang^{1,2}

¹VA San Diego Center of Excellence for Stress and Mental Health, ²University of California San Diego Department of Psychiatry, ³Veterans Medical Research Foundation, ⁴VA San Diego Healthcare System, ⁵Emory University

Funding source: National Center of Complementary and Integrative Health Grant #1R34AT007596-01A1 awarded to Dr. Lang

Introduction	Method	Results
<p>Additional approaches for reducing posttraumatic stress disorder (PTSD) symptoms are needed because no single intervention is universally effective, acceptable and/or feasible (Schottenbauer et al., 2008; Steenkamp et al., 2015)</p> <p>A recent national survey shows that 40% of patients with PTSD used a complementary and alternative medicine approach in the past year, with meditation being one of the most commonly used approaches (Libby, Pilver, & Desai, 2012)</p> <p>Meditation is acceptable to veterans with PTSD (Lang et al., 2012)</p> <p>Compassion meditation (CM) is a meditative practice that focuses on the wish that the self and others be free of suffering (Lang et al., 2012)</p> <p>CM has been associated with increases in positive emotion and social connectedness in non-clinical samples (Engstrom & Soderfeldt, 2010; Mescaro et al., 2013)</p> <p>CM has never been evaluated in relation to PTSD (Chen et al., 2015)</p>	<p>Measures</p> <p>–Primary Clinical Outcome Measure:</p> <ul style="list-style-type: none"> Clinician-Administered PTSD Scale for DSM-5 (CAPS-5) (Weathers et al., 2013) <p>–Secondary Outcome Measures:</p> <ul style="list-style-type: none"> PTSD Checklist (PCL-5) (Weathers et al., 2013) Patient Health Questionnaire, depression items (PHQ-9) (Spitzer, Kroenke, & Williams, 1999) Brief Symptom Inventory (BSI) (Derogatis, 1983) Sheehan Disability Scale (SDS) (Sheehan, Hammett-Sheehan, & Raj, 1996) Slate-Trait Anger Expression Inventory (STAXI-2) (Spielberger, 1999) <p>Procedures:</p> <p>–Baseline evaluation for eligibility and pre-intervention assessment</p> <p>–Randomized to one of two conditions (Ten 90-minute group training sessions with at home practice)</p> <ul style="list-style-type: none"> Compassion Meditation training (CM): veterans version of Cognitively Based Compassion Training (CBCT-Vet) Veteran calm (VC): enhanced relaxation intervention 	<p>Analyses of Secondary Outcome Measures</p> <p>–Repeated measures ANOVA to compare pre- and post measures of anxiety (BSI-ANX), depressive symptoms (BSI-DEP), anger expression (STAXI-AXI), and disability (SDS) by group</p> <ul style="list-style-type: none"> There were no significant changes in general anxiety over time ($F(1, 21)=2.10, p=.16, \eta_p^2=.09$) or across time by group ($F(1, 19)=1.02, p=.32, \eta_p^2=.05$) Participants showed significant overall reductions in depressive symptoms over time ($F(1, 21)=10.40, p=.004, \eta_p^2=.33$); this improvement was not significantly different by group ($F(1, 21)=1.0, p=.33, \eta_p^2=.05$) Participants showed significant overall reductions in disability over time ($F(1, 19)=4.23, p=.05, \eta_p^2=.18$); this improvement was not significantly different by group ($F(1, 19)=.01, p=.91, \eta_p^2=.001$) Participants showed significant overall reductions in expressions of anger over time ($F(1, 21)=6.05, p=.02, \eta_p^2=.22$); there was a trend towards a greater reduction in expressions of anger in the CM vs. VC group ($F(1, 21)=3.74, p=.07, \eta_p^2=.15$) <p>Estimated Marginal Means of BSI-ANX</p> <p>Estimated Marginal Means of BSI-DEP</p>



Suicide and Life-Threatening Behavior
© 2017 The American Association of Suicidology
DOI: 10.1111/sltb.12347

Compassion-Based Meditation in African Americans: Self-Criticism Mediates Changes in Depression

Journal of Clinical Psychology in Medical Settings
https://doi.org/10.1007/s10880-018-9548-9

Shame and Depressive Symptoms: Self-compassion and Contingent Self-worth as Mediators?

VETERANS WITH PTSD

Compassion training for emotional distress among veterans with PTSD



S. D. Reddy
Health4
GA, US

L. T. Negi
Department

T. W. W.

CBCT with Educators

50 % of new teachers leave the profession within their first 5 years.

