

Chapter 39

Mindfulness and Compassion as Foundations for Well-Being

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Abstract It is widely agreed that well-being is the ultimate goal or at least a primary aim of policy, but what do we know about how to increase well-being? A large body of evidence has accumulated about many and diverse skills and processes that lead to greater subjective well-being. This chapter explores the idea that two mental practices might underlie well-being, and many of the specific skills that form the backbone of positive psychology and other well-being interventions. They are mindfulness and compassion, which are increasingly being used as secular interventions. Evidence from behavioural and neuroscience investigations broadly supports the theoretical accounts of their mode of action. The chapter concludes that not only is there strong and growing evidence of the well-being benefits of mindfulness and compassion training, but that the skills and processes they engender are so fundamental, that learning them is likely to magnify the benefits of other programs designed to enhance well-being.

What do we want for our children? What kind of adults do we want them to become? What kind of world do we want them to inhabit? The answers to these questions are many and various, but a typical response might be – we want our children to be happy and successful, to enjoy learning, to engage in satisfying work that provides a good income, to have loving and supportive relationships, and to live in a secure and peaceful world. Assuming all or most of these goals were achievable, it is very likely that children and adults would experience a high level of subjective well-being.

Why does a high level of subjective well-being matter? It is often justified on the grounds of its instrumental benefits across many areas of our lives. Numerous studies, both cross-sectional and longitudinal have demonstrated that individuals with a high level of subjective well-being tend to do better on measures of learning and

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performance, creativity and relationships, and have better physical health and life expectancy (e.g. Dolan et al. 2008; Huppert 2014). Thus, subjective well-being is associated with outcomes which are good for the individual and good for society. While such outcomes are undoubtedly worthwhile, this is not the main reason why subjective well-being matters; it matters because it is a valuable goal in its own right – an ultimate good.

It is encouraging that progressively more international organisations and policy-makers are recognising that well-being should be a major priority for public policy (Huppert and Ruggeri 2017). Traditional policy objectives of improving standard of living are increasingly seen as means to an end, and that end is the well-being of individuals, families and communities. Organisations such as the US Centers for Disease Control (CDC) and Mental Health Europe now endorse the specific need to promote positive mental health and wellbeing in all policies (Kottke et al. 2016; Mental Health Europe 2016). Following the early example of Bhutan which prioritised Gross National Happiness over Gross National Product, some governments have set up official bodies to promote well-being, e.g. the Department of Happiness in the Indian state of Madhya Pradesh, and the Ministry of Happiness in the UAE.

So if it is widely agreed that well-being is the ultimate goal or at least a primary aim of policy, what do we know about how to increase well-being? This question has been at the forefront of well-being science and positive psychology, and a large body of evidence has accumulated about many and diverse skills and processes that lead to greater subjective well-being. Among these are generic processes such as self-regulation, which is involved in managing emotions, thoughts and behaviours, and underlies resilience, our ability to recover from difficulties and setbacks. There are also specific skills that have been shown to increase well-being, and many helpful programs have been developed for children and adults. These include cultivating gratitude, which enhances well-being and positive relationships (e.g. Morgan et al. 2017; Watkins 2014; Wood et al. 2010), programs that develop character strengths (e.g. Niemiec 2013; Quinlan et al. 2012), and resilience programs (e.g. Robertson et al. 2015). It should be noted, however, that although there are many positive findings in relation to positive psychology interventions, some recent meta-analyses have failed to confirm these benefits (Bastounis et al. 2016; Bolier et al. 2013; Cutuli et al. 2013). Another approach to enhancing wellbeing is through techniques that increase the frequency of positive emotions, and the effect is both direct (increased hedonic well-being) and indirect, through the influence of positive emotions on a wide range of attitudes, behaviours, and physiological responses (e.g. Fredrickson and Joiner 2002; Kok et al. 2013; Tugade et al. 2016).

