

# Compassion is a Human Super Power

For Teachers & Students

*A Brief Review of the Literature on Compassion*



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Compassion is an emerging field within neuropsychology, offering the promise of human empowerment, self-healing, and self-efficacy that approximates a Human Super Power. The current body of evidence in support of how and why compassion can soothe so many human hurts is broad and inconsistent, and does not yet point to a definitive understanding of how to use compassion for self and others as a curative for human woes. Exploration of current research does point to some practical considerations and strategies for using compassion for self and others to relieve human suffering while promoting positive capacities like psychological and physiological flexibility, resilience, and emotional regulation. Compassion training, therapy, and intervention offer hope to educators for self-care as well as additions to the curriculum to promote the learning and wellbeing of children within educational settings and potentially serve as a bona-fide Human Super Power.

One study revealed that Finnish children who received in-home care at 3 years of age and out-of-home care at 6 years are age were statistically more likely to have the greatest incidence of trait compassion as compared to children who received care at other settings at the critical ages of 3 and 6 (Gluschkoff et al., 2018). Beyond being a possible testament to the positive impact of early childcare on human development, this research study does not inform best practice within a clinical or educational setting.

One possible explanation for the soothing impact of compassion-based therapy and intervention could be a positive shift in the way the brain responds to trauma. Post-traumatic Stress Disorder [PTSD] is a poorly understood process that involves changes in the communication between the Amygdala and the Dorsal Periaqueductal Grey structures within the human brain (Brandao, & Lovick, 2019). Investigation of the neurophysiology of compassion has revealed that processing does not occur in some expected areas (Gao et al, 2021; Kim et al., 2020). Recent fMRI investigation has revealed that compassion can be processed in the Periaqueductal Grey region (Kim et al., 2020).

Heart Rate Variability [HRV] is a critical new metric that is associated with broad aspects of physiological wellbeing and psychological wellness (Lou et al., 2018). Compassion is linked to higher HRV, potentially supporting more flexibility of the individual to maintain psychological and physiological wellbeing (Lou et al., 2018). DiBello et al., (2020) discovered a positive association between compassion of the individual and vagally-mediated HRV.

Beyond stress, trauma and PTSD, self-compassion may also reduce alcohol use related to coping with depression and anxiety as well as coping-related marijuana use (Wisener & Khoury, 2020). Self-compassion may be a potential curative force in Body Dysmorphic Syndrome [BDS]; a recent study found a negative association between self-compassion and BDS (Allen et al., 2020). Meanwhile, self-compassion is documented to be a mitigating factor for perfectionism and eating-disordered cognition in Women of Color (Gwira et al, 2021).

Self-compassion is documented to have a potentially beneficial impact on individuals with Irritable Bowel Syndrome [IBS], and is correlated with reduced level of depressive symptoms, stress, and anxiety (Trindade & Sirois, 2021). Transition to college is a life event associated with increased risk of psychopathology and related depression and anxiety; self-

compassion is associated an increased incidence of transition success, pointing to a possible protective mechanism inherent in the human capacity of self-compassion (Kroshus, Mawrilenko, & Browning, 2021).

While compassion is generally accepted as one part in effective treatment of trauma and PTSD, some individuals who are survivors of maltreatment during childhood may be resistant to practicing self-compassion (Boykina et al., 2018). According to the authors, these survivors of childhood maltreatment are more likely to exhibit signs of psychological inflexibility, which in turn may limit willingness to engage in warmth and kindness toward the self. As a result of this information, effective treatment of Post-Traumatic Stress Disorder symptoms in female survivors of moderate to severe types of child maltreatment should address potential psychological inflexibility and fear of compassion for self.

A preponderance of the preliminary findings on the benefits of compassion-based training, treatment, and intervention is compelling, and puts into question how to utilize compassion in therapeutic and educational settings. One study revealed an increase in resilience and emotional wellbeing of pediatric nurses after one day of self-compassion training (Franco & Christi, 2021). Research indicates that compassion training and intervention can produce efficient neuroplastic responses of the brain centers responsible for emotional regulation and positive emotions (Forster & Kanske, 2021). Mindfulness training has produced positive changes in amygdala volume in some individuals with a history of child maltreatment; increase in volume of the right amygdala is associated with an increase in self-compassion (Joss et al., 2021). Meanwhile, Hilppö et al. (2019) discussed how early childhood educators can promote a culture of compassion among peers.

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