- *National Commission on Teaching and America's Future*

10% - 35% of first year teachers leave the profession after just 1 year.

- *National Center for Education Statistics, 2015*



96.2% of CREATE teacher residents remain in teaching, based on data from the first three years of program implementation

CREATE: Collaboration and Reflection to Enhance Atlanta Teacher Effectiveness is a federally-funded research program for training new teachers in the Atlanta Public Schools using CBCT and other support measures.



K-12 educator programs

- Atlanta Public Schools (Georgia)
- Woodward Academy (Atlanta)
- Paideia School (Atlanta)
- Peoria Public Schools (Illinois)
- UNAM Prepas Ocho (Mexico City)

CBCT for Healthcare Professionals

**Albert Einstein
Hospital**
Sao Paulo, Brazil



**Emory School
of Medicine**



**University of Illinois
College of Medicine Peoria**

The part of CBCT that was most impactful for me was realizing that kindness toward myself and kindness toward those around me can come from the same place.

Emory medical student
October 2018



**Cambridge Health Alliance
and
The Cleveland Clinic**



**Emory
Continuing
Nursing
Education**

CBCCT in Healthcare Environments

CCSH - Compassion-Centered Spiritual Health



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CBCT Progressive Practices

FOUNDATION: Resting in a Moment of Nurturance

- I. Attentional Stability and Clarity
- II. Insight into Nature of Mental Experience
- III. Self-compassion / Self-care
- IV. Cultivating Impartiality
- V. Appreciation and Affection for Others
- VI. Empathetic Concern & Engaged Compassion



Cognitively-Based Compassion Training: *a technique for cultivating compassion*

- Developed as a protocol in 2005 for research at Emory University by **Prof. Lobsang Tenzin Negi**, PhD, former monk and Director of the Emory-Tibet Partnership.
- Drawn from the *lo jong* (“mind training”) traditions of Tibetan Buddhism, and combined with insights from contemporary emotion science and neuroscience.
- Secularized so that the practices are available to individuals of any – or no - faith tradition.



The Zone of Wellbeing (ZOW)

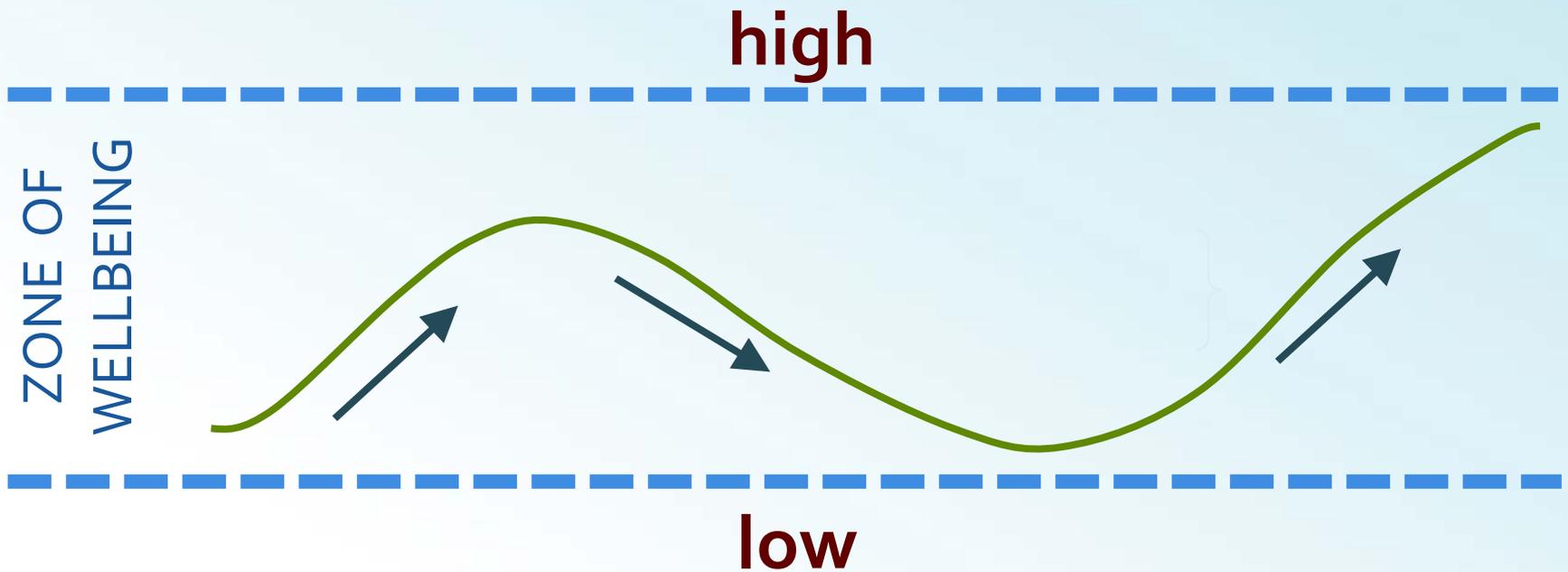
resiliency

the ability to recover readily from illness, depression, adversity, or the like; buoyancy