What I would like to explore is the idea that two mental practices might underlie well-being, and many of the specific skills that form the backbone of positive psychology and other well-being interventions. They are mindfulness and compassion. In the West they are increasingly being used as secular interventions, and much of the teaching is derived from ancient Buddhist philosophy, although they have been the concerns of many wisdom traditions. I briefly summarise theoretical understandings of these two practices, focusing on possible mechanisms by which they may produce their beneficial effects. I also summarise evidence from behavioural and neuroscience investigations, which broadly supports the theoretical accounts of their mode of action. I conclude that not only is there strong and growing evidence

of the well-being benefits of mindfulness and compassion training which makes them powerful interventions in their own right, but that the skills and processes they engender are so fundamental, that learning them is likely to magnify the benefits of other programs designed to enhance well-being.

A Foundational Role for Mindfulness Practice

Most of the time, most of us are busy reacting to events and people around us, and to the torrent of our sensations, thoughts and feelings. We are swept up in the drama of our lives and may become overwhelmed by what we are experiencing. We rarely pause to reflect on our ongoing experiences, stepping back so we can savour the positive ones and come to terms with the negative or painful ones. It is little wonder that so many of us feel so stressed and distressed, and in increasing numbers are seeking to find peace in our frantic world (Williams and Penman 2011).

The ancient practice of mindfulness is a form of mental training that allows us to regulate what goes on in our mind rather than being at its mercy. Mindfulness is the ability to notice what is going on around us and inside us, and to shift or maintain our attention at will. Mindfulness training teaches people to observe their ongoing experience with curiosity and kindness. It typically begins with the repeated practice of focusing on bodily sensations or the flow of the breath, and learning to gently refocus on the body or breath whenever we notice that the mind has wandered, which all minds frequently do.

Even at this most basic level of mindfulness practice, a number of important processes are being developed. The most basic is awareness – bodily awareness and self-awareness. This is brought about through a perceptual shift, the ability to stand back from our experience, and this shift promotes emotion regulation and our ability to distinguish between our thoughts and reality (Shonin et al. 2015). Attention training is another basic process intrinsic to mindfulness, i.e. learning how to focus, maintain, and shift attention – a form of self-regulation. But mindfulness is more than ‘bare awareness’ or ‘bare attention’. Intrinsic to mindfulness training is a particular attitude towards awareness and attention – an attitude of openness, curiosity, interest, non-judgement, and kindness, as in gently refocusing attention when it has been hijacked.

So much for the theory, but is there any empirical evidence that mindfulness enhances well-being, and that it is these processes that are being activated when we engage in mindfulness practice? The evidence currently available strongly suggests yes, although the need for rigorous research continues. Numerous studies have shown a strong relationship between dispositional level of mindfulness and measures of well-being (Brown and Ryan 2003; Giluk 2009), and intervention studies show both reductions in symptoms of distress and increases in positive affect and other aspects of well-being (Batink et al. 2013; Geschwind et al. 2011; Schonert-Reichl and Lawlor 2010; Weare 2016; Zoogman et al. 2015). There is also support for some of the hypothesised mechanisms of action, such as increased awareness, attentional control, and self-regulation, although there have been some mixed findings (Creswell 2017; MacCoon et al. 2014), and not all studies show benefit of

mindfulness training on positive well-being outcomes (e.g. Goyal et al. 2014).¹ Functional neuroimaging studies show that a mindfulness induction procedure leads to areas of increased activation in brain regions known to be associated with attentional control, emotion regulation, and self-awareness (Tang et al. 2015), while structural neuroimaging shows that at the end of a standard 8-week mindfulness training program, there is increased neuronal density in brain structures associated with attention, learning and memory, with self-awareness and bodily awareness, and with emotional control and compassion (Hölzel et al. 2011).

The more we are able to embed the basic skills of noticing whatever we are experiencing, focussing on these experiences whenever we choose to, and regulating our attention with curiosity and kindness, the more successful we are likely to be in carrying out the tasks of our daily lives. It has been proposed for example that situational awareness can increase our ability to understand the physical and social environment, which is likely to lead to better relationships, decision-making and job performance (Shonin and Van Gordon 2016). Likewise, awareness of our feelings could underpin emotion regulation and resulting resilience and mental health outcomes, while awareness of our thoughts could lead to clarification of our motivations and values (Nila et al. 2016; Shonin and Van Gordon 2016). A series of experiments by Papiés et al. (2015) found that following mindful attention training, participants became more conscious of their motivations, and subsequently altered their preferences and made healthier choices. Garland et al. (2015) describes how mindfulness training can ultimately lead to a deepened capacity for meaning-making and greater engagement in life.

Over and above the specific skills that are the focus of mindfulness training, and the downstream effects of these skills, its stress reduction effect, including reduced autonomic arousal and resulting physical and mental relaxation (Creswell and Lindsay 2014) is very likely to benefit behaviour more broadly. A review of the effects of mindfulness on psychological health concludes that “mindfulness brings about various positive psychological effects, including increased subjective well-being, reduced psychological symptoms and emotional reactivity, and improved behavioural regulation” (Keng et al. 2011, p. 1041). And although mindfulness training typically has an individual focus, it has also been shown to increase empathy, compassion, and prosocial behaviour (Creswell 2017; Donald et al. 2017; Tan et al. 2014). The proposed mechanisms of such effects are increased awareness of another person’s experiences and needs, bodily awareness of one’s empathic response, a reduction in the personal distress that can lead to avoidance of another’s suffering, and awareness of the pleasure derived from giving help. These are among the many reasons I am suggesting that mindfulness practice be regarded as foundational for well-being.

A Foundational Role for Compassion Practice

While mindfulness alone has been shown to produce many well-being benefits, it has long been recognised in Buddhist teaching that true well-being requires both mindfulness and compassion. The crucial role of compassion is captured in the

¹For a detailed explanation of discrepant findings see Huppert (2017).

quote: “*If you want others to be happy, practice compassion. If you want to be happy, practice compassion*” (Dalai Lama 2010).

Recent scientific evidence supports the view that humans are fundamentally social. The quality of our relationships has a profound influence on our well-being and the well-being of those around us, with empathy and compassion playing an important role. Neuroscience research has shown that the social pain we feel if we are ostracised produces activation in the same brain regions as physical pain (Eisenberger and Lieberman 2004), while feelings of warmth and concern for others produce activation in brain regions associated with affiliation and positive affect, as well as the reward centres of the brain (Singer and Klimecki 2014).

Compassion encompasses caring attitudes and behaviours towards ourselves as well as others. Self-compassion is the ability to treat yourself in the same kind and caring way you would treat a dear friend who is suffering, along with the recognition that suffering and personal inadequacy is part of the shared human experience (Neff 2003).

Compassion towards others is characterised by feelings of warmth and concern for the other, as well as a strong motivation to help. This contrasts with empathy, which is *sharing* the feelings of another. Empathic responses can be seen in very young children and appear to be hard-wired, having probably evolved to enable us to understand what is going on in someone else’s mind (de Waal 2010). Empathy may be a prerequisite for compassion, but sharing someone’s pain can be distressing, so if a person stays in empathy this can lead to withdrawal, avoidance and burnout (Singer and Klimecki 2014). This report also confirms that there are entirely different patterns of brain activation following experimentally induced empathy compared with compassion.

The practice of self-compassion is integral to mindfulness training, as exemplified by the kindly, gentle attitude taken towards difficult experiences. There is evidence that it is the self-compassion component of mindfulness training that is the strongest predictor of relapse prevention among depressed patients (Kuyken et al. 2010). Benefits of self-compassion for positive well-being have also been shown. In a recent study of the effects of mindfulness training in a non-clinical adolescent sample, change in self-compassion was found to be a stronger predictor of well-being outcomes than change in mindfulness (Galla 2016). A systematic review and meta-analysis concluded that self-compassion training produced significant increases in happiness, life satisfaction, optimism and self-efficacy (Zessin et al. 2015). Further, there is evidence that training does not need to be prolonged. Short self-compassion exercises have been shown to increase motivation to change behaviour for the better (Breines and Chen 2012), and a 1-week self-compassion program increased happiness for up to 6 months compared to an active control group (Shapira and Mongrain 2010).