Elaine Miller-Karas
Building Resilience to Trauma



Understanding Resilience

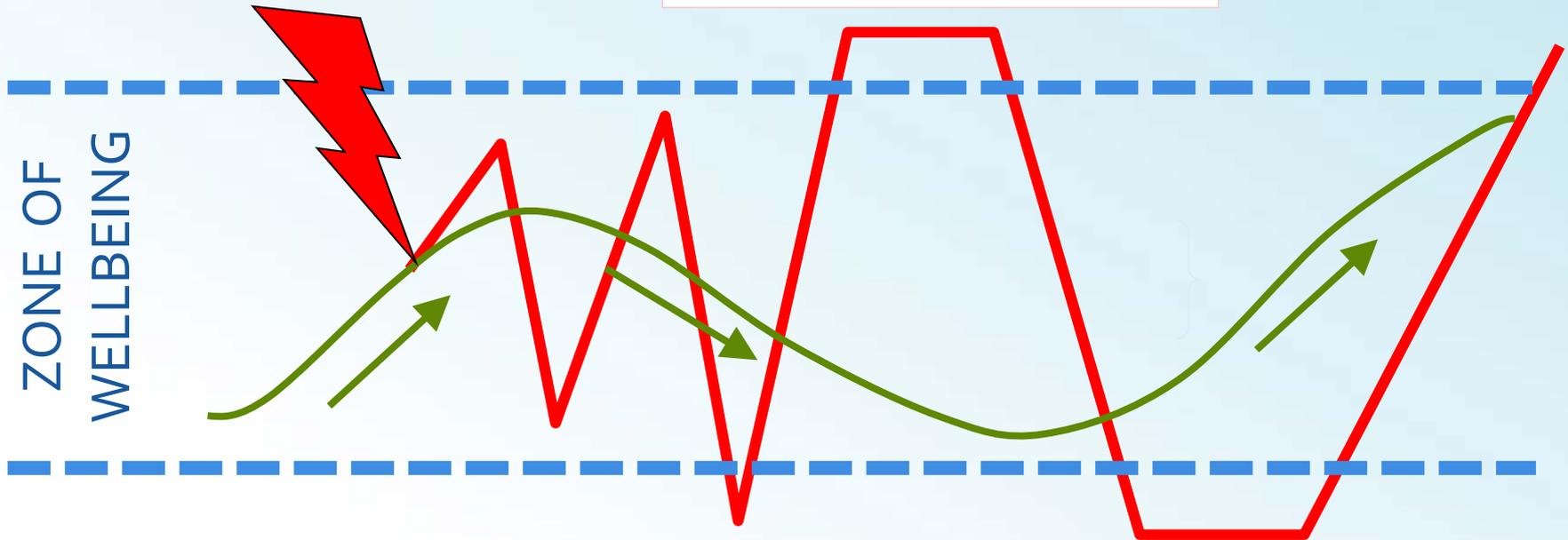


Understanding Resilience

**traumatic / stressful
events or triggers**

stuck in high zone

*Pain Edgy Irritable Mania
Anxiety Panic Angry outbursts*



stuck in low zone

*Depression Sadness Isolated
Exhaustion Fatigue Numbness*



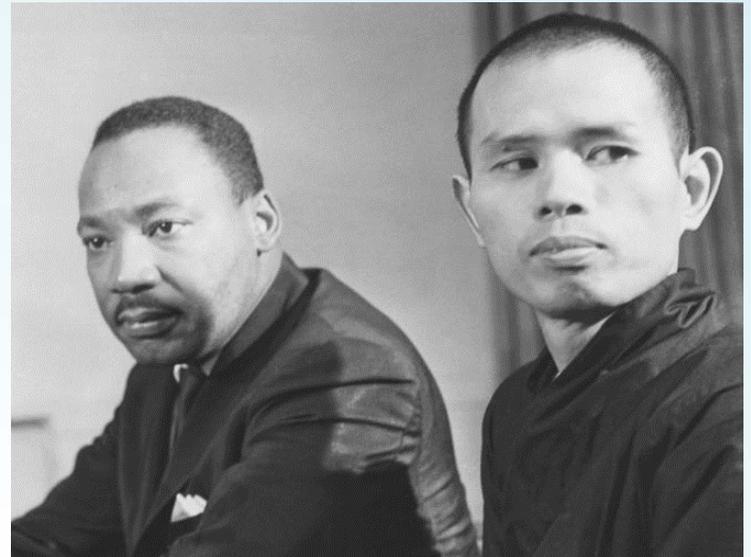
Graphic adapted from an original graphic of Peter Levine/Heller, original slide design by Genie Everett, concept by Elaine Miller-Karas, Trauma Resource Institute.

MODULE I

Attentional Stability and Clarity

Awareness is the first practical ethical action available to us. To do something effectively and **ethically** we need to be our best selves in order to be able to handle the suffering.

Thich Nhat Hanh
Good Citizens



Self-compassion

Core Skills

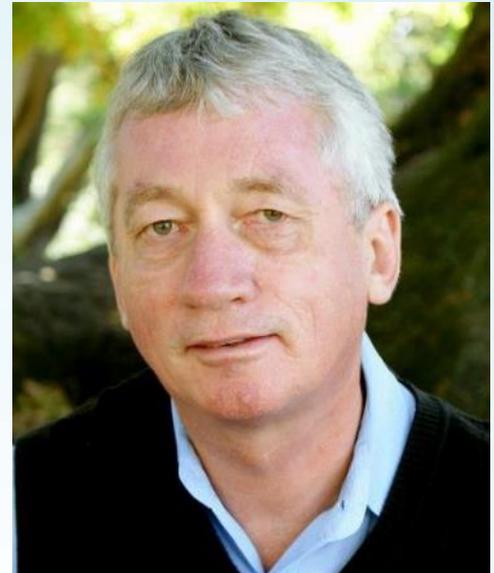
- Accept the reality that outcomes are not 100% in my control because of many factors and circumstances
- Distinguish inevitable difficulties of life from the distress I experience in reaction to them
- Embrace my limitations and vulnerabilities with kindness and acceptance

MODULE IV

Cultivating Impartiality

Identification is the primary portal of empathy.

Frans de Waal, PhD
Primatologist / Philosopher
Emory University
The Age of Empathy



MODULE V

Gratitude and Affection

MODULE VI

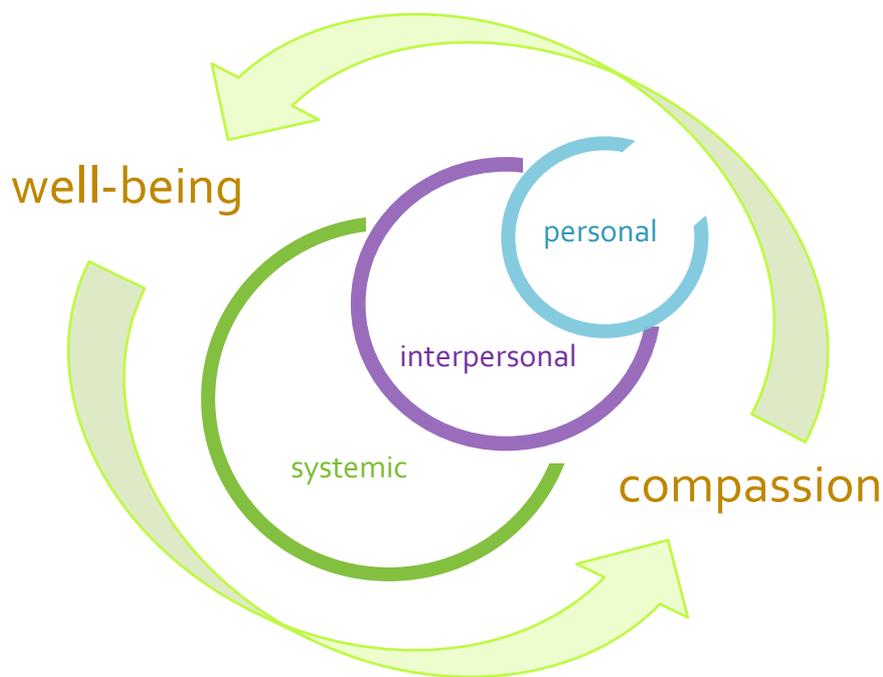
Empathetic Concern & Engaged Compassion



the two conditions necessary for compassion

CCSH™

Compassion-Centered Spiritual Health



A collaboration between

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and the

**Center for Contemplative Science and
Compassion-Based Ethics**



EMORY UNIVERSITY



George Grant, PhD
Executive Director

MISSION

To support spiritual health – individually and collectively – through contemplative practice aimed at strengthening and sustaining compassion rooted in our common humanity.