Turning to compassion towards others, there is evidence that compassionate feelings and helping behaviour increase well-being. A systematic review of the effects of compassion meditations found significant improvements across five psychological outcomes: positive and negative affect, psychological distress, positive thinking, interpersonal relations, and a performance measure of empathic accuracy (Shonin et al. 2015).

There is also evidence that compassion interventions increase pro-social behaviour (Jazaieri et al. 2013; Leiberg et al. 2011), and this could have the effect of increas-

ing interpersonal and social well-being. Giving help increases the well-being of both helped and helper, i.e. doing good makes us feel good (Weinstein and Ryan 2010).

There is a rapidly growing interest in introducing compassion programmes in schools. This may be in part a response to misconceived anti-bullying programs which have too often focused on the reduction of harm rather than the promotion of kindness. Newer programs tend to combine mindfulness and compassion. For instance, a small randomised controlled trial of a Kindness Curriculum for pre-school children found significant benefits on pro-social behaviour and relationships, as well as on cognitive flexibility and delayed gratification, a self-regulation capability (Flook et al. 2015). A randomised trial of the Call to Care program in primary schools showed significant decreases in symptoms of stress and anxiety, along with large reductions in stereotyping and prejudice, and an increased willingness to help the 'out-group' (Berger and Tarrach 2017; Berger et al. 2017). Compassion training is also being advocated in organisations, to improve relationships and reap the benefits of a caring culture (Worline and Dutton 2017), but to date, there is little evidence of organisational benefits, beyond anecdotes and qualitative surveys. This is an area that is ripe for quantitative research.

Mindfulness and compassion should be viewed as complementary practices. As we have seen, self-compassion is an integral part of mindfulness training, and now an increasing number of mindfulness programs are incorporating explicit training in compassion towards others. This combined approach acknowledges that well-being arises in part from the relationship we have with our ongoing experience, and in part from the way we respond to, and act towards others.

Looking to the Future

Individuals, organisations, and policymakers, even if they recognise the enhancement of well-being as a priority, are confronted with the question of how best to achieve this. Should they for instance focus on typical exercises from positive psychology that build gratitude or positive emotions, or on programs designed to develop character strengths or build resilience? This question cannot easily be answered since there is a dearth of research directly comparing the effectiveness of the different exercises and programmes.

In this brief exploration of two ancient well-being practices, mindfulness and compassion, I have suggested that the skills people learn are so fundamental, and their impacts on daily life so wide-ranging, that these practices could be regarded as foundational for well-being. After all, what could be more foundational to mental skills than awareness, attention, and self-regulation? And what could be more foundational to relationships than empathy and acting kindly? If taught before other forms of well-being training, it seems likely they would magnify the benefits of subsequent training – although this is of course an empirical question.

Well-being science is a relatively new endeavour, and there is much further work to be done. Funding for larger, long-term studies should be regarded as a priority. Nevertheless, the existing evidence of foundational benefits from mindfulness and compassion training suggests that if we genuinely desire to increase well-being for

individuals, organisations and society, we would do well to consider embracing and extending these programs, while maintaining the quality and integrity of the training.

It is worth asking what economic policy would look like if it prioritised well-being. Singer (2015) has set out a vision of what life could be like if we had a caring economy, based on the principles of mindfulness and compassion. There is a real chance that the widespread adoption of the foundational skills described in this essay could support this vision, increasing the numbers of happy, fulfilled, socially responsible individuals, and thriving, productive, inclusive organisations and communities.

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