CCSH™

Why Compassion-Centered Spiritual Health?

- Offers a consistent, systematic way to understand and deepen skills for navigating the varied emotional and behavioral responses required of spiritual healthcare practitioners.
- Fosters resilience in the face of suffering of self and others.
- Cultivates perspective-taking skills to enhance cultural competence.
- Contributes to the institution-wide conversation about and encouragement of a culture of compassion.
- Provide research-based, efficient and effective bedside interventions drawn from CBCT[®].
- Aligns with competencies and the Action-Reflection-Action learning model of ACPE CPE and Spiritual Health.





Compassion-Centered Spiritual Health™ (CCSH™)
 An Emory University collaborative program between Spiritual Health of the Woodruff Health Sciences Center and the Center for Contemplative Science and Compassion-Based Ethics

Research partners

- OVERVIEW OF CCSH™ (1-2 hrs)
- INTRODUCTION TO CCSH™ WORKSHOP (3-4 hrs)

Institutions (Spiritual Health Departments)

Individuals (Spiritual Health Clinicians)

Individuals (clergy)

INSTITUTIONAL PARTNERS

- all spiritual health clinicians trained with CBCT Foundation Course
- minimum percent of spiritual health clinicians trained in CCSH Interventions
- minimum two (2) staff certified as CCSH
- written agreement between Emory University/CCSH and institution
- support and quality/fidelity review, research and program updates
- scaled annual fee
- Registered Teachers after 2 years (1 per year)
- On-site course participants receive Continuing Education Credits through Emory University

CCSH™ REGISTERED TEACHER

- Emory-based training, application required
- Includes Emory CBCT® Instructor Certification, plus certification to teach CCSH™ Interventions, 180 hours (across minimum of 6 months)
- Prerequisite: Spiritual Health professional certification (or be in process)
- Cost: Training fees, plus travel expenses to Emory if needed

CBCT® FOUNDATION COURSE

- Teaches principals and practices for self
- At Emory or on site, & possibly partially self-guided on line, 16-20 hours
- Understand principles and develop practice
- One-time fee

CCSH™ INTERVENTIONS

- Research-based bedside interventions are based on core CBCT skills and competencies
- Emory-based training (unless at accredited institutional partner)
- Clinical certification with evaluative component (portfolio or paper and oral examination), 12 hours + assessment
- One-time fee plus dues and ongoing support for quality/fidelity/research updates
- Prerequisite: Have completed or be enrolled in an ACPE education program

Ministerial Continuing Education (professional)

CBCT® FOUNDATION COURSE

- On site and/or with online or self-guided components
- "Exposure" to principles and practice
- One-time fee

↓ Teaching CBCT® and Training in CCSH Interventions for:
Residents, Staff, CECs, Certified Educators

↓ Teaching CBCT® to:
Healthcare Institution Faculty and Staff

↓ CBCT: Personal integration into professional practice.
 Plus:
CCSH Interventions: Delivery of CCSH assessments and interventions to:
patients / staff

↓ Personal integration into professional practice with:
congregants / clients

↓ CBCT®: Personal integration into professional practice
Interventions: Delivery of CCSH assessments and interventions
patients / staff

Spiritual Health Professions Alignment

- ACPE
- AAPC
- Association of Professional Chaplains
- Canadian Association for Spiritual Care/Association canadienne de soins spirituels
- Neshama: Association of Jewish Chaplains
- National Association of Catholic Chaplains



Next Steps

Individuals

1. Dates for upcoming CBCT course
 - a. March 8 – 10, 2019 at Drepung Loseling Monastery, Inc.
 - b. May 23 – 26, 2019 at Monastery of the Holy Spirit
 - c. February of 2020 at Monastery of the Holy Spirit, Conyers, GA
 - d. Intervention training - fall 2019
2. Join future webinars (i.e., intervention overview, etc)

Institutions

1. Host a lecture, workshop, or full class
2. Send 2 or more staff for Teacher certification
3. Recruit local research partners



THANK YOU!

Comments and questions?

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Timothy Harrison